



Infor Infinium HCM Human Resources Guide to Setup and Processing for Benefits Administration

Volume 2

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The Infinium Human Resources *Benefits Administration* function provides you with detailed employee benefit enrollment history. You can review this history on-line using the *Display Employee Enrollments*, *Display EE Enrollments - Plan* and *Update Employee Enrollments* functions. The history is especially useful when you need to research an employee's benefit enrollment history or verify when you updated an employee's benefit enrollment information.

Because Infinium Human Resources maintains detailed employee benefit enrollment history, it requires you to retain all benefit plan controls, even for plans that are no longer active, because the history records of employees may contain both old and current plans.

Although it is convenient to retain all employee benefit enrollment history information on your system indefinitely, over time the benefit history file can become large and consume too much space on your system. If you need to reduce file sizes on your system, you can run the purges listed below:

- *Purge Benefit Enrollment History*
- *Purge Benefit Plan & Enrollments*
- *Purge ACA Transmission History*

We strongly recommend that you work with a technical staff member in your organization when you purge benefits information from your system.

The chapter consists of the following topics:

Topic	Page
Overview of Benefit Data Purges	11-2
Purging Employee Benefit Enrollment History	11-4
Purging Benefit Plans and Enrollment History	11-29

Overview of Benefit Data Purges

You can use the options listed in the following table to remove benefit information from your system:

Function Name	Files Purged
<i>Purge Benefit Enrollment History</i>	Employee Benefit Enrollment History file (PRPBL)
<i>Purge Benefit Plan & Enrollments</i>	Benefit Plans (PRPBP) Employee Benefit Enrollments (PRPBE) Employee Benefit Enrollment History (PRPBL) Employee Benefit Enrollment Beneficiaries & Dependents (PRPBM) Employee Benefit Enrollment Beneficiaries & Dependents History (PRPBH) Dependent Benefits and Coverage (PRPBX)
<i>Purge ACA Transmission History</i>	ACA Transmissions file, PRP1094T 1094-C Return History file, PRP1094CH 1095-C Return History file, PRP1095CH

You use the *Purge Benefit Enrollment History* function to remove only employee benefit history records from your system. You can keep the purged records in a separate file on your system so that you can still view them on-line, or you can save the purged records onto a backup tape.

You use the *Purge Benefit Plans & Enrollments* function to remove a benefit plan control and all associated employee enrollment records, benefit enrollment history records, and beneficiary and dependent records connected to the purged enrollment records. You cannot use this function if there are any employees currently enrolled in the plan. You can keep the purged records in a separate file on your system so that you can still view them on-line, or you can save the purged records onto a backup tape.

You use the *Purge ACA Transmission History* function to remove Affordable Care Act (ACA) transmission history data.

Objectives

After you complete this chapter, you should be familiar with how to perform the following activities:

- Purge, display, save, restore and merge employee benefit enrollment history
- Purge, display, save, restore and merge benefit plans and associated employee enrollments, history, beneficiaries and dependents

Purging Employee Benefit Enrollment History

You use the *Purge Benefit Enrollment History* function to remove records from the employee benefit enrollment history file in your Infinium Human Resources database. You can keep the information on-line in the purged benefit enrollment history file or remove it from your iSeries to a tape backup. This topic contains the following sections:

- Purging Benefit Enrollment History
- Displaying Employee Enrollments with Purged History
- Displaying Employee Enrollments with Purged History by Plan
- Printing Purged Enrollment History
- Saving Purged Benefit Enrollment History
- Restoring Purged Benefit Enrollment History
- Merging Purged Benefit Enrollment History
- Clearing Purged Benefit Enrollment History

You use the *Purge Benefit Enrollment History* function to remove records from the Employee Benefit Enrollment History file (PRPBL). When you run the purge function, the system transfers the benefit enrollment history records to the Purged Benefit History file (PRPBLT) in your current database library on the iSeries.

The system can remove benefit enrollment history records from all employers on your system, or you can use the following selection criteria on the Purge Benefit Enrollment History screen to limit the information the system should remove to:

- a date range
- an employer
- a benefit identity
- a particular benefit plan within the specified identity
- employees assigned to particular status codes
- only terminated employees

After the system purges the benefit enrollment history records, it reorganizes the benefit enrollment history file (PRPBL). This may take some time, depending on the number of records remaining in your benefit enrollment history file.

Note: This function requires exclusive use of the benefit enrollment history file (PRPBL). We recommend that you use this function when Infinium Human Resources and Infinium payroll users are not using the system. We also recommend that you back up the benefit enrollment history file before you execute this option.

Follow these steps to use the *Purge Benefit Enrollment History* function:

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data-History*.
- 4 Select *Purge Benefit Enrollment History [PBEH]*. The system displays the screen shown in Figure 11-1.

The screenshot shows a terminal window titled "Infinium: Purge Benefit Enrollment History". At the top, it displays the date and time "10/18/95 18:00:04" and the function name "Purge Benefit Enrollment History" along with file names "PRGPHS" and "PRDPHS". The main area contains a form with the following fields and values:

- Employer: ZUS
- Purge from date: (empty)
- Purge through date: 123195
- Benefit ID: L01
- Benefit Plan: I1W
- Incl EEs in STS grp: (empty)
- Incl Term EEs Only?: 0

Below the form, there is a warning message in a red box: "WARNING: This function requires exclusive use of file PRPBL. It cannot be run when other people are using the file." At the bottom, there are function key shortcuts: "F3=Exit", "F4=Prompt", "F10=QuikAccces", and "F18=Message Lin". A status line indicates "The print operation is complete." The bottom of the window features a status bar with a yellow box containing the number "5", and buttons for "F12", "Down", "Up", and "Enter".

Figure 11-1: Purge Benefit Enrollment History screen

- 5 Use the information below to fill in the fields on this screen.

Employer

Type the value that identifies the employer for which you are purging benefit enrollment history. Press F4 to display a list of valid values.

You must enter a value in this field or in the *Employer Group* field.

Employer Group

Type the value that identifies the group of employers for which you want to purge benefit enrollment history. You must enter information in this field or the *Employer* field. You use code type **ERG** to define employer groups. Press F4 to display a list of valid employer groups.

You must enter a value in this field or in the *Employer* field.

Purge from date

Type the earliest date the system should use to select benefit enrollment history records to be purged. The system compares this date to the *Last Update Date* field (BLLSTH) in the benefit enrollment history file. The system purges all benefit enrollment history records whose *Last Update Date* field is the same as or after the date you specify in this field.

Leave this field blank if you want the system to purge all benefit enrollment history records that are the same as or before the date you enter in the *Purge through date* field below.

Purge through date

Type the latest date the system should use to select benefit enrollment history records to be purged. The system compares this date to the *Last Update Date* field (BLLSTH) in the benefit enrollment history file. The system purges all benefit enrollment history records whose *Last Update Date* field is the same as or before the date you specify in this field. You must type a date in this field.

Note: The *Last Update Date* field in the benefit enrollment history file reflects the system date when users made manual changes to employees' enrollment record or when you ran the *Mass Update Enrollments* function to process updates to employee enrollment records.

Benefit ID

If you entered a value in the *Employer* field, you can use this field to specify the benefit identity for which the system should purge benefit enrollment history. The system compares the value in the *Benefit ID* field in employee benefit enrollment history records to the value you specify here and removes those records whose *Benefit ID* field matches the specified value. Press F4 to display valid values for this field.

Leave this field blank if you want the system to remove benefit enrollment history records regardless of the benefit identity with which they are associated.

Benefit Plan

If you entered a value in the *Employer* and *Benefit ID* fields, you can use this field to identify a particular benefit plan within the specified identify for which the system should purge benefit enrollment history. The system compares the values in the *Benefit ID* and *Benefit Plan* fields in employee benefit enrollment history records to the values you specify on this screen and removes those records whose *Benefit ID* and *Benefit Plan* fields match the specified values. Press F4 to display valid values for this field.

Leave this field blank if you want the system to remove benefit enrollment history records regardless of the benefit plan with which they are associated.

Include EEs in STS grp

If you entered a value in the *Employer* field, you can type the status reporting group code value that identifies status code values the system should use to select employee benefit enrollment history records to purge. You use code type **STG** to define code values for this field. You use the *Update Status Reporting Groups* function to assign one or more code values from code type **STS** to each status reporting group. Press F4 to display valid values for this field.

The system compares the status code value(s) associated with the status reporting group you specify in this field to the value in the *Status* code field in each employee's basic data record. The system purges benefit enrollment history records for those employees whose status code value is included in the specified status reporting group. You can only use this field if you entered a value in the *Employer* field on this screen.

Leave this field blank to purge benefit enrollment history records regardless of each employee's status code value.

Include Term EEs Only?

Use this field to indicate that only benefit enrollment history records of terminated employees should be purged. The system uses the *Termination* field in each employee's Basic Data record to identify terminated employees. The *Termination* field in Basic Data is blank for active employees and contains a code value for terminated employees.

Valid values are:

- 0** Include all employees in the purge, both active and terminated
 - 1** Include only terminated employees in the purge
-

- 6 Press Enter after you fill in the fields on this screen. The system displays the following message at the bottom of the Purge Benefit Enrollment History selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to remove records from the employee benefit enrollment history file (PRPBL) and transfer them to the purged employee benefit enrollment history file (PRPBLT). The system automatically reorganizes the benefit enrollment history file after the purge is complete.

Displaying Purged Benefit Enrollment History

When you run the *Purge Benefit Enrollment History* function, the system removes the specified records from the benefit enrollment history file (PRPBL) and transfers them to the purged benefit enrollment history file (PRPBLT). If you keep the purged benefit enrollment history file on your iSeries, you can use the following functions to display the purged information:

- *Disp EE Enroll W/Purged Hist*
- *Disp EE Enroll W/Purged Hist – Plan*

These options are identical to the *Display Employee Enrollment* and *Display EE Enrollment - Plan* functions in the *Benefits Administration* option except they display history information from the purged benefit enrollment history file rather than the active benefit enrollment history file.

The *Disp EE Enroll W/Purged Hist* function shows the purged benefit enrollment history associated with the plans in which a specified employee is currently enrolled. The *Disp EE Enroll W/Purged Hist-Plan* function shows purged benefit enrollment history for all employees currently enrolled in a specified plan.

In both displays, the system initially shows the plans in which employees are currently enrolled. You can use a function key on each display screen to view purged benefit enrollment history for plans associated with the identity of the employee's current plan.

Displaying Purged Benefit Enrollment History for an Employee

You use this function to view purged benefit enrollment history associated with the plans in which a specified employee is enrolled. You must keep the purged benefit enrollment history file (PRPBLT) on-line to use this function.

Follow these steps to use the *Display EE Enroll w/Purged Hist* function:

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data - History*.
- 4 Select *Disp EE Enroll W/Purged Hist* [DSP1BENHST]. The system displays the Display Employee Enrollments employee selection screen shown in Figure 11-2.

```

8/08/02 12:14:51      Display Employee Enrollments      PRGBEI      PRDBEI

Employer . . . .  ___ +
Employee . . . .  _____ + -or- Last Name . . . .  _____ +

                                     -

F3=Exit F4=Prompt F10=QuikAccess

```

Figure 11-2: Display Employee Enrollments employee selection screen

- 5 Use the following information to fill in the fields on this screen:

Employer

Type a value that identifies the employer for which you are displaying benefit enrollment history. Press F4 to display a list of valid values.

You must enter a value in this field.

Employee

Type the number assigned to the employee whose purged benefit history information you want to display.

Last Name

Type the last name of the employee whose purged benefit history information you want to display.

- After you fill in the employee number, press Enter. The system displays the Display Employee Enrollments plan selection screen shown in Figure 11-3.

```

8/08/02 12:30:15      Display Employee Enrollments      PRGBEI      PRDBEI

Employer . . . . : ZUS      SAMPLE US COMPANY
Employee . . . . :      80005 ACCURATE,ALAN N
Plan Year . . . . : 2002 +   Tax ID . . . . : 083-44-1266

5=Display
Opt Benefit Identify      Plan Plan Description
= PERPETUAL LIFE INSURANCE COMPA LI1BW LIFE INSURANCE 1 X BASE PAY - BIWEEKLY
- MEDICAL PROVIDER #1      M1FBP 2002 PLAN TEST
-                          M1FW MED FAMILY HMO WEEKLY
- RETIREMENT PLAN          RETBW RETIREMENT PLAN - BIWEEKLY EMPLOYEES
- SAVINGS BONDS           SBWK SAVINGS SCHEME
- SPENDING ACCOUNTS      SPEND SPENDING ACCOUNT
- EMPLOYEE SAVINGS PLAN #1 401KB 401K

F3=Exit F4=Prompt F10=QuikAccess F12=Cancel

```

Figure 11-3: Display Employee Enrollments plan selection screen

The system displays the plans in which the specified employee is currently enrolled.

- Type **5** in the *Opt* field next to the plan for which you want to view purged benefit enrollment history and press Enter. The system displays the Display Employee Enrollments screen shown in Figure 11-4.

```

_ 8/08/02 12:30:45      Display Employee Enrollments      PRGBEI      PRDBEI
                                           Page 1 of 2
Employer . . . : ZUS      SAMPLE US COMPANY
Benefit ID . . . : L01     PERPETUAL LIFE INSURANCE COMPANY
Benefit Plan . . : LI1BW   LIFE INSURANCE 1 X BASE PAY - BIWEEKLY
Employee . . . :      80005 ACCURATE,ALAN N
Plan Year . . . : 2002      Status . . . . : 1
Hours to Date . . : .00     Eligibility Hrs :
Income Group . . :          Eligibility Date: 1/01/2002
Enrollment Date : 1/01/2002 Pre-exist Expire.
Change Date . . . :          Cancelled Date :
Change Reason . . :          Orig Enroll Date: 1/01/2002
Waivered Date . . :          Declined Date . :
Contributions & Deductions
-----
Employee Amount :      45.00      Employee Percent:
Employer Amount :      45.00      Employer Percent:
Deduction Code  : LI1BW          Deduction Basis : I
Deduction Freq  : B              Last EE Pay Freq: B
Coverages
-----
Coverage Amount : 780000.00      Freeze Coverage?: 0
Annual Contrib   : .00            Processed? . . : 1

F3=Exit F8=Display History F9=Benefs/Depends F10=QuikAccess F12=Cancel
    
```

Figure 11-4: Display Employee Enrollments screen

- 8 Press F8 to display a list of the purged benefit enrollment history records on the Display Enrollment History screen shown in Figure 11-5.

```

 8/08/02 12:31:27      Display Enrollment History      PRGBLD      PRDBLD
Sorted By Plan/Date/Time
Employer . . . : ZUS      SAMPLE US COMPANY
Benefit Identity: L01     PERPETUAL LIFE INSURANCE COMPANY
Benefit Plan . . : LI1BW   LIFE INSURANCE 1 X BASE PAY - BIWEEKLY
Employee . . . :      80005 ACCURATE,ALAN N
Plan Year . . . : 2002
5=Display
Opt Plan System Date/Time  User      Action  Screen/Function Program
_ LI1BW 2/06/1998          DLH      ADDED   BEN ENROLL      PRGBE10
= LI1BW 2/06/1998          DLH      CHANGED MASS UPDATE     PRGBE55
_ LI1BW 2/06/1998          DLH      CHANGED MASS UPDATE     PRGBE55
_ LI1W  8/12/1996          SAL      CHANGED BEN ENROLL      PRGBE10
_ LI1W  8/12/1996          SAL      CHANGED MASS UPDATE     PRGBE55
_ LI1W  8/23/1995          SAL      ADDED   BEN ENROLL      PRGBE10
_ LI1W  8/23/1995          SAL      CHANGED MASS UPDATE     PRGBE55
_ LI3BW 11/04/1998         SAL      CHANGED MASS UPDATE     PRGBE55
_ LI3BW 2/06/1998          DLH      ADDED   BEN ENROLL      PRGBE10
_ LI3BW 2/06/1998          DLH      CHANGED MASS UPDATE     PRGBE55
_ LI3BW 2/06/1998          DLH      CHANGED MASS UPDATE     PRGBE55
_ LI3BW 2/06/1998          DLH      CHANGED MASS UPDATE     PRGBE55 +

F3=Exit F10=QuikAccess F12=Cancel F14=Sort by Plan F15=Sort by Date
    
```

Figure 11-5: Display Enrollment History screen

The system displays the purged enrollment history records sorted by plan and then by date. You can press F15 to change the sequence to sort by date. Press F14 to change the sequence to re-sort by plan.

- 9 Type 5 in the *Opt* field next to the purged enrollment history record you want to view and press Enter.

The system displays the Display Employee Enrollments screen shown in Figure 11-6.

```

_ 8/08/02 12:31:56      Employee Benefit Enrollment      PRGBLD      PRDBLD
ADDED   on: 2/06/1998                                     Page 1 of 2
Employer . . . : ZUS      SAMPLE US COMPANY
Benefit Identity: L01      PERPETUAL LIFE INSURANCE COMPANY
Benefit Plan . . : LI1BW      LIFE INSURANCE 1 X BASE PAY - BIWEEKLY
Employee . . . :      80005 ACCURATE,ALAN N
Plan Year . . . :                               Status . . . . :
Hours to Date . . : .00      Eligibility Hrs : 500
Income Group . . : ELIG      Eligibility Date: 7/01/1994
Enrollment Date :                               Pre-exist Expire:
Change Date . . :                               Cancelled Date :
Change Reason . . :                               Orig Enroll Date.
Waivered Date . . :                               Declined Date . . :
Contributions & Deductions
-----
Employee Amount : 1.38      Employee Percent:
Employer Amount : 1.38      Employer Percent:
Deduction Code :                               Deduction Basis :
Deduction Freq. :                               Last EE Pay Freq:
Coverage
-----
Coverage Amount : 24000.00      Freeze Coverage?. 0
Annual Contrib. : .00
F3=Exit F8=Ben/Dep Hist F10=QuikAccess F12=Cancel

```

Figure 11-6: Employee Benefit Enrollment screen

- 10 After you review the purged benefit enrollment history, press F3 to return to the Display Employee History screen.
- 11 You can select another record or press F3 to return to the Display Employee Enrollments screen.
- 12 Press F3 to return to the Display Employee Enrollments plan selection screen.
- 13 You can select another plan or press F3 to return to the Display Employee Enrollments employee selection screen.
- 14 You can select another employee or press F3 to return to the Infinium Human Resources main menu.

Displaying Purged Benefit Enrollment History by Plan

You use the *Disp EE Enroll W/Purged Hist-Plan* function to display purged benefit enrollment history records for employees currently enrolled in a specified plan. The system initially displays the current enrollment records of employees in the specified plan(s). You use a function key on the Display Employee Enrollment with Purged History-Plan screen to view purged benefit enrollment history.

Follow these steps to use the *Display EE Enroll w/Purged Hist-Plan* function:

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data - History*.
- 4 Select *Disp EE Enroll W/Purged Hist-Plan* [DSP2BENHST]. The system displays the Display Employee Enrollments By Plan prompt screen shown in Figure 11-7.

```

8/08/02 15:57:50  Display Employee Enrollments By Plan  PRGBE12  PRDBE12

Employer . . . .  ___ +
Benefit Identity.  ___ +
Benefit Plan . .  ___ +
Plan Year . . . .  ___ +
From Elig. Date .  ___ 0
From Enroll Date.  ___ 0
Cancel/Decline .  0 (0->2)

To Elig. Date . .  ___ 0
To Enroll Date .  ___ 0
Include Term? . .  0 (0=No 1=Yes)

F3=Exit F4=Prompt F10=QuikAccess F12=Cancel

```

Figure 11-7: Display Employee Enrollments By Plan prompt screen

- 5 Use the information below to fill in the fields on this screen.

You use this display to view purged benefit enrollment history for employees currently enrolled in a specified plan. The system first displays all employees currently enrolled in the specified plan. You can select an employee from the

list, select one of his or her current enrollment records, and then display purged benefit enrollment history associated with the selected plan.

You can use eligible dates or enrollment dates from current employee enrollment records to specify a date range for the display of purged benefit enrollment history.

You must enter information in the *Employer*, *Benefit Identity*, *Benefit Plan*, *Cancel/Decline* and *Include Term?* fields.

Employer

Type the value that identifies the employer for which you are displaying purged benefit enrollment history. Press F4 to display a list of valid values.

You must enter a value in this field.

Benefit Identity

Type a value in this field that represents the benefit identity for which you want to display purged benefit enrollment history. The system compares the value in the *Benefit ID* field in purged employee benefit enrollment history records to the value you specify here and displays those records whose *Benefit ID* field matches the specified value. Press F4 to display valid values for this field.

Benefit Plan

You use this field to identify the benefit plan within the specified identity for which you want to display purged benefit enrollment history. The system compares the value in the *Benefit Plan* field in employee benefit enrollment history records to the values you specify on this screen and displays those records whose *Benefit Plan* field matches the specified value. Press F4 to display valid values for this field.

Plan Year

Leave blank.

From Elig. Date

Specify the earliest eligibility date for which you want to display benefit enrollments.

To Elig. Date

Specify the latest eligibility date for which you want to display benefit enrollments.

From Enroll Date

Specify the earliest enrollment date for which you want to display benefit enrollments.

To Enroll Date

Specify the latest enrollment date for which you want to display benefit enrollments.

Cancel/Decline

Indicate if the system should include previous enrollment records for employees who canceled or declined their enrollment in the specified plan or plans within the specified identity. Valid values for this field are:

- 0** Do not include canceled and declined enrollments in the display.
- 1** Include canceled and declined enrollments in the display.
- 2** Display only canceled and declined enrollments.

Include Term?

Use this field to indicate if the system should include the enrollment records of terminated employees in the following display. Valid values for this field are:

- 0** Do not include enrollment information for terminated employees in the display.
- 1** Include enrollment information for terminated employees in the display.

- 6** Press Enter. The system displays the Display Employee Enrollments By Plan employee selection screen shown in Figure 11-8.
-

```

8/08/02 16:02:05 Display Employee Enrollments By Plan PRGBE12 PRDBE12

Employer . . . : ZUS      SAMPLE US COMPANY
Benefit Identity: L01     PERPETUAL LIFE INSURANCE COMPANY
Benefit Plan . . : LI1BW  LIFE INSURANCE 1 X BASE PAY - BIWEEKLY
From Elig. Date :      0      To Elig. Date . :      0
From Enroll Date:      0      To Enroll Date  :      0
Plan Year . . . : 2002      Include Term? . : 0 (0=No 1=Yes)
                                      Cancel/Decline : 0 (0->2)

5=Display
Opt Employee Employee Name      Enrollment Emp Amt  ER Amt.  Total
=      1042 ALABAMA, ALBERT      1/01/2002 57692.25 57692.25 15384.50
-      1252 ALPHA, ANNA A        1/01/2002  4.73    4.73    9.46
-      2661 BUNCH, HONEY         7/01/2001 3812.50  .00    3812.50
-      3732 HENDERSON, HARRIET   7/01/2001  .35    .35    .70
-      3749 MASS COPY ENROLL,M   7/01/2001  2.88    2.88    5.76
-      16902 ALDORSIO, HARRY T   1/01/2002  1.96    1.96    3.92
-      80005 ACCURATE, ALAN N    1/01/2002  45.00   45.00   90.00

F3=Exit F5=More Info F10=QuikAccess F12=Cancel

```

Figure 11-8: Display Employee Enrollments By Plan employee selection screen

7 Use the following information to work with this screen:

The system displays the names, enrollment or eligible dates and cost information of employees currently enrolled or with pending enrollments in the specified plan or plans within the specified identity.

Press F5 to display additional enrollment information for each employee.

8 Type 5 in the *Opt* field to display details of the enrollment record for a specified employee.

9 Press Enter. The system displays the Display Employee Enrollments screen shown in Figure 11-9.


```

_ 8/08/02 16:02:33      Display Employee Enrollments      PRGBE12      PRDBE12
                                           Page 1 of 2
Employer . . . : ZUS      SAMPLE US COMPANY
Benefit ID . . . : L01      PERPETUAL LIFE INSURANCE COMPANY
Benefit Plan . . : LI1BW      LIFE INSURANCE 1 X BASE PAY - BIWEEKLY
Employee . . . :      80005 ACCURATE,ALAN N
Plan Year . . . : 2002      Status . . . . : 1
Hours to Date . :      .00      Eligibility Hrs :
Income Group . . :      Eligibility Date: 1/01/2002
Enrollment Date : 1/01/2002      Pre-exist Expire.
Change Date . . :      Cancelled Date :
Change Reason . :      Orig Enroll Date: 1/01/2002
Waivered Date . :      Declined Date . :
Contributions & Deductions
Employee Amount :      45.00      Employee Percent:
Employer Amount :      45.00      Employer Percent:
Deduction Code : LI1BW      Deduction Basis : I
Deduction Freq : B      Last EE Pay Freq: B
Coverages
Coverage Amount :      780000.00      Freeze Coverage?: 0
                                           Processed? . . : 1

F3=Exit F8=Display History F9=Benefs/Depends F10=QuikAccess F12=Cancel

```

Figure 11-9: Display Employee Enrollments screen

The system displays details of the selected employee's enrollment record.

- 10 Press F8 to display a list of the purged benefit enrollment history records on the Display Enrollment History screen. Refer to the section entitled "Displaying Purged Benefit Enrollment History for an Employee" for information on displaying purged benefit enrollment history.
- 11 After you review the purged benefit enrollment history, press F3 twice to return to the Display Employee Enrollments screen.
- 12 Press F3 to return to the Display Employee Enrollments By Plan employee selection screen.
- 13 You can select another employee or press F3 to return to the Display Employee Enrollments By Plan prompt screen.
- 14 You can specify new selection criteria to view enrollments for another plan or press F3 to return to the Infinium Human Resources main menu.

Printing Purged Benefit Enrollment History

You use this function to print the purged benefit enrollment history from the purged benefit enrollment history file PRPBLT. You must have data in the purged benefit enrollment history file on your iSeries to use this function.

The report sorts by employer and within employer, by employee, benefit identity and benefit plan. The report shows the key information that changed with each history transaction including the following:

- Benefit identity
- Benefit plan
- Last change date
- Updated by user
- Eligible date
- Enrollment date
- Canceled date
- Declined date
- Waived date
- Premium-related information

You can use Infinium Query to generate additional reports.

Follow these steps to generate the Purged Benefit Enrollment History report.

- 1 From the Infinium Human Resources main menu select *System Operations*.
 - 2 Select *Personnel Purge Functions*.
 - 3 Select *Benefits Data - History*.
 - 4 Select *Print Purged Ben. Enroll History* [PPBEH]. The system displays the screen shown in Figure 11-10.
-

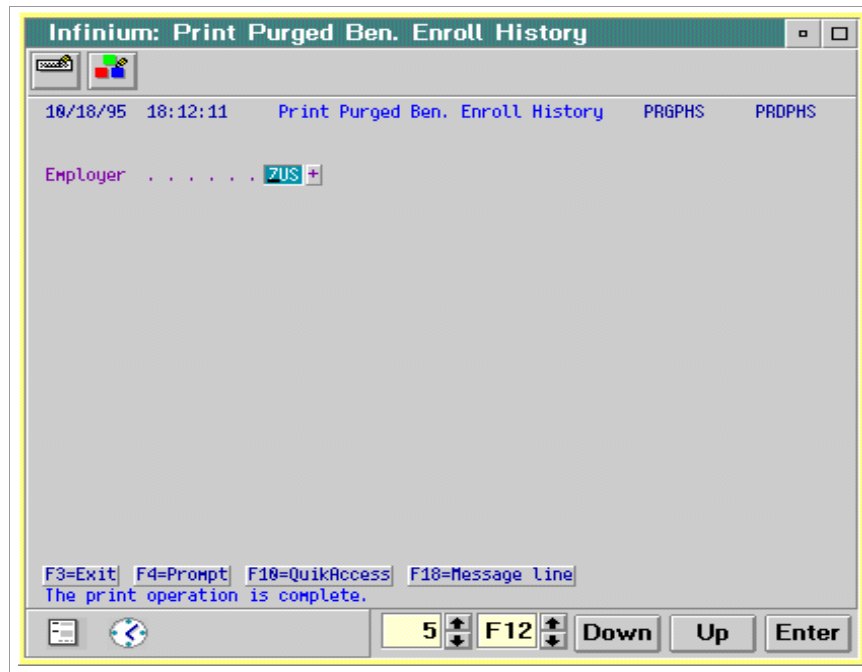


Figure 11-10: Print Purged Ben. Enrollment History screen

- 5 Use the information below to fill in the fields on this screen.

Employer

Type the value that identifies the employer for which you want to print purged benefit enrollment history information. Press F4 to display a list of valid employers.

Leave this field blank if you want to print purged benefit enrollment history information for all employers.

- 6 Press Enter. The system displays the following message at the bottom of the *Print Purged Ben. Enrollment History* selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to generate the Purged Benefit History report. Access the Work with Submitted Jobs screen, the Work with All Spooled Files screen, or the Work with Printer Output screen. You can view or print this report using options on these screens.

Saving Purged Benefit Enrollment History

You use this function to transfer information from the purged benefit enrollment history file PRPBLT to a backup tape. You can also use this function to clear information from the purged benefit enrollment history file after the purged data is saved on tape.

Your user profile must have authority to the IBM operating system command **SAVOBJ** for you to use this function.

You use this function to transfer information from the purged benefit enrollment history file (PRPBLT) to a backup tape. You can also specify if the system should clear the purged benefit enrollment history file after the data is transferred to tape.

Before you run this function, you must initialize enough tapes to hold all of the data in your purged benefit enrollment history file. Load one of the initialized tapes on the tape drive before you use this screen.

Follow these steps to save the purged benefit enrollment history file (PRPBLT) to a backup tape:

- 1 From the Infinium Human Resources main menu select *System Operations*.
 - 2 Select *Personnel Purge Functions*.
 - 3 Select *Benefits Data - History*.
 - 4 Select *Save Purged Ben. Enroll. History* [SPBEH]. The system displays the screen shown in Figure 11-11.
-

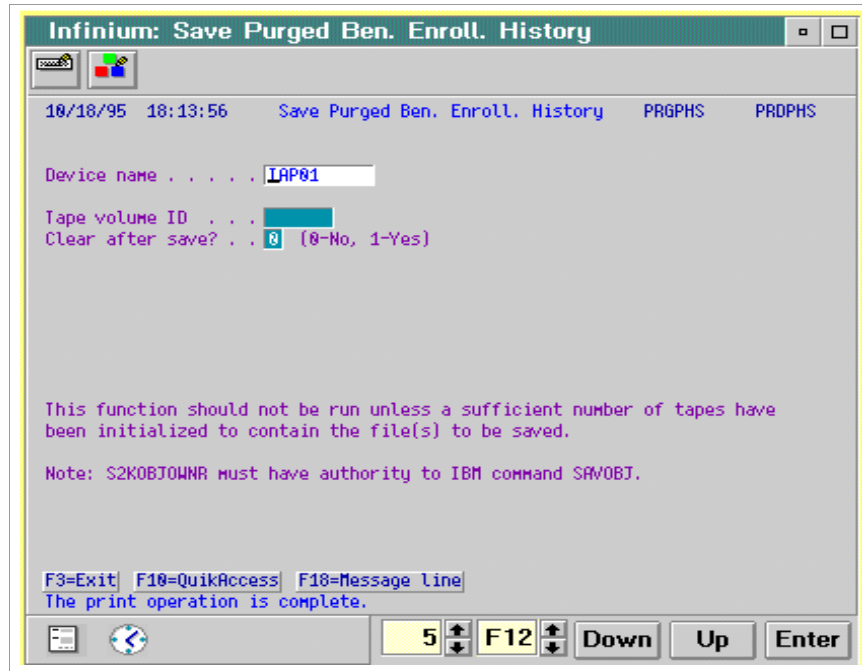


Figure 11-11: Save Purged Ben. Enroll. History screen

- 5 Use the information below to fill in the fields on this screen.

Device Name

Type the device name assigned to the tape drive you are using to save your purged benefit enrollment history to tape. You must make an entry in this field.

Tape volume ID

Type a volume identifier for the tape, if applicable. Leave blank to use the default value of ***MOUNTED**.

Clear after save?

Use this field to specify if the system should automatically clear the purged benefit enrollment history file (PRPBLT) after the data is transferred to backup tape(s). Valid values are:

- | | |
|----------|-----|
| 0 | No |
| 1 | Yes |

If you do not elect to use this function to clear the purged benefit enrollment history file, the data will remain on your iSeries. You can use the *Clear*

PRPBLT - Interactively function to clear the data at a later date. You must type a value in this field.

- 6 Press Enter. The system displays the following message at the bottom of the *Save Purge Benefit Enrollment History* selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to transfer records from the purged benefit enrollment history file (PRPBLT) to your backup tape.

Restoring Purged Benefit Enrollment History

The system uses batch processing to restore records from the purged benefit enrollment history file (PRPBLT) on your tape to the purged employee benefit enrollment history file (PRPBLT) on your iSeries. You can use the displays and report discussed in the preceding sections to view or print the restored information.

Your user profile must have authority to the IBM operating system command **RSTOBJ** for you to use this function.

Follow these steps to restore the purged benefit enrollment history file (PRPBLT) from your backup tape to the iSeries.

- 1 From the Infinium Human Resources main menu select *System Operations*.
 - 2 Select *Personnel Purge Functions*.
 - 3 Select *Benefits Data - History*.
 - 4 Select *Restore Purged Ben Enroll History* [RPBEH]. The system displays the screen shown in Figure 11-12.
-

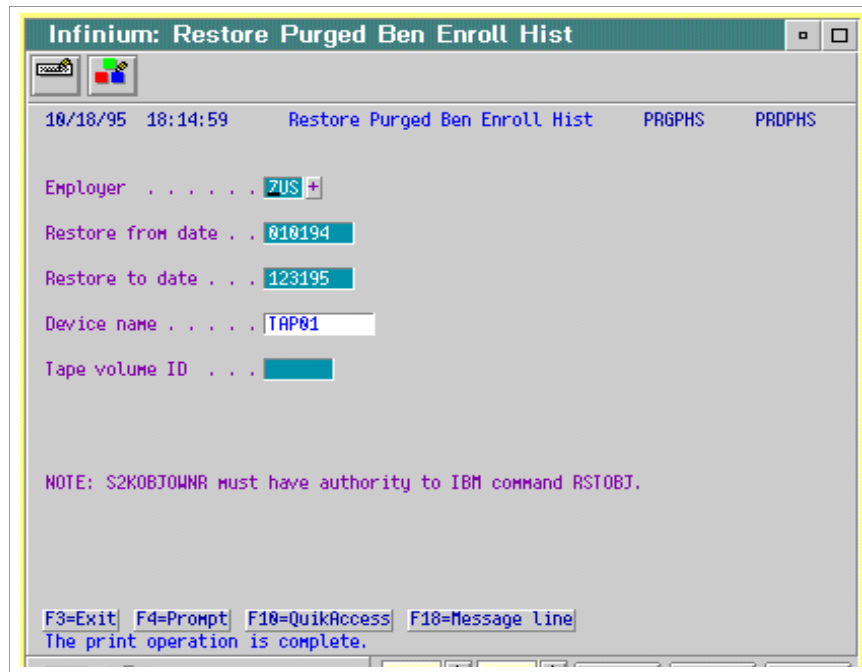


Figure 11-12: Restore Purged Ben Enroll Hist screen

5 Use the information below to fill in the fields on this screen.

You use this function to restore data from your backup tape to the purged benefit enrollment history file (PRPBLT). You must mount the backup tape on your tape drive before you use this screen.

Employer

Type the code that identifies the employer for which you want to restore purged benefit enrollment history information. Press F4 to display a list of valid employers.

Restore from date

Type the earliest date the system should use to select benefit enrollment history records to be restored. The system compares this date to the *Last Update Date* field (TBLLSTH) in the purged benefit enrollment history file. The system restores all benefit enrollment history records whose *Last Update Date* field is the same as or after the date you specify in this field.

Leave this field blank if you want to restore purged benefit enrollment history information for all employers.

Leave this field blank if you want the system to restore all purged benefit enrollment history records whose *Last Update Date* is the same as or before the date you enter in the *Restore to date* field below.

Restore to date

Type the latest date the system should use to select benefit enrollment history records to be restored. The system compares this date to the *Last Update Date* field (TBLLSTH) in the purged benefit enrollment history file. The system restores all benefit enrollment history records whose *Last Update Date* field is the same as or before the date you specify in this field.

Leave this field blank if you want the system to restore all purged benefit enrollment history records whose *Last Update Date* is the same as or after the date you enter in the *Restore from date* field above.

Device name

Type the device name assigned to the tape drive you are using to restore your purged benefit enrollment history from tape to the iSeries. You must enter a name in this field.

Tape volume ID

Type a volume identifier for the tape, if applicable. Leave blank to use the default value of ***MOUNTED**.

- 6 After you complete the fields on this screen, press Enter. The system displays the following message at the bottom of the *Restore Ben. Enroll. History* selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to restore the specified purged records.

Merging Purged Benefit Enrollment History

After you have restored purged benefit enrollment history information, you can use the *Merge Purged Ben Enroll Hist* function to transfer the information from the purged benefit enrollment history file (PRPBLT) to the active benefit enrollment history file (PRPBL). The merge function returns the purged benefit enrollment information to the original file from which it was purged.

The merge function does not clear data from the purged benefit enrollment history file (PRPBLT). You can use the *Clear BRPBLT - Interactively* function to clear information from the purged benefit enrollment history file if the necessary data has been merged back into your active benefit enrollment history file. You can retain the purged benefit enrollment history file on your

iSeries if you merged only some of the data back into your active benefit enrollment history file.

After you run the merge function, you can view the merged benefit enrollment history with the *Update Employee Enrollments* or *Display Employee Enrollments* functions.

Follow these steps to merge the purged benefit enrollment history information back into the active benefit enrollment history file:

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data - History*.
- 4 Select *Merge Purged Ben Enroll Hist* [MPBEH]. The system displays the screen shown in Figure 11-13.

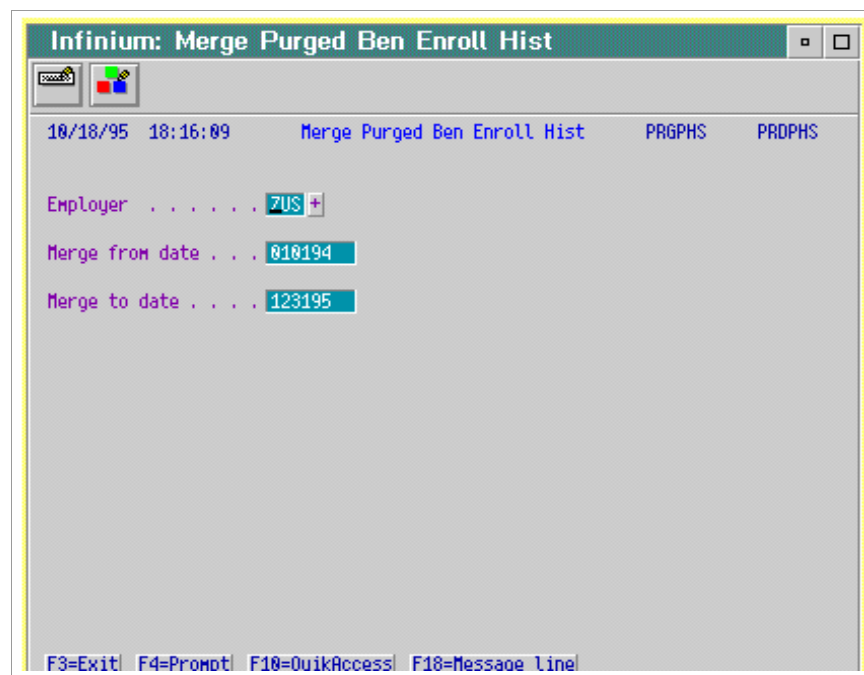


Figure 11-13: Merge Purged Ben Enroll Hist screen

- 5 Use the information below to fill in the fields on this screen.

You use this function to merge information from the purged benefit enrollment history file (PRPBLT) on your iSeries into the active benefit enrollment history file (PRPBL).

Employer

Type the value that identifies the employer for which you are merging benefit enrollment history. Press F4 to display a list of valid values.

Leave this field blank to merge purged benefit enrollment history information for all employers.

Merge from date

Type the earliest date the system should use to select benefit enrollment history records to be merged. The system compares this date to the *Last Update Date* field (TBLLSTH) in the purged benefit enrollment history file. The system merges all benefit enrollment history records whose *Last Update Date* field is the same as or after the date you specify in this field.

Leave this field blank if you want the system to merge all restored benefit enrollment history records whose *Last Update Date* is the same as or before the date you enter in the *Merge to date* field below.

Merge to date

Type the latest date the system should use to select benefit enrollment history records to be merged. The system compares this date to the *Last Update Date* field (PRPBLTSTH) in the purged benefit enrollment history file. The system merges all benefit enrollment history records whose *Last Update Date* field is the same as or precedes the date you specify in this field.

Leave this field blank if you want the system to merge all restored benefit enrollment history records whose *Last Update Date* is the same as or after the date you enter in the *Merge from date* field above.

- 6 After you complete the fields on this screen, press Enter. The system displays the following message at the bottom of the Merge Purged Ben Enroll Hist selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to merge the specified records.

Clearing the Purged Benefit Enrollment History File

You can use this function to clear the purged benefit enrollment history file (PRPBLT) on your iSeries. You can use this function after you run the *Purge Benefit Enrollment History* function if you do not want to keep the purged

data on your iSeries or save it to a backup tape. You can also use this function after you have restored and merged information from the purged benefit enrollment history file back to the active benefit enrollment history file.

Caution: Because the system uses interactive processing to complete this job, be sure that you have saved your purged benefit data to tape before you execute this function.

Follow these steps to clear your purged benefit enrollment history file.

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data - History*.
- 4 Select *Clear Purged Benefit History* [CLERBENHIST]. The system displays the screen shown in Figure 11-14.

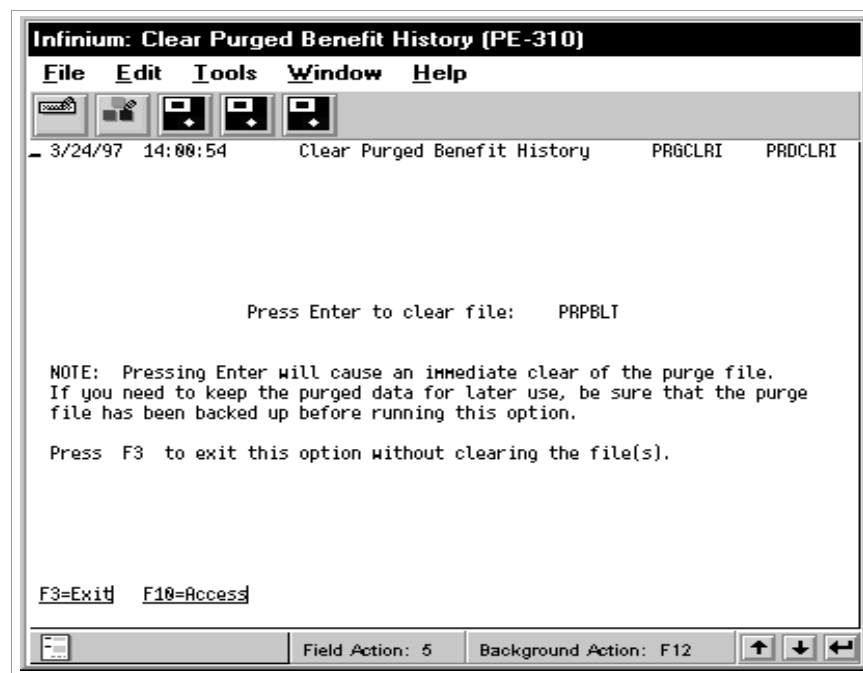


Figure 11-14: Clear Purged Benefit History screen

WARNING! When you press Enter on this screen, the system uses interactive processing to immediately clear information from the purged benefit enrollment history file (PRPBLT) in the database library you use for Infinium Human Resources.

- 5 Press Enter to clear the purged benefit enrollment history file on your system.

- 6** The system purges the information and returns you to the Infinium Human Resources main menu.

Purging Benefit Plans and Enrollment History

You use the *Purge Benefit Plan & Enrollments* function to remove benefit plans and related employee benefit files from your Infinium Human Resources database. You use this function to delete benefit plans in which employees were previously enrolled. If you establish a benefit plan but do not enroll employees in it, you can use the *Update Benefit Plans* function to delete the plan.

To delete a plan, display the first screen of the benefit plan using the *Update Benefit Plans* function and press F22. The system deletes the benefit plan record after it verifies that no employees were ever enrolled in the plan. If the system finds benefit enrollment history records for employees, it displays the following message:

Employees are enrolled in this plan - deletion not allowed.

If you receive this error message, you must use the *Purge Benefit Plans & Enrollments* function to delete the benefit plan and associated employee enrollment data.

You can use the *Purge Benefit Plan & Enrollment* function only for benefit plans in which there are no active enrollments. If employees were previously enrolled in the benefit plan you want to purge, you must ensure that their enrollment records contain a canceled, waived or declined date.

This topic contains the following sections:

- Preparing to Purge Benefit Plans and Enrollment Data
 - Purging Benefit Plans and Enrollment Data
 - Displaying Employee Enrollments in Purged Plans
 - Printing Purged Benefit Plans and Enrollment Data
 - Saving Purged Benefit Plans and Enrollment Data
 - Restoring Purged Benefit Plans and Enrollment Data
 - Merging Purged Benefit Plans and Enrollment Data
 - Clearing Purged Benefit Plan and Enrollment Files
-

Preparing to Purge Benefit Plans and Enrollment Data

Before you can use the *Purge Benefit Plan & Enrollments* function, you must take the following steps:

- Remove the benefit plan you want to purge from all benefit groups
- Ensure that no active employee enrollment records are associated with the benefit plan you want to purge

Removing Plans from Benefit Groups

Before you use the *Purge Benefit Plan & Enrollments* function, you must remove the benefit plan you want to purge from all benefit groups. Use the *Update Plans in Benefit Group* function to remove the plan you want to purge from existing benefit groups. Delete the character in the *Opt* field next to the plan you want to purge to remove the plan from an existing benefit group.

If you do not remove the benefit plan you want to purge from all benefit groups, the system displays the following error message on the *Purge Benefit Plan & Enrollments* screen when you press Enter:

Benefit plan is attached to benefit group xxx - deletion not allowed.

The system replaces **xxx** in the above sample message with the name of the benefit group to which the benefit plan is attached.

Entering Canceled, Declined or Waived Dates

When you use the *Purge Benefit Plans & Enrollments* function, the system verifies that there are no active employee enrollment records in file PRPBE for the plan you are purging. All employee enrollment records in file PRPBE must contain a *Canceled Date*, *Declined Date* or *Waived Date* indicating that the enrollment is no longer active.

You can use the *Update Employee Enrollments* function to manually enter a *Canceled Date*, *Declined Date* or *Waived Date* in the benefit enrollment records of employees who have active enrollments in the plan you want to purge. The system automatically enters a value in the *Canceled Date* field of all active participants when you use the *Mass Cancel Enrollments* function for a specified plan.

Whether you enter the required dates manually or through the *Mass Cancel Enrollments* function, you must run the *Mass Update Enrollments* function to process the cancellations prior to using the *Purge Benefit Plans & Enrollments* function.

Working with the Status Field on Employee Enrollment Records

In addition to verifying that the employee benefit enrollment file (PRPBE) contains one of the dates specified above for the records associated with the plan you want to purge, the system verifies that the *Status* field in all associated records you want to purge is **0**. The *Status* field indicates whether an employee enrollment record is active.

The system automatically enters **0** in this field during the *Mass Update Enrollments* function when it processes a cancellation. If some of the employee enrollments records associated with the plan you want to purge do not have **0** in the *Status* field, you can use the *Update Employee Enrollments* function in *Benefits Administration* to manually enter **0** in the *Status* field, or you can update the field using a custom program or system utility function.

The following table summarizes requirements for the employee benefit enrollment file when it is used during the *Purge Benefit Plans & Enrollments* function.

You must ensure that these fields in file PRPBE contain information:	Name of field in file PRPBE
You must enter a date in one of the following fields:	
<i>Canceled Date</i>	BECADH
<i>Declined Date</i>	BEDCLH
<i>Waived Date</i>	BEWVRH
<i>Status</i> must be inactive	BESTAT = 0

Purging Benefit Plans and Enrollment Data

You use the *Purge Benefit Plan & Enrollments* function to delete benefit plans and enrollment data for plans in which employees were previously enrolled. When you run the *Purge Benefit Plan & Enrollments* function, the system deletes records from the following files and transfers them to purged files on your iSeries:

File Description	Active Data File	Purged Data File
Benefit Plans	PRPBP	PRPBPT
Employee Benefit Enrollments	PRPBE	PRPBET
Employee Benefit Enrollment History	PRPBL	PRPBLT

File Description	Active Data File	Purged Data File
Employee Benefit Enrollment Beneficiaries/Dependents	PRPBM	PRPBMT
Employee Benefit Enrollment Beneficiaries/Dependents History	PRPBH	PRPBHT
Dependent Benefits and Coverage	PRPBX	PRPBXT

System Requirements

This function requires exclusive use of the active benefit data files listed in the preceding table. We recommend that you use this function when Infinium Human Resources and Infinium Payroll users are not using the system. We also recommend that you back up the affected benefit files before you execute this option.

After the system purges the benefit enrollment history records, it reorganizes the active benefit files (PRPBP, PRPBE, PRPBL, PRPBM, PRPBH and PRPBX). This may take some time, depending on the number of records remaining in the active benefit files affected by this purge.

You can run the *Purge Benefit Plan & Enrollments* function several times for different employers, identities or plans. You can then use the *Save Purged Ben. Plans & Enroll* function once to save all of the information onto one or more backup tapes.

Running the *Purge Benefit Plans & Enrollments* Function

Follow these steps to use the *Purge Benefit Plan & Enrollments* function:

- 1 From the Infinium Human Resources main menu select *System Operations*.
 - 2 Select *Personnel Purge Functions*.
 - 3 Select *Benefits Data - Plans*.
 - 4 Select *Purge Benefit Plan & Enrollments* [PURGEBENPLN]. The system displays the screen shown in Figure 11-15.
-


```

5/25/04 16:35:02   Purge Benefit Plan & Enrollments   PRGPHS   PRDPHS
-----
Employer . . . . . __ +
Benefit ID . . . . . __ +
Benefit Plan . . . . . ____ +

This function will purge Benefit Plan records from file PRPBP and copy the
purged data to file PRPBPT in your current data file library. It will also
purge/copy related employee records in the benefit enrollment file PRPBE to
file PRPBET, enrollment history records in PRPBL to PRPBLT, benef/depends for
plan enrollments in file PRPBM to file PRPBNT, benef/depend history records
in file PRPBH to PRPBHT, dependent rates/coverages in file PRPBX to file
PRPBXT, then reorganize the files.
The purge files may be cleared after executing the Save Purged Benefit Plans
function. Should you choose not to maintain this data on tape, instruct
Data Processing to clear the file with function Clear Purged Ben Plan & Enroll

WARNING: This function requires exclusive use of PRPBP, PRPBE, PRPBL, PRPBM,
and PRPBH. It cannot be run when other people are using these files.

F3=Exit F4=Prompt F10=QuikAcces F18=Message lin

```

Figure 11-15: Purge Benefit Plan & Enrollments screen

- 5 Use the information below to fill in the fields on this screen.

Entering Selection Criteria

You use selection criteria on this screen to limit the information the system should remove to:

- a particular employer
- a particular benefit identity
- a particular benefit plan within the specified identity

Employer

Type the value that identifies the employer for which you are purging benefit enrollment history. Press F4 to display a list of valid values.

Benefit ID

Type the code that represents the benefit identity for which the system should purge benefit plans and employee enrollment data. Press F4 to display valid values for this field.

Benefit Plan

Type the code that represents the benefit plan within the specified benefit identity the system should purge along with associated employee benefit

data. The system compares the values in the *Benefit Plan* field in employee benefit files to the value you specify on this screen and removes those records whose *Benefit Plan* field matches the specified values. Press F4 to display valid values for this field.

- 6 Press Enter after you fill in the fields on this screen. The system displays the following message at the bottom of the Purge Benefit Plan & Enrollments selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to remove records from the benefit plan file (PRPBP) and the three employee benefit files listed previously. The system automatically reorganizes the affected active benefit files after the purge is complete.

Displaying Employee Enrollments by Plan

If you keep the purged benefit data files on your iSeries after you run the *Purge Benefit Plans & Enrollments* function, you can use the following functions to display the purged information:

- *Disp EE Enroll - Purged Plans*
- *Disp Purged Benefit Plans*

The first option is identical to the *Display EE Enrollment - Plan* functions in the *Benefits Administration* option except it displays employee history information from the purged benefit enrollment history file rather than the active benefit enrollment history file. The system initially shows the purged plans in which a specified employee was enrolled. You can use a function key on the display screen to view purged benefit enrollment history for the purged plans.

The *Display Purged Benefit Plans* function is similar to the *Display Benefit Plans* function in the *Benefits Administration* option except the *The Display Purged Benefit Plans* function:

- Shows purged plans rather than active plans
- Does not allow you to purge benefit plans if you use plan year processing

You can use the *Benefit Group* field to display selected purged benefit plans.

Displaying Purged Benefit Enrollment History for an Employee

Follow these steps to use the *Display EE Enroll - Purged Plans* function:

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data - Plans*.
- 4 Select *Display EE Enroll - Purged Plans* [DSP1BENPLN]. The system displays the Display Employee Enrollments employee selection screen shown in Figure 11-16.

```

8/08/02 17:57:52      Display Employee Enrollments      PRGBEI      PRDBEI

Employer . . . .  _  +
Employee . . . .  _____ + -or- Last Name . . . .  _____ +

F3=Exit F4=Prompt F10=QuikAccess

```

Figure 11-16: Display Employee Enrollments employee selection screen

- 5 Use the information below to fill in the fields on this screen.

Employer

Type a value that identifies the employer for which you are displaying benefit enrollment history.

Employee

Type the number assigned to the employee whose purged benefit history information you want to display.

Last Name

Type the last name of the employee whose purged benefit history information you want to display.

- 6 After you fill in the employee number, press Enter. The system displays the Display Employee Enrollments plan selection screen shown in Figure 11-17.

```
8/08/02 12:30:15      Display Employee Enrollments      PRGBEI      PRDBEI

Employer . . . . : ZUS      SAMPLE US COMPANY
Employee . . . . : 80005 ACCURATE,ALAN N
Plan Year . . . . : 2002 + Tax ID . . . . : 083-44-1266

5=Display
Opt Benefit Identify      Plan Plan Description
= PERPETUAL LIFE INSURANCE COMPA LI1BW LIFE INSURANCE 1 X BASE PAY - BIWEEKLY

F3=Exit F4=Prompt F10=QuikAccess F12=Cancel
```

Figure 11-17: Display Employee Enrollments plan selection screen

The system displays the purged plans in which the specified employee was currently enrolled.

- 7 Type **5** in the *Opt* field next to the plan for which you want to view purged benefit enrollment history and press Enter. The system displays the Display Employee Enrollments screen shown in Figure 11-18.
-

```

_ 8/08/02 12:30:45      Display Employee Enrollments      PRGBEI      PRDBEI
                                           Page 1 of 2
Employer . . . : ZUS      SAMPLE US COMPANY
Benefit ID . . . : L01      PERPETUAL LIFE INSURANCE COMPANY
Benefit Plan . . : LI1BW      LIFE INSURANCE 1 X BASE PAY - BIWEEKLY
Employee . . . :      80005 ACCURATE,ALAN N
Plan Year . . . : 2002      Status . . . . : 1
Hours to Date . . : .00      Eligibility Hrs :
Income Group . . :          Eligibility Date: 1/01/2002
Enrollment Date : 1/01/2002  Pre-exist Expire.
Change Date . . :          Cancelled Date :
Change Reason . . :          Orig Enroll Date: 1/01/2002
Waivered Date . . :          Declined Date . :
Contributions & Deductions
Employee Amount : 45.00      Employee Percent:
Employer Amount : 45.00      Employer Percent:
Deduction Code : LI1BW      Deduction Basis : I
Deduction Freq : B          Last EE Pay Freq: B
Coverages
Coverage Amount : 780000.00  Freeze Coverage?: 0
Annual Contrib . . : .00      Processed? . . : 1

F3=Exit F8=Display History F9=Benefs/Depends F10=QuikAccess F12=Cancel
    
```

Figure 11-18: Display Employee Enrollments screen

- 8 Press F8 to display a list of the purged benefit enrollment history records on the Display Enrollment History screen shown in Figure 11-19.

```

      8/08/02 12:31:27      Display Enrollment History      PRGBLD      PRDBLD
Sorted By Plan/Date/Time
Employer . . . : ZUS      SAMPLE US COMPANY
Benefit Identity: L01      PERPETUAL LIFE INSURANCE COMPANY
Benefit Plan . . : LI1BW      LIFE INSURANCE 1 X BASE PAY - BIWEEKLY
Employee . . . :      80005 ACCURATE,ALAN N
Plan Year . . . : 2002
5=Display
Opt Plan System Date/Time  User      Action      Screen/Function Program
_ LI1BW 2/06/1998          DLH      ADDED      BEN ENROLL      PRGBE10
_ LI1BW 2/06/1998          DLH      CHANGED    MASS UPDATE    PRGBE55
_ LI1BW 2/06/1998          DLH      CHANGED    MASS UPDATE    PRGBE55

+

F3=Exit F10=QuikAccess F12=Cancel F14=Sort by Plan F15=Sort by Date
    
```

Figure 11-19: Display Enrollment History screen

The system displays the purged enrollment history records.

- 9 Type 5 in the *Opt* field next to the purged enrollment history record you want to view and press Enter.

The system displays the Display Employee Enrollments screen shown in Figure 11-20.

```

_ 8/08/02 12:31:56      Employee Benefit Enrollment      PRGBLD      PRDBLD
ADDED   on: 2/06/1998                                     Page 1 of 2
Employer . . . : ZUS      SAMPLE US COMPANY
Benefit Identity: L01      PERPETUAL LIFE INSURANCE COMPANY
Benefit Plan . . : LI1BW    LIFE INSURANCE 1 X BASE PAY - BIWEEKLY
Employee . . . :      80005 ACCURATE,ALAN N
Plan Year . . . :                               Status . . . . :
Hours to Date . . : .00      Eligibility Hrs :      500
Income Group . . : ELIG      Eligibility Date: 7/01/1994
Enrollment Date :                               Pre-exist Expire:
Change Date . . . :                               Cancelled Date :
Change Reason . . :                               Orig Enroll Date.
Waivered Date . . :                               Declined Date . . :
Contributions & Deductions
-----
Employee Amount :      1.38      Employee Percent:
Employer Amount :      1.38      Employer Percent:
Deduction Code :                               Deduction Basis :
Deduction Freq. :                               Last EE Pay Freq:
Coverage
-----
Coverage Amount :      24000.00      Freeze Coverage?. 0
Annual Contrib. :      .00

F3=Exit F8=Ben/Dep Hist F10=QuikAccess F12=Cancel

```

Figure 11-20: Employee Benefit Enrollment screen

- 10 After you review the purged benefit enrollment history, press F3 to return to the Display Employee History screen.
- 11 You can select another record or press F3 to return to the Display Employee Enrollments screen.
- 12 Press F3 to return to the Display Employee Enrollments plan selection screen. You can select another plan or press F3 to return to the Display Employee Enrollments employee selection screen.
- 13 You can select another employee or press F3 to return to the Infinium Human Resources main menu.

Displaying Purged Benefit Plans

You use this option to display details about benefit plans you purged using the *Purge Benefit Plans & Enrollments* function.

Follow these steps to use the *Display Purged Benefit Plans* function:

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data - Plans*.
- 4 Select *Display Purged Benefit Plans* [DSP2BENPLN]. The system displays the Display Benefit Plans prompt screen shown in Figure 11-21.

```
8/08/02 18:18:52          Display Benefit Plans          PRGBPI  PRDBPI

Employer . . . .  ZUS +
Benefit group . .  _____ +
Plan Year . . . .  _____ +
Include inactive? 0 0=No 1=Yes

F3=Exit  F4=Prompt  F10=Access
```

Figure 11-21: Display Benefit Plans Benefit Group prompt screen

- 5 Use the information below to fill in the fields on this screen.

You use this function to view purged benefit plans.

Employer

Type a value that identifies the employer for which you are displaying purged benefit plans. Press F4 to display a list of valid values.

You must enter a value in this field.

Benefit group

Leave this field blank. The system displays all purged plans.

Include inactive?

Use this field to indicate if the system should include inactive purged benefit plans on the display. The system checks the *Status* field in the benefit plan control file (PRPBPT) to determine if a plan is active or inactive. Valid values are:

- 0** Do not include inactive plans in the display
- 1** Include inactive plans in the display

- 6** Press Enter. The system displays the Display Benefit Plans plan selection screen shown in Figure 11-22.

```

_ 8/08/02 18:19:10      Display Benefit Plans      PRGBPI      PRDBPI

Employer . . . : ZUS      SAMPLE US COMPANY
Benefit group . :
Plan Year . . . :      Include inactive? 0

5=Display
  Benefit Identity      Opt Plan      Plan Description

F3=Exit  F10=Access

```

Figure 11-22: Display Benefit Plans plan selection screen

- 7** Type **5** in the *Opt* field to display details of a particular purged benefit plan. The system displays details of the selected purged benefit plan control record. The system uses the benefit type associated with the benefit plan to present the appropriate display. For example, the display for a medical plan is different from the display for a life insurance plan or a savings plan.
- 8** Press F3 to return to the Display Benefit Plans plan selection screen.
- 9** Press F3 to return to the Display Benefit Plans benefit group selection screen. You can display benefit plans for another employer or press F3 to return to the Infinium Human Resources main menu.

Printing Purged Benefit Plans and Enrollment Data

You use this function to print the information from the purged benefit files. You must have data in the purged benefit files on your iSeries to use this function.

The report sorts by employer and within employer, by benefit identity, benefit plan and employee. It includes the following key information for each purged benefit enrollment history record within a purged plan:

- Employee number
- Employee name
- Eligible date
- Enrollment date
- Canceled date
- Decline date
- Waiver date
- Active/Suspended status flag

You can use Infinium Query to generate additional reports.

Follow these steps to generate the Purged Benefit Plan & Enrollments report:

- 1 From the Infinium Human Resources main menu select *System Operations*.
 - 2 Select *Personnel Purge Functions*.
 - 3 Select *Benefits Data - Plans*.
 - 4 Select *Print Purged Ben. Plans & Enroll [PRNTBENPLN]*. The system displays the screen shown in Figure 11-23.
-

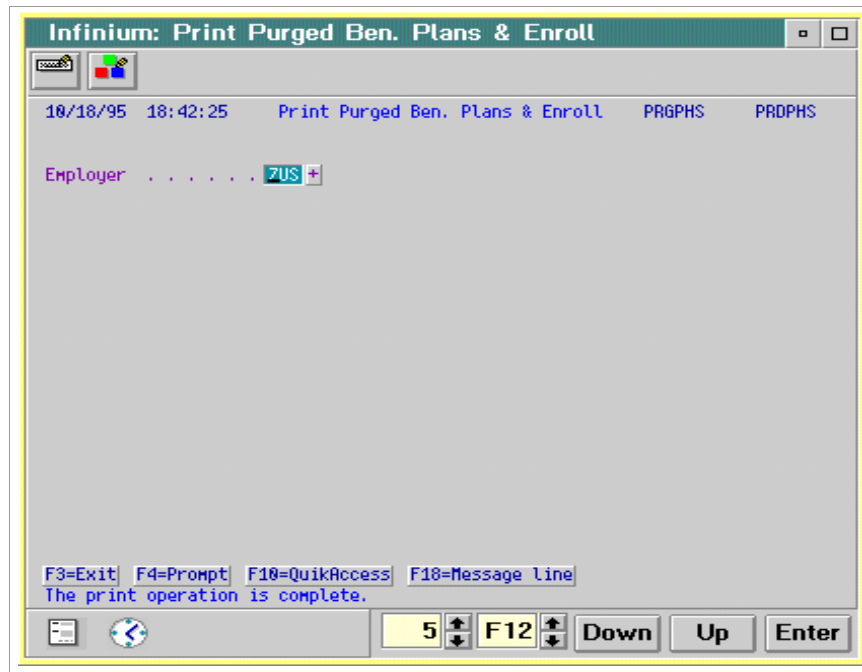


Figure 11-23: Print Purged Ben. Plans & Enroll screen

- 5 Use the information below to fill in the fields on this screen.

You use this function to generate a report of key information in the purged benefit files (PRPBPT, PRPBET, PRPBLT, PRPBMT, PRPBXT).

Employer

Type the code that identifies the employer for which you want to print purged benefit enrollment history information. Press F4 to display a list of valid employers.

Leave this field blank if you want to print purged benefit information for all employers.

- 6 Press Enter. The system displays the following message at the bottom of the Print Purged Ben. Plans & Enroll selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to generate the Purged Benefit Plans & Enrollments report. Access the Work with Submitted Jobs screen, the Work with All Spooled Files screen, or the Work with Printer Output screen. You can view or print this report using options on these screens.

Saving Purged Benefit Plans and Enrollment Data

You use this function to transfer information from the purged benefit files to one or more backup tapes. You can also use this function to remove information from the purged benefit files after the purged data is saved on tape.

If you run the *Purge Benefit Plans & Enrollments* function more than once before you use the *Save Purged Ben. Plans & Enroll* function to transfer the information to a tape backup, the purged files on your iSeries contain information from multiple purged plans. You can use the *Save Purged Ben. Plans & Enroll* function once to transfer all of the information to backup tape(s).

Your user profile must have authority to the IBM operating system command **SAVOBJ** for you to use this function.

Follow these steps to save the purged benefit files from your iSeries to a backup tape:

- 1 From the Infinium Human Resources main menu select *System Operations*.
 - 2 Select *Personnel Purge Functions*.
 - 3 Select *Benefits Data - Plans*.
 - 4 Select *Save Purged Ben. Plans & Enroll* [SAVEBENPLN]. The system displays the screen shown in Figure 11-24.
-

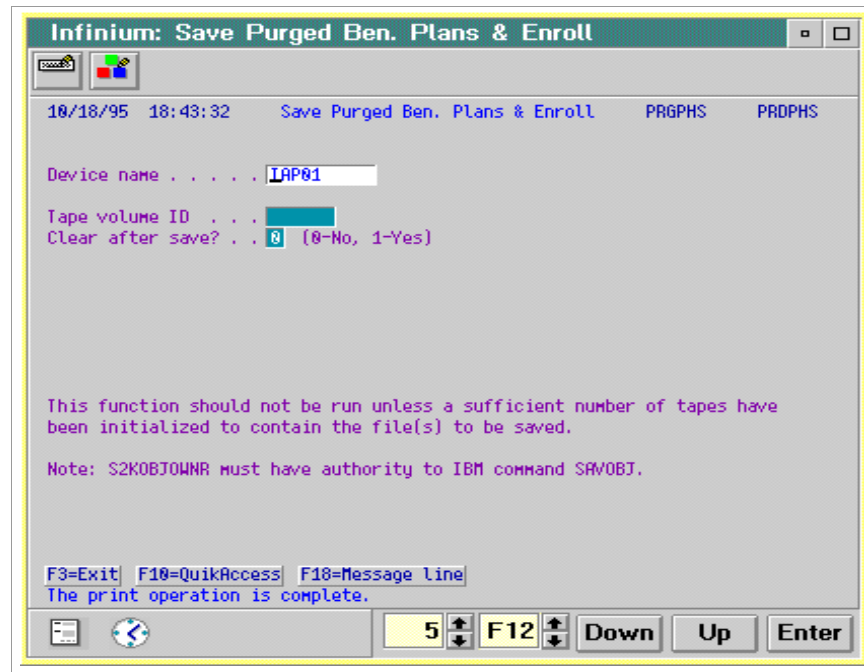


Figure 11-24: Save Purged Ben. Plans & Enroll screen

- 5 Use the information below to fill in the fields on this screen.

Preparing to Transfer Information to Tape

You use this function to transfer information from the purged benefit files to a backup tape. You can also specify if the system should clear the purged benefit files after the data is transferred to tape.

Before you run this function, you must initialize enough tapes to hold all of the data in your purged benefit files. Load one of the initialized tapes on the tape drive before you use this screen.

You must enter information in the *Device name* and *Clear after save?* fields.

Device name

Type the device name assigned to the tape drive you are using to save your purged benefit enrollment history to tape.

Tape volume ID

Type a volume identifier for the tape, if applicable. Leave blank to use the default value of ***MOUNTED**.

Clear after save?

Specify if the system should automatically clear the purged benefit files after the data is transferred to backup tape(s). Valid values are:

- 0 No
1 Yes

If you do not to use this function to clear the purged benefit enrollment history file, the data will remain on your iSeries . You can use the *Clear Purged Ben Plans & Enroll* function to remove the data from your iSeries at a later date.

- 6 Press Enter. The system displays the following message at the bottom of the *Save Purged Ben. Plans & Enroll* selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to transfer records from the purged benefit files on the iSeries to your backup tape(s).

Restoring Purged Benefit Plans and Enrollment Data

You use this function to transfer purged benefit data saved on one or more tapes back onto your iSeries. The system restores the purged benefits data into the appropriate purged benefit file on the iSeries as shown below. You can use the displays and report discussed in the preceding sections to view or print the restored information.

File Description	Active Data File	Purged Data File
Benefit Plans	PRPBP	PRPBPT
Employee Benefit Enrollments	PRPBE	PRPBET
Employee Benefit Enrollment History	PRPBL	PRPBLT
Employee Benefit Enrollment Dependents/Beneficiaries	PRPBM	PRPBMT
Employee Benefit Enrollment Dependents/Beneficiaries History	PRPBH	PRPBHT
Dependent Benefit and Coverage	PRPBX	PRPBXT

Your user profile must have authority to the IBM operating system command **RSTOBJ** for you to use this function.

Follow these steps to restore the purged benefit files from your backup tape(s) to the iSeries:

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data - Plans*.
- 4 Select *Restore Purged Ben Plans & Enroll* [RSTRBENPLN]. The system displays the screen shown in Figure 11-25.

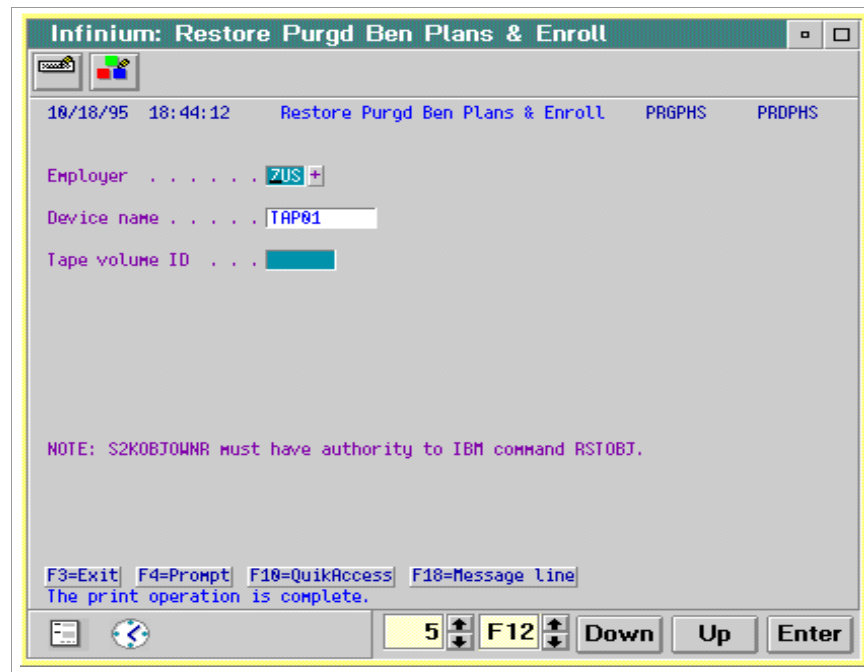


Figure 11-25: Restore Purged Ben Plans & Enroll screen

- 5 Use the information below to fill in the fields on this screen.

You use this function to restore data from your backup tape(s) to the purged benefit files. You must mount the first backup tape on your tape drive before you use this screen.

Employer

Type the code that identifies the employer for which you want to restore purged benefit enrollment history information. Press F4 to display a list of valid employers.

Device name

Type the device name assigned to the tape drive you are using to restore your purged benefit data. You must enter a name in this field.

Tape volume ID

Type a volume identifier for the tape, if applicable. Leave blank to use the default value of ***MOUNTED**.

- 6 After you complete the fields on this screen, press Enter. The system displays the following message at the bottom of the Restore Purgd Ben. Plans & Enroll selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to restore records from the purged benefit files on your tape(s) to the purged benefit files on your iSeries.

Merging Purged Benefit Plans and Enrollment Data

After you have restored purged benefit information, you can use the *Merge Purged Ben Plans & Enroll* function to transfer the information from the purged benefit files to the active benefit files. The merge function returns the purged benefit enrollment information to the original files from which it was purged.

The merge function does not clear information from the purged benefit files on your iSeries. You can use the *Clear Purged Ben Plan & Enroll* function to clear information from the purged benefit files if the data has been merged back into your active benefit files. You can retain information in the purged benefit files if you merged only some of the data into your active benefit files.

After you run the merge function, you can view the merged employee benefit enrollment history with the *Update Employee Enrollments* or *Display Employee Enrollments* functions in the Benefits Administration option. You can use the *Display Benefit Plans* function to review details of the benefit plan controls.

Follow these steps to merge the purged benefit information back into the active benefit files:

- 1 From the Infinium Human Resources main menu select *System Operations*.
 - 2 Select *Personnel Purge Functions*.
-

- 3 Select *Benefits Data - Plans*.
- 4 Select *Merge Purged Ben Plans & Enroll* [MERGBENPLN]. The system displays the screen shown in Figure 11-26.

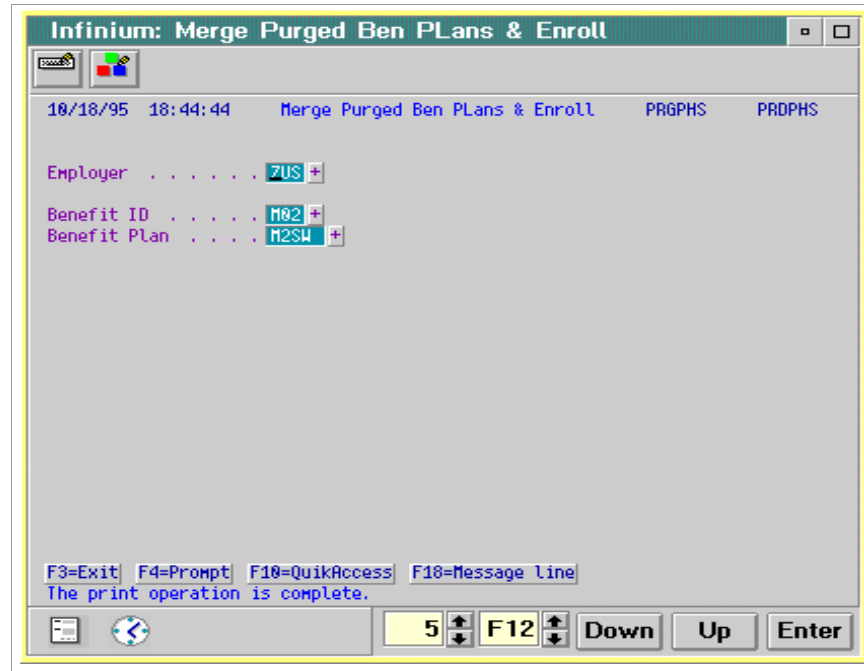


Figure 11-26: Merge Purged Ben Plans & Enroll screen

- 5 Use the information below to fill in the fields on this screen.

You use this function to merge information from the purged benefit files on your iSeries back into the active benefit files.

Employer

Type the value that identifies the employer for which you are merging purged benefit data. Press F4 to display a list of valid values.

Benefit ID

Type the code that represents the benefit identity for which the system should merge benefit plans and employee enrollment data. Press F4 to display valid values for this field.

Benefit Plan

Type the code that represents the benefit plan associated with the specified benefit identity the system should merge along with associated employee benefit data. The system compares the values in the *Benefit Plan* field in employee benefit files to the value you specify on this screen and merges

those records whose *Benefit Plan* field matches the specified values. Press F4 to display valid values for this field.

- 6 After you complete the fields on this screen, press Enter. The system displays the following message at the bottom of the *Merge Purged Ben. Plans & Enroll* selection screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to merge records from the restored benefit files to the active benefit files on your iSeries.

Clearing the Purged Benefit Plan and Enrollment Data Files

You can use this function to clear the purged benefit files on your iSeries. You can use this function after you run the *Purge Benefit Plan & Enrollments* function if you do not want to keep the purged data on your iSeries or save it to a backup tape. You can also use this function after you have restored and merged all information from the purged benefit files back to the active benefit files on your iSeries.

This function clears data in the following purged benefit data files:

File Description	Purged Data File Name
Benefit Plans	PRPBPT
Employee Benefit Enrollments	PRPBET
Employee Benefit Enrollment History	PRPBLT
Employee Benefit Enrollment Dependents/Beneficiaries	PRPBMT
Employee Benefit Enrollment Dependents/Beneficiaries History	PRPBHT
Dependent Benefit and Coverage	PRPBXT

Follow these steps to clear the purged benefit files on your iSeries:

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data - Plans*.

- 4 Select *Clear Purged Ben Plan & Enroll* [CLERBENPLN]. The system displays the screen shown in Figure 11-27.

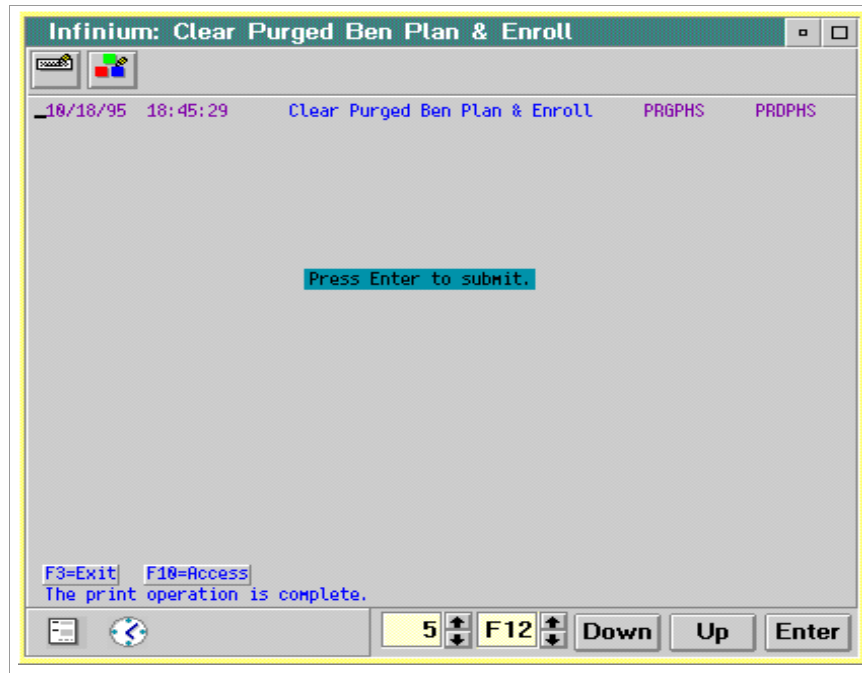


Figure 11-27: Clear Purged Ben Plan & Enroll screen

- 5 Press Enter to clear the four purged benefit data files listed in the above table. The system displays the following message at the bottom of the screen and returns you to the Infinium Human Resources main menu:

Building submission request...

The system uses batch processing to clear the files.

Purging ACA transmission history

Use the *Purge ACA Transmission History* function to purge data from the ACA Transmissions file, PRP1094T, the 1094-C Return History file, PRP1094CH, and the 1095-C Return History file, PRP1095CH. You can choose to list the records only or to list the records and purge them.

Transmission records and the associated history records that have a receipt ID are not deleted. To purge these records, use the *Work with ACA Transmissions* function to delete the ACA transmission records from the PRP1094T file, and then run the *Purge ACA Transmission History* function to purge the related records from the PRP1094CH and PRP1095CH files. When you run the purge, any data that no longer has a matching record in the PRP1094T file is printed on the Part III audit report, PRTPACA3.

The reports in the table are produced by this function:

Report	Description
PRTPACA	Transmission and 1094-C submissions that were purged, along with the associated 1095-C records that were included in each submission.
PRTPACA2	Transmissions and 1094-C submissions that were purged. The 1095-C data is left off of this report so that you can see at a glance which transmissions and submissions were purged.
PRTPACA3	1094-C and 1095-C records that were purged that have no matching 1094-C transmission record in file PRP1094T.

To validate the ACA XML returns file:

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *Personnel Purge Functions*.
- 3 Select *Benefits Data - History*.
- 4 Select *Purge ACA Transmission History [PACA]*. The system displays the Purge ACA Transmission History page shown below.

```

6/14/16  16:46:46  Purge ACA Transmission History  PRGAC50  PRDAC50
-----
Employer . . . . . ZUS + -or- Employer Group . . . . . _____ +
Purge From Date . . . . . 1012016      Purge Through Date . . . . . 1022016
List/Purge Option . . . . . 1 (1=List Only, 2=List and Purge)
Purge XML Files? . . . . . 0 (0=No 1=Yes) Reorganize Files? . . . . . 0 (0=No 1=Yes)

This function will purge ACA Transmission history records from the ACA
Transmissions file PRP1094T that do not have a Receipt ID, and the associated
records from the 1094-C Return History file PRP1094CH, and the 1095-C Return
History file PRP1095CH for the transmission creation date range you selected.

WARNING: Records will also be deleted from PRP1094CH and PRP1095CH that do not
have a matching transmission record in PRP1094T (if it was previously deleted
using Work with ACA Transmissions).

WARNING: This function requires exclusive use of files PRP1094T, PRP1094CH, and
PRP1095CH. It cannot be run when other people are using these files.

F3=Exit  F4=Prompt  F10=QuikAccess

```

Figure 11-1: Purge ACA Transmission History page

5 Use the information below to complete the fields on this page.

Employer

Specify the employer for which you are purging ACA transmission history records. You must enter a value here or in the *Employer Group* field.

Employer Group

Specify the employer group for which you are purging ACA transmission history records. You must enter a value here or in the *Employer* field.

Purge From Date

Specify the starting date to use to purge records from the ACA transmission history files, PRP1094T, PRP1094CH, and PRP1095CH. The date is compared to the Transmission Create Date in the ACA transmission history file. Records whose transmission create date is the same as or after the date you specify here are purged. Records with the same transmission ID are also purged from the 1094-C ACA return history file, PRP1094CH, and the 1095-C ACA return history file, PRP1095CH.

Records from the PRP1094CH file that have no matching PRP1094T record and from the PRP1095CH file that have no matching PRP1094CH record are also purged. The creation date on these records is compared to *the Purge From Date* and *Purge Through Date* that you specify on this page.

Leave blank to purge all ACA transmission history records whose transmission create date is the same as or earlier than the *Purge Through Date* that you specify on this page.

Purge Through Date

Specify the ending date to use to purge records from the ACA transmission history files, PRP1094T, PRP1094CH, and PRP1095CH. This date is compared to the Transmission Create Date in the ACA transmission history file, and those records whose transmission create date is the same as or before the date you specify are purged. Records with the same transmission ID are also purged from the 1094-C ACA return history file, PRP1094CH, and the 1095-C ACA return history file, PRP1095CH.

Records from PRP1094CH that have no matching PRP1094T record and from PRP1095CH that have no matching PRP1094CH record are also purged. The creation date on these records is compared to the *Purge From Date* and *Purge Through Date* you specify on this page.

List/Purge Option

Specify **1** to list the records that match the selection criteria but do not purge them.

Specify **2** to list the records that match the selection criteria and then purge them.

We recommend you use this function using the List Only option first and review the reports that are generated. After you are satisfied with the results, run this function using the List and Purge option to purge the records.

Purge XML Files?

Specify yes to purge XML files from the IFS associated with the transmission history records that are being purged. The forms file name, TQFILE, and manifest file name, TQMANI, are retrieved from the transmission history records that are being purged from PRP1094T, and these files are deleted from the IFS. Otherwise, specify no.

Caution: If you run this function and specify **2** (List and Purge) in the *List/Purge Option* field, you must also specify yes here if you plan on purging the XML files because it is not possible to purge the XML files after the transmission history has already been purged.

Reorganize Files?

Specify yes to reorganize the PRP1094T, PRP1094CH, and PRP1095CH files after the records are deleted from these files. You must have exclusive

access to these files to reorganize them. The disk space that is used by the deleted records in these files is recovered. Otherwise, specify no.

6 Press Enter.

Chapter 12 Administering COBRA Participants

12

The U.S. Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) requires employers with at least 20 active employees to offer continuation of group health coverage to certain participants and their dependents upon the occurrence of certain qualifying events. These qualifying events include:

- Termination of employment
- Reduction in work hours below required level for regular benefit plan participation
- Death of the employee, divorce or legal separation
- Entitlement to Medicare benefits
- Attainment of maximum coverage age by a dependent child

If an employee chooses to continue with the plan under the COBRA provisions after he or she loses coverage as an active employee, he or she could be covered for 18 or 36 months, depending on the qualifying event. The employee pays the entire health insurance premium; in addition, you can charge the employee an administrative fee. COBRA regulations also stipulate specific notice responsibilities for the employer, with severe penalties if you do not comply.

The *COBRA Administration* function in Infinium Human Resources provides you with the ability to set up and track employees and their dependents who are eligible for COBRA benefits.

The chapter consists of the following topics:

Topic	Page
Overview of COBRA Administration	12-3
Creating a COBRA Employer	12-5
Setting Up Benefit Controls in Your COBRA Employer	12-11

Transferring Employees to Your COBRA Employer	12-16
Entering Participants in Your COBRA Employer	12-17
Enrolling Participants in COBRA Benefit Plans	12-22
Generating COBRA Letters	12-31
Entering COBRA Premium Payments	12-40
Printing COBRA Reports	12-44

Overview of COBRA Administration

Because you are required to administer COBRA benefits for both employees and non-employees, you must set up a separate employer for COBRA administration. You typically set up a skeletal employer with a minimal number of Infinium Human Resources controls. You do not set up Infinium Payroll for this employer.

You can then use the Transfer transaction in the *Enter Personnel Actions* function to move employees into the COBRA employer or you can key employees directly into the COBRA employer. You key non-employees, such as ex-spouses and overage dependent children, directly into the COBRA employer.

Once you set participants up in the COBRA employer, you can generate notification letters to them, enroll them in COBRA benefits, and track their payments.

Objectives

After completing this chapter, you should be familiar with:

- How to set up a COBRA employer
- How to transfer employees into a COBRA employer
- How to enter participants into a COBRA employer
- How to set up benefit enrollments for COBRA participants
- How to track COBRA premium payments
- How to generate COBRA reports

Moving Employees into the COBRA Employer

You can move employees into the COBRA employer using two different methods:

- You can use the Transfer transaction in the *Enter Personnel Actions* function to perform an inter-company transfer from the active employer to the COBRA employer.
-

When you transfer an employee from one company to another, the system automatically terminates the employee in the old employer and sets up the employee in the new employer.

You must then use the *Update Participants* function to enter two fields of information that link the COBRA participant to his or her employee record in the active employer.

- You can enter the employee directly into the COBRA employer using the *Update Participants* function.

You can use either method interchangeably. However, you must set up additional controls in the COBRA employer to use the Transfer transaction as listed in the table in the “Creating a COBRA Employer” topic. Refer to the *Infinium Human Resources Guide to Processing* for detailed information on how to use the *Enter Personnel Actions* function.

It is possible for the same employee to be assigned to both an active employer and the COBRA employer. For example, Wally Worker’s scheduled work hours fall below the minimum hours required to maintain his enrollment in active employee health plans; however he is still an active employee. You cancel Wally’s enrollment in the active health insurance plans but continue to pay him in the active employer.

You then use the *Enter Participants* function to establish Wally in the COBRA employer and enroll him in COBRA plans that correspond to the active employee plans in which he was previously enrolled. Wally mails you his premium payments and you record them using the *Enter Premium Payments* function. If Wally’s scheduled work hours increase to the level required for your active employee plans, you can cancel his COBRA plan enrollments and re-enroll him in the regular employee benefit plans.

Creating a COBRA Employer

This topic outlines the steps you must take to create a separate COBRA employer.

The following table lists in order the steps you take to set up a COBRA employer. Some of the steps are required. Other steps are necessary only if you plan to transfer employees from an active employer to the COBRA employer.

You must set up	Using this function	Within this menu option	Required?
The employer control	<i>Update Employer Control</i>	Master Files	Yes
Code values	<i>Update Employer Codes</i>		Yes
At least one organization level	<i>Update Reporting Levels</i>		No
At least one salary range	<i>Update Salary Ranges</i>		No
At least one job	<i>Update Job Controls</i>		No
At least one position	<i>Update Position Data</i>		No
The employer benefit control	<i>Update Employer Benefit Control</i>	Benefits Administration	Yes
At least one benefit identity	<i>Update Benefit Identities</i>		Yes
One or more benefit plans	<i>Update Benefit Plans</i>		Yes
At least one benefit group	<i>Update Benefit Group Controls</i> <i>Update Plans in Benefit Group</i>		Yes

This topic provides you with some key points on setting up your COBRA employer. Refer to the *Infinium Human Resources Guide to Controls* for detailed information on how to accomplish steps 1 through 6. Refer to

previous parts in this guide for information on how to accomplish steps 7 through 10.

Defining the COBRA Employer Control

You normally set up only one COBRA employer for your organization. You use it for COBRA administrative purposes only. You do not use it to process payroll, generate tax forms and reports, or perform other standard activities pertinent to your actual employers.

When you set up the COBRA employer control, ensure that you type 1 in the *Tax ID for EE?* field on the Employer Update screen 2 of 3. Because you administer both employees and non-employees in the COBRA employer, the system requires you to use each participant's Social Security number as his or her number in the COBRA employer.

If you plan to transfer employees from your active employer to your COBRA employer, type 1 in the *Posit. File Used?* field.

Refer to the *Infinium Human Resources Guide to Controls* for detailed information on setting up the employer control.

Setting Up Code Values for your COBRA Employer

You must set up code values in your COBRA employer for the code types listed below. The table groups code types as follows:

- Required code types
- Code types that are optional, regardless of the method you use to establish participants in your COBRA employer
- Code types that are required only if you plan to transfer employees from an active employer to the COBRA employer

Code Type	Code Description	Sample Code Value and Description	Required?
QUA	Qualifying Event	AGE - Age DEATH - Death of EE DIV - Divorce MED - Eligible for Medicare REDHR - Reduction of Hrs TERM - Terminated	Yes

Code Type	Code Description	Sample Code Value and Description	Required?
REL	Relationship	SPOUS - Spouse CHILD - Child	Yes, to enter plan dependents associated with a COBRA participant
STA	State	IL - Illinois CA - California	No, but recommended
STS	Status	EE - Active Employee XEE - Ex-Employee DEP - Dependent XSPS - Ex-Spouse	No, but recommended
CNT	County	COOK - Cook LA - Los Angeles	No
SEC	Security Group	EXEC - Executive LIT - Litigant	No
EEO	EEO Category	1 - Officials & Managers 2 - Professionals	Yes for inter-company transfer only
GRP	Job Evaluation Group	Set up a blank value	Yes for inter-company transfer only
LOC	Location	W100 - St. Paul Warehouse S600 - Miami Sales Office	Yes for inter-company transfer only

You can use the *Update Employer Codes* function to set up code values in your COBRA employer or you can use the *Copy Employer Codes* function to copy code values for specified code types from your active employer to the COBRA employer. Refer to the *Infinium Human Resources Guide to Controls* for details on how to set up or code values.

The code values listed in the preceding table are only examples. Establish values that are meaningful to your organization when you set up your COBRA employer.

Establishing Additional Code Values for the Basic Data Record

If you transfer employees from an active employer to a COBRA employer, the system automatically creates a basic data record for the transferred

employee in the COBRA employer. It copies the values in code-validated fields in the Basic Data record from the old employer to the corresponding fields in the employee's Basic Data record in the COBRA employer. The system automatically displays the transferring employee's basic data record in the COBRA employer during the inter-company transfer process so that you can verify the copied information.

To complete the inter-company transfer process, you must set up code values for the following code types that are required in fields on screens in the employee basic data record:

- **CTR** - Country
- **ETH** - Ethnic Identification

The basic data record contains additional non-required fields that utilize code types. If you use these fields in your active employer, you can copy code values for these code types into your COBRA employer from your active employer. Alternatively, you can delete the copied values from the fields in the transferring employee's basic data record that utilize these code types as you complete the inter-company transfer. The additional code types are:

- **ACR** - Accrual
- **CLA** - Class
- **EDU** - Education
- **HIR** - Hire Source
- **LAB** - Labor Category
- **LNG** - Language
- **LVC** - Leave
- **MAI** - Mail Group
- **REC** - Rehire Eligibility
- **RET** - Retirement Option
- **RTP** - Review Type
- **SFT** - Shift
- **TRM** - Termination
- **UNI** - Union
- **WCC** - Workers' Compensation

Establishing Additional Code Values for the Personnel Data Record

If you transfer employees from an active employer to a COBRA employer, the system automatically creates a personnel data record for the transferred

employee in the COBRA employer. It copies the values in code-validated fields in the personnel data record from the old employer to the corresponding fields in the employee's personnel data record in the COBRA employer. The system automatically displays the transferring employee's Personnel Data record in the COBRA employer during the inter-company transfer process so that you can verify the copied information.

To complete the inter-company transfer, you can set up code values for the following code types, if you use these fields in your active employer. If you use these fields in your active employer, you can copy code values for these code types into your COBRA employer from your active employer. Alternatively, you can delete the copied values from the fields in the transferring employee's personnel data record that utilize these code types as you complete the inter-company transfer. The additional code types are:

- **CAL** - Calendar
- **HDC** - Handicap
- **MIL** - Military Status
- **MLB** - Military Branch
- **MDC** - Military Discharge Type
- **RLO** - Relocatability
- **SEA** - Season
- **WRE** - Work Restrictions

Setting Up Optional Controls

If you plan to use the transfer transaction in the *Enter Personnel Actions* function to terminate employees in an active employer and move them to the COBRA employer, you must set up at least one each of the following controls using these functions:

- Organizational level - *Update Reporting Levels*
- Salary range - *Update Salary Ranges*
- Job - *Update Job Controls*
- Position - *Update Position Data*

When you use the transfer transaction, you must assign the transferring employee to a position in the COBRA employer. The transfer transaction creates a basic data record for the transferred employee in the COBRA employer. It uses information on the position to default information into fields in the basic data record.

Refer to the *Infinium Human Resources Guide to Controls* for details on how to set up these controls.

Setting Up Benefit Controls in Your COBRA Employer

After you set up your COBRA employer, you need to set up the following benefit administration controls:

- Employer benefit control
- Benefit identities
- Benefit plans
- Benefit groups

By law, you only are required to set up your health plans in the COBRA employer. You can assign the same names to the benefit identities and benefit plans in your COBRA employer as you assigned to identities and plans in your active employer.

After you set up your employer benefit control, you can set up your benefit identities and plans manually in the COBRA employer or you can use one of the copy functions listed below:

- You can press F8 on the Update Benefit Plans screen to copy a specified plan from an existing employer to your COBRA employer.
- You can use the *Mass Copy Benefit Plans* function to copy all plans for a specified benefit identity from an existing employer to your COBRA employer

Regardless of the copy function you use, you need to modify the copied premium information in the COBRA employer since the employer typically does not make contributions to COBRA plans. In addition, you can increase the total premium amount by the cost of the administrative fee you charge COBRA participants.

After you set up or copy benefit plans into your COBRA employer, you can use the following options to define at least one benefit group in the COBRA employer:

- *Update Benefit Group Controls*
- *Update Plans in Benefit Group*

Refer to Parts 2, 3 and 4 of this guide to obtain detailed information on how to set up the employer benefit control, benefit identities, plans and groups.

Setting Up the COBRA Employer Benefit Control

Use the following guidelines to set up the employer benefit control in your COBRA employer. Refer to the "Establishing the Employer Benefit Control, Benefit Identities and Benefit ID Reporting Groups" chapter in this guide for detailed information on the fields on the Update Employer Benefit Controls screen.

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
- 2 Select *Update Benefit Data*.
- 3 Select *Update Benefit Controls [UEBC]*. The system displays the Update Employer Benefit Controls prompt screen.
- 4 Type the value that represents your COBRA employer and press Enter. The system displays the Update Employer Benefit Controls screen shown in Figure 12-1.

```

7/09/03 16:40:57      Update Employer Benefit Controls  PRGKCM  PRDKCM

Employer . . . : COB      COBRA COMPANY

PY/400 Installed? . .  1  (0=No 1=Yes)
Use Enrollments? . .  0  (0=No 1=Yes)
Update PY Deduct? . .  0  (0=No 1=Yes)
Edit Mult. Plans? . .  1  (0=No 1=Yes)
Eligibility Basis . .  1  (1->2)
Updt Fund Splits? . .  0  (0=No 1=Yes)
Use Plan Year? . . .  0  (0=No 1=Yes)
Default Plan Year . .  _____ +
Dependent Name . . .  1  (1->2)
Benefit Self Service?  0  (0=No 1=Yes)
Pref. Prov. File-BESS  0  (0=No 1=Yes)

F3=Exit  F10=Access  F22=Delete

```

Figure 12-1: Update Employer Benefit Controls screen

- 5 Use the information below to fill in the fields on this screen.

PY/400 Installed?

Use this field to indicate whether Infinium Payroll is installed on your system.

Valid values are:

- 0** Infinium PY is not installed on your system.
- 1** Infinium PY is installed on your system.

Use Enrollments?

Type **0** because you do not use benefit enrollments as part of the *Enter New Hire* function in your COBRA employer. You do not use the *Enter New Hire* function to establish participants in your COBRA employer.

Update PY Deduct?

Type **0** to indicate that you are not transferring deduction information to Infinium Payroll for participants in your COBRA employer. You do not process pay cycles for participants in your COBRA employer.

Edit Mult. Plans?

Use this field to enable the system to generate an error message when you attempt to enroll an employee into more than one plan within a particular identity. You must also type **0** in the *Emp. Mult. Plans?* field on each identity for which you want the system to produce the error message.

Valid values for this field are:

- 0** The system does not generate an error message if you try to enroll an employee into multiple plans within an identity, regardless of the value in the *Emp. Mult. Plans?* field on the benefit identity
- 1** The system generates an error message if you try to enroll an employee into multiple plans within an identity if you type **1** in the *Emp. Mult. Plans?* field on the benefit identity

Eligibility Basis

Type **1** in this field. The system does not use this field to determine the benefit eligibility date for COBRA participants.

Updt Fund Splits?

Type **0** in this field. You do not administer savings plan enrollments for COBRA participants in the COBRA employer.

Benefit Self Service?

Specify **No**.

Use Plan Year?

Specify **No**.

Default Plan Year

Leave blank.

Dependent Name

Specify the order in which the dependent's first name, last name and middle initial will be used to create the dependent's name in the *Name* field in *Update Dependents Data*.

- 1** last name, first name, middle initial
- 2** first name, middle initial, last name

Benefit Self-Service?

Specify yes if you use Infinium Benefit Self Service (BESS). Otherwise, specify no.

If you use Infinium Benefit Self Service, you must also specify yes in the *Use Plan Year?* field.

Pref. Prov. File – BESS?

Specify whether you use BESS and, if so, that you want to access the primary care physician from the Preferred Provider file for benefit plans that require a primary care physician.

Valid values are:

- 0** No, this employer does not use BESS and does not require use of the Preferred Provider file.
- 1** Yes, this employer uses BESS and requires entering primary care physician information from the Preferred Provider file.

- 6** Press Enter. The system saves your information and returns to the Infinium HR main menu.
-

Setting Up Benefit Identities and Plans in Your COBRA Employer

After you establish the employer benefit control for your COBRA employer, you can set up benefit identities and plans. You generally only set up identities and plans for your health insurance programs.

Use the following guidelines as you set up plans or review copied plans in your COBRA employer:

- You can leave the fields listed below blank. Although they will not cause problems if they contain values, the system does not use these fields to determine the benefit eligibility dates or cancellation dates of COBRA participants:
 - *Eligibility Days*
 - *Eligibility Hrs*
 - *Income Group*
 - *Custom Hours Pgm*
 - *Cancel Days*
- Unless your organization makes an employer contribution to COBRA benefits, leave these fields blank:
 - *Employer Premium*
 - *Employer Contrib.*

Press F5 on the Update Medical Insurance Plans screen to recalculate the value in the *Employee Contrib.* field.
- Because you do not transfer benefit deduction information to Infinium Payroll, you can leave these fields blank:
 - *Deduction Basis*
 - *Deduction Code*

Refer to “Establishing Benefit Plans” chapter in this guide for detailed information on setting up benefit plans.

Setting Up Benefit Groups in Your COBRA Employer

You must set up at least one benefit group for your COBRA employer. If you have varying plans for which COBRA participants are eligible, you can set up as many benefit groups as you require. Refer to the “Establishing Benefit Groups” chapter in this guide for detailed information on setting up benefit groups.

Transferring Employees to Your COBRA Employer

If an employee loses eligibility to participate in health benefits for active employees due to termination, you can use the Transfer transaction in the *Enter Personnel Actions* function to transfer the employee's basic information from the active employer to the COBRA employer.

When you perform an inter-company transfer, the system takes the following actions:

- It terminates the employee in the active employer, but retains all of his or her records in that employer.
- It establishes a basic data record and a personnel data record for the employee in the COBRA employer and transfers information into each of these records from the active employer.

It transfers name and address information into the Maintain COBRA Participant Data screen associated with the *Enter Participant* function.

WARNING! When you complete the Transfer screen within the *Enter Personnel Actions* function, ensure that you type the employee's Social Security number in the *Employee* field. The system uses this field to assign a number to the employee in the COBRA employer. The system requires you to use the Social Security number as the employee number in the COBRA employer.

Refer to the *Infinium Human Resources Guide to Processing* for detailed information on using the Transfer transaction in the *Enter Personnel Actions* function to move employees from one employer to another.

After you transfer an employee to the COBRA employer, you must take the following actions to complete setting the employee up in the COBRA employer:

- Use the *Enter Participants* function to complete the *Relative ER* and *Related to EE* fields on the Maintain COBRA Participant Data screen. The system uses these fields to link the COBRA participant to an employee in the active employer.
- Use the *Update Enrollments* function to enroll the employee in COBRA benefit plans.

Refer to the next topic for detailed information on using the *Enter Participants* and *Update Enrollments* functions for COBRA participants.

Entering Participants in Your COBRA Employer

You can use the *Update Participants* function setup records in the COBRA employer for both employees and non-employees. The system requires only basic name and address information to establish a record for a COBRA participant.

Follow these steps to enter participants into your COBRA employer:

- 1 From the Infinium Human Resources main menu select *COBRA Administration*.
- 2 Select *Update COBRA Data*.
- 3 Select *Update Participants [UCOBP]*. The system displays the screen shown in Figure 12-2.

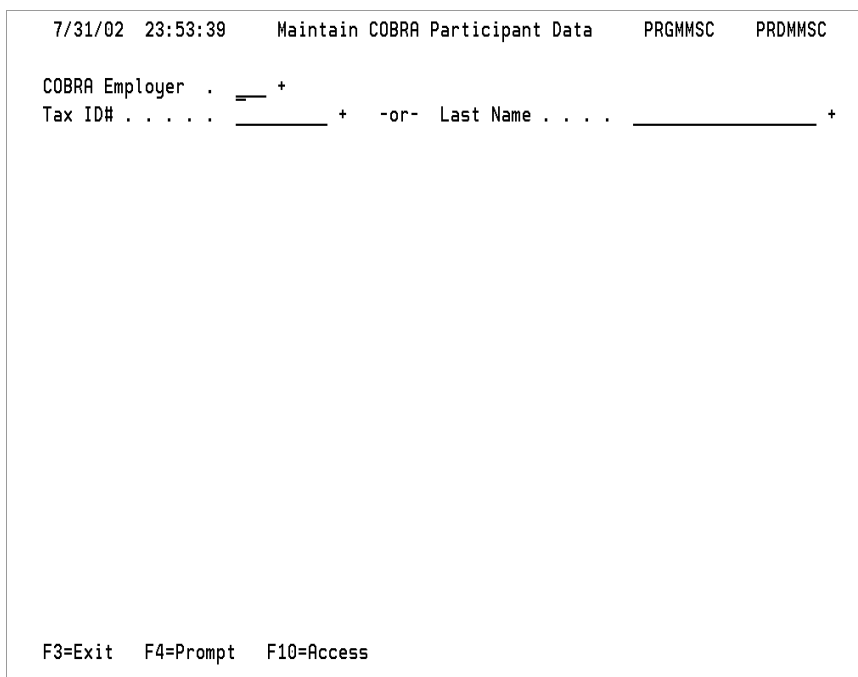


Figure 12-2: Maintain COBRA Participant Data prompt screen

- 4 Use the information below to fill in the fields on this screen.

COBRA Employer

Type the value that represents your COBRA employer.

Tax ID #

Type the Social Security number of the COBRA participant without using dashes.

5 Press Enter. The system displays the screen shown in Figure 12-3.

```

3/03/03 13:29:47   Maintain COBRA Participant Data   PRGMMSC   PRDMMSC

COBRA Employer : COB   COBRA COMPANY
Tax ID# . . . . : 000110001

Last Name . . . . A- A FREQ
First Name . . . . PMT FREQ-M   Middle Initial . . _
Middle Name . . . . RONALD   Suffix. . . . . JR
Address . . . . . 1
City/Town . . . . 1
State/Province . MA +   Postal Code . . . 11111
County . . . . . _____ +

Home Tel. No. . . 1   Sex . . . . . M
Date of Birth . . 1011975   Related to EE . . 1655 +
Relative ER . . . GMR +

Benefit Group . . xCOB-CJS +   Security Group . _____ +
Status Code . . . _____ +   Payment Frequency M

Date Entered . . . 6272002

F3=Exit F4=Prompt F6=Dependents F10=Access F12=Enrollments F22=Delete

```

Figure 12-3: Maintain COBRA Participant Data screen

6 Use the information below to fill in the fields on this screen.

Reviewing Transferred Information

If you used the transfer transaction in the *Enter Personnel Actions* function to transfer the participant to the COBRA employer, the system completes the following fields using information in the employee's basic data record in the active employer:

- *Last Name*
- *Suffix*
- *First Name*
- *Middle Initial*
- *Middle Name*
- *Address*
- *City/Town*

- *State/Province*
- *Postal Code*
- *County*
- *Home Tel. No.*
- *Date of Birth*
- *Sex*
- *Status Code*
- *Payment Frequency*
- *Date Entered*

The system also defaults a value into the *Benefit Group* field if you assigned a benefit group to the position into which you transferred the COBRA participant during the transfer transaction.

Entering Basic Information for Participants

If you did not transfer the participant into your COBRA employer, you must complete the following fields:

- *Last Name*
- *Suffix*
- *First Name*
- *Middle Initial*
- *Middle Name*
- *City/Town*
- *Date of Birth*
- *Sex*

Relative ER

Type the value that identifies the employer of the employee to whom the COBRA participant is related. If you are setting up an employee as a COBRA participant, type the value of his or her former employer.

Related to EE

Type the value that identifies the employee to whom the COBRA participant is related. If you are setting up an employee as a COBRA participant, type the employee's number in his or her former employer.

Benefit Group

Type the value that identifies the list of COBRA benefits for which the participant is eligible. You must complete this field in order to enroll the participant in COBRA benefit plans.

Security Group

If you want to restrict access to the participant's record, type the value that represents the security group to which he or she is assigned. You can use an Infinium Human Resources menu option to restrict users from accessing records of employees in a specified security group.

Press F4 to display a list of values. You define values for this field using code type **SEC**.

Status Code

Type the value that represents the participant's status in the COBRA employer. Press F4 to display a list of values. You define values for this field using code type **STS**.

Payment Frequency

Type the value for the payment frequency. Valid values are:

D	Daily
W	Weekly
B	Biweekly
S	Semi-monthly
M	Monthly
10	10 pay periods per year
13	13 pay periods per year
22	22 pay periods per year
27	27 pay periods per year
53	53 pay periods per year

When you create a participant record, Infinium HR uses the value from the *Pay Frequency* field from the *Update Employer Controls* function to calculate the COBRA payment.

Date Entered

Use this field to identify when you set up the participant on the system. When you transfer an employee into the COBRA employer, the system defaults the employee's date of hire into this field. You can replace this date.

If you are setting up a COBRA participant for the first time, type today's date into this field.

- 7 You can exit this screen in three ways:
 - Press Enter. The system displays the Maintain COBRA Participant Data prompt screen. Skip to step 8 below.
 - Press F6. The system displays the Update Dependents/Beneficiaries screen. Use information in the "Entering Employees in Benefit Plans" chapter to complete this screen.
 - Press F12. The system displays the Update COBRA Enrollments screen. Use information in the "Enrolling Participants in COBRA Benefit Plans" for more information.
 - 8 You can set up additional COBRA participants or press F3 to return to the Infinium Human Resources main menu.
-

Enrolling Participants in COBRA Benefit Plans

You use the *Update Enrollments* function to enter information for the benefit plans for which a COBRA participant is eligible. You can indicate the date on which you notified the participant of his or her COBRA eligibility. You can also record the dates on which the participant elected or declined to enroll in one or more of the COBRA plans.

You can use the *Update Enrollments* function to assign the participant to a benefit group if you have not already done so using the *Update Participants* function.

Follow these steps to enter a participant's information for COBRA benefit plans:

- 1 From the Infinium Human Resources main menu select *COBRA Administration*.
 - 2 Select *Update COBRA Data*.
 - 3 Select *Update Enrollments* [UCOBE]. The system displays the first Update COBRA enrollments prompt screen.
 - 4 Complete the fields that identify your COBRA employer and participant.
 - 5 Press Enter. The system displays the screen shown in Figure 12-4.
-

```
7/31/02 23:52:08      Update COBRA Enrollments      PRGBE25      PRDBE25

COBRA Employer : COB      COBRA COMPANY
Tax ID# . . . . : 023440404      EASTWOOD,MARTHA

Benefit Group . . COBRA +

F3=Exit  F4=Prompt  F10=Access
```

Figure 12-4: Update COBRA Enrollments prompt screen 2

- 6 Use the information below to fill in the fields on this screen.

Benefit Group

If you did not already assign the participant to a COBRA benefit group, type the value that represents his or her COBRA benefit group.

- 7 Press Enter. The system displays the screen shown in Figure 12-5.

```
7/31/02 23:52:33      Update COBRA Enrollments      PRGBE30      PRDBE30

COBRA Employer : COB      COBRA COMPANY
Tax ID# . . . . : 023440404      EASTWOOD, MARTHA
Benefit Group . : COBRA

5=Work With
Opt Benefit ID      Plan Description
= COBRA MEDICAL PLANS      CDEN1 COBRA DENTAL PLAN - 1
-                        DEN* COBRA GENERIC DENTAL PLAN
- COBRA MEDICAL PLAN      CMED1 COBRA MEDICAL PLAN - 1
-                        CMED2 COBRA MEDICAL PLAN - 2
-                        CMED3 MED PLAN FOR 29 MONTHS
-                        CMED4 COBRA MEDICAL PLAN - 1
- MEDICAL PROVIDER #1      MED* COBRA GENERIC MED PLAN

F3=Exit  F10=Access
```

Figure 12-5: Update COBRA Enrollments selection screen

- 8 Use the information below to fill in the fields on this screen.

The system displays the benefit plans associated with the participant's COBRA benefit group.

Opt

Type **5** next to each plan for which you want to record information for the specified COBRA participant.

- 9 Press Enter. The system displays the screen shown in Figure 12-6.

UPDATE COBRA ENROLLMENTS

HR 11.0 QA 113

1 of 2

COBRA Employer	COB	COBRA COMPANY	
Tax ID#	023440404	EASTWOOD, MARTHA	
Benefit ID	004	DENTAL	
Plan	CDTL*	COB-DTL*	
Relative Employer	<input type="text" value="SMR"/>	Related to EE	<input type="text" value="1655"/>
Payer Employer	<input type="text"/>	Premium paid by	<input type="text"/>
Policy#	COB STL *004	Status	<input type="text" value="1"/> (0-1)
Qualifying Event	<input type="text"/>	Freeze?	<input type="checkbox"/> Check for Yes
Qualifying Date	<input type="text"/>	Declined Date	<input type="text"/>
Notification Date	<input type="text"/>	Coverage Months	<input type="text"/>
Continuation Date	<input type="text"/>	First Prem. Rcvd	<input type="text"/>
Enrollment Date	<input type="text"/>	Last Prem. Rcvd	<input type="text"/>
Cancellation Date	<input type="text"/>	Premium Freq.	M
Insur. Prem. Amt	300.00	Payment Freq.	10
COBRA Prem. Amt	360.00		

Figure 12-6: Update COBRA Enrollments screen

If you are using the Web interface, you can click **Attachments** on this screen to attach documents to a plan. See the “Working with Attachments” chapter in this guide for more information.

- 10 Use the information below to fill in the fields on this screen.

Relative Employer

If you did not already associate the participant with the employer of the employee to which he or she is related, type the value that represents the employer.

Related to EE

If you did not already associate the participant to the employee to which he or she is related, type the value that represents the employee.

Premium paid by

Use this field to identify if an employee other than the COBRA participant pays the participant’s plan premium.

If the payer is an employee, type his or her employee number. Leave this field blank if the payer is the COBRA participant or a non-employee.

Payer Employer

If an employee other than the COBRA participant pays the plan premium for the participant, type the value that represents the employer of the person whose number you entered in the *Premium paid by* field.

Policy #

The system defaults a value into this field from the COBRA benefit plan control. You can override this value or leave this field blank.

Status

Use this field to indicate if the participant is actively enrolled or considering enrollment in the benefit plan.

Valid values are:

- 0** The plan is not active for the participant.
- 1** The plan is active for the participant.

Qualifying Event

Type the value that identifies the reason the participant is eligible for COBRA benefits.

Qualifying Date

Type the date on which the qualifying event occurred.

Freeze?

Specify a value to indicate whether to retain the rate of a benefit at a specified amount. Because you normally increase or decrease an employee's rate in accordance with variations in the insurance company's rates, use this field mainly for exceptions. Valid values are:

- 0** No. Allow the rate to vary as changes occur.
- 1** Yes. Freeze the rate the employee regardless of fluctuations within the carrier company or changes to the employee's base rate or pay frequency.

Notification Date

Type the date on which you notified the participant of his or her eligibility for COBRA benefits.

Declined Date

Type the date on which the participant declined to enroll in COBRA benefits.

Continuation Date

Type the date on which the participant elected to enroll in COBRA benefits.

Coverage Months

Type the number of months of COBRA benefit plan coverage to which the participant is entitled.

Valid values are:

- | | |
|-----------|------------------------------------|
| 18 | 18 months from the qualifying date |
| 29 | 29 months from the qualifying date |
| 36 | 36 months from the qualifying date |

Enrollment Date

Type the date on which the participant enrolls in COBRA benefits.

Cancellation Date

Type the date on which the participant's COBRA benefit ends.

Press F8 for the system to calculate the cancellation date. It uses values in the *Qualifying Date* and *Coverage Months* fields to determine the cancellation date.

First Prem Rcvd

The system defaults a date into this field based on entries you make in the *Enter Premium Payments* function for this participant.

Last Prem Rcvd

The system defaults a date into this field based on entries you make in the *Enter Premium Payments* function for this participant.

Insur. Prem. Amt

The system defaults a value into this field based on the value in the *Employee Contrib.* field on the COBRA benefit plan control.

Premium Freq

View the value that represents the frequency of the premium payments. Valid values are:

- M** Monthly
- Q** Quarterly
- A** Annually

COBRA Prem. Amt

The system defaults a value into this field based on the value in the *Employee Contrib.* field on the COBRA benefit plan control. It does not update this field when you make changes to the *Employee Contrib.* field on the COBRA benefit plan control after you set up the participant's enrollment record for the selected plan.

- 11 Press Enter. The system displays the second Update COBRA Enrollments screen similar to Figure 12-7.

```

4/08/03 10:20:43      Update COBRA Enrollments      PRGBE30  PRDBE30
                                     2 of 2
COBRA Employer : COB      COBRA COMPANY
Tax ID# . . . . : 023440404 EASTWOOD, MARTHA
Benefit ID . . . : DEN      COBRA MEDICAL PLANS
Plan . . . . . : CDEN1     COBRA DENTAL PLAN - 1

Misc Information
-----
Primary Care Phys _____ +
Est. Patient? . . _ (0, 1, 2,)
Coverage Level. . _____ +

HIPAA Information
-----
Pre-exist Expire. _____
Prior Months Cov. _____
Date/Time Qualif. _____ +
Last Change Reas. _____ +

Comments/Link:
-----

F3=Exit F4=Prompt F10=Access F12=Cancel F13=Letters F22=Delete
    
```

Figure 12-7: Update COBRA Enrollments screen

Payment Freq

View the value that represents the payment frequency associated with the participant record.

When the benefit plan has a *Deduct Frequency* value of * the system uses the payment frequency and *Premium Freq* value to calculate the *Cobra Prem Amt* value.

Primary Care Phys

Type the name of the participant's primary care physician.

Est. Patient?

If you specify a primary care physician, you must enter a value in this field. Specify whether this employee is an established patient of the specified primary care physician. Valid values are:

- | | |
|----------|-------------------------|
| 0 | Unknown |
| 1 | Established patient |
| 2 | Not established patient |

Coverage Level

Specify the value that identifies this employee's level of coverage for this benefit.

The code type associated with this value is CLC. Use the *Update Employer Codes* function to define code values.

Pre-exist Expire

You can enter a date for expiration of a pre-existing condition. The *Pre-exist Expire* field is informational only. It is used to identify employees who have a pre-existing condition expiration date, which must be satisfied before claims for the pre-existing condition will be paid. You can perform a query for customized reports for accessing information in the *Pre-exist Expire* field.

Prior Months Cov

Specify the number of months this employee had coverage under a previous benefit according to the HIPAA certificate.

Date/Time Qualif

Specify the value that identifies qualifying event for this enrollment record.

The code type associated with this value is DTQ. Use the *Update Employer Codes* function to define code values.

Last Change Reason

Specify the value that identifies the reason for changing this enrollment.

The code type associated with this value is MRC. Use the *Update Employer Codes* function to define code values.

Comments/Link

Use the dotted line at the bottom of the screen to enter any comments or additional information concerning the participant's enrollment in the selected plan.

- 12 You can exit from this screen in one of two ways:
 - Press Enter to save your information.
 - Press F13 to generate a COBRA letter. Refer to the following topic for further information.
- 13 The system displays the Update COBRA Enrollments selection screen. You can select another COBRA plan for the participant or press F3 twice to return to the Infinium Human Resources main menu.

Generating COBRA Letters

You can print letters for notification and termination of COBRA benefits using the *Update Enrollments* function. You can select from a list of four different notification letters and one termination letter. The system uses the IBM Office word processing software on your AS/400 or iSeries to generate the letters.

All five letters fit on 8 1/2" by 11" paper with standard letterhead space. Set up your printer controls to generate two copies of each letter you print. A sample of each COBRA letter is provided at the end of this chapter.

The following table describes the letters and provides you with the printer file name associated with each letter.

Designation on the Update COBRA Enrollments screen	Description	Printer File Name
Employee - Group Medical/Dental Plans	Letter advising the employee of entitlement for continuation of benefits under a Group Major Medical Plan	PRTC0B03
Dependent – Dependent Medical/Dental Plans	Letter advising spouse or dependent of employee of entitlement for continuation of benefits under a Group Major Medical Plan	PRTC0B05
Employee - Medical Reimbursement Plan	Letter advising employee of entitlement for continuation of benefits under a Medical and/or Dental Expense Reimbursement Plan	PRTC0B04
Dependent – Dependent Medical Reimbursement Plan	Letter advising spouse or dependent of employee of entitlement for continuation of benefits under a Medical and/or Dental Expense Reimbursement Plan	PRTC0B06
Notification of Termination of Benefits	Letter to current COBRA participant notifying him or her of the date that COBRA benefits terminate	PRTC0B07

Printing COBRA Letters for Employees

When you select an employee notification letter, the system displays a screen in which you can type the name, title, and address of the person to whom the participant should return a copy of the COBRA notification letter. The system inserts this information into the COBRA letter that you generate.

After you enter this information for your COBRA employer, this information is the default information for your entries on this screen when you next generate a COBRA letter. You can override the default information if necessary.

The system automatically prints the COBRA participant's name and address in all of the notification letters. It also includes the participant's COBRA coverage period, qualifying date and the date by which the employee must make his or her election.

Follow these steps to generate COBRA letters for employees:

- 1 Follow the steps listed in the “Enrolling Participants in COBRA Benefit Plans” topic to display the Update COBRA Enrollments screen shown in Figure 12-8.

COBRA Employer	COR	COBRA COMPANY	
Tax ID#	023440404	EASTWOOD, MARTHA	
Benefit ID	U04	DENTAL	
Plan	CDTL*	COB-DTL*	
Relative Employer	SMR	Related to EE	1655
Payer Employer		Premium paid by	
Policy#	COB STL *004	Status	1 (0->1)
Qualifying Event.		Freeze?	<input type="checkbox"/> Check for Yes
Qualifying Date		Declined Date	
Notification Date		Coverage Months	
Continuation Date		First Prem. Rcvd	
Enrollment Date		Last Prem. Rcvd	
Cancellation Date		Premium Freq.	M
Insur. Prem. Amt	300.00	Payment Freq.	10
COBRA Prem. Amt	360.00		

Figure 12-8: Update COBRA Enrollments screen

- 2 Press F13 to display the pop-up window displayed in Figure 12-9.

```

10/28/04 09:43:21      Update COBRA Enrollments      PRGBE30  PRDBE30
                                                                1 of 2
COBRA Employer : COB      COBRA COMPANY
Tax ID# . . . . : 000110001  A- A FREQ,JR,PMT FREQ-M R
Benefit ID . . . : 003      MEDICAL
Plan . . . . . : CHD-*     COB-MD-*

Relative Employer GMR +      Related to EE . .  1655 +
Payer Employer .    +      Premium paid by .   +
Policy# . . . . . CHD-MD-*003 Status . . . . . 1 (0->1)
Qualifying Event. RED +
Qualifying Date
Notification Dat
Continuation Dat
Enrollment Date
Cancellation Dat
Insur. Prem. Amt
COBRA Prem. Amt

                                Print COBRA Letter
                                Select letter, Press Enter
                                = Employee - Group Medical/Dental Plans
                                _ Dependent - Dependent Medical/Dental Plans
                                _ Employee - Medical Reimbursement Plan
                                _ Dependent - Dependent Medical Reimbursement
                                _ Notification of Termination of Benefits

                                F3=Exit F12=Cancel

F3=Exit F4=Prompt F8=Calc Cncl Date F10=Access F13=Letters F22=Delete
    
```

Figure 12-9: Update COBRA Enrollments screen with Print COBRA Letter window

- 3 Type any character next to Employee – Group Major Medical Plan.
- 4 Press Enter. The system displays a screen similar to Figure 12-10.

```

10/28/04 09:44:37      Entry of COBRA Info      PRGCOB02  PRDCOB02

Return and COBRA Info.
Name . . . . . : Amy Adams
Title . . . . . : Benefits Administrator
Company . . . . : SSA-GT
Address line 1 : 25 Communications Way
                2 :
City . . . . . : HYANNIS
State & Zip. . . : MA 02860
Benefit ID Grp.:   +      Trade Adj. Asst: 0 (0/1)
1st Payment Due:        Reminders Sent : 0 (0/1)

F3=Exit F4=Prompt F12=Cancel
    
```

Figure 12-10: Entry of COBRA Info screen

- 5 Use the information below to fill in the fields on this screen.

Name and address information

Type the name, address and title of the person to whom the participant must return the COBRA form.

Benefit ID Grp

If the participant is eligible to make coverage elections, specify the benefit ID group that includes the plans to which the participant is eligible. The system displays the list of plans from which the participant can make coverage selections.

Trade Adj. Asst.

Specify whether the participant is eligible for trade adjustment assistance. Valid values are:

0 No

1 Yes

1st Payment Due

Type the date when the first payment for COBRA coverage is due.

Reminders Sent

Specify yes if reminders of payment are sent to the participant. Otherwise, specify no.

- 6 Press Enter. The system uses interactive processing to immediately generate the COBRA letter and displays the following message at the bottom of the screen:

COBRA letter being printed. Please wait.

It then displays the Update COBRA Enrollments selection screen.

- 7 You can generate letters for a different plan for the selected employee or press F3 twice to return to the Infinium Human Resources main menu.
- 8 Access the Work with All Spooled Files screen to view or print your COBRA letters. Refer to the table provided in the beginning of this topic to identify the printer file names the system assigns to each letter.
-

Printing COBRA Letters for Dependents

If you select a notification letter for dependents, the system displays a screen on which you can type the name, title, and address of the person to whom the participant should return a copy of the COBRA notification letter. The system inserts this information into the COBRA letter that you generate. You also enter the following dependent information:

- The dependent's name
- Whether the COBRA letter will be sent to the employee's spouse or former spouse
- The employee's dependents who are covered by the plan or whose coverage ended

After you enter this information for your COBRA employer, the information is the default information on this screen when you next generate a COBRA letter. You can override the default information if necessary.

The system automatically prints the COBRA participant's name and address in all of the notification letters. It also includes the participant's COBRA coverage period, qualifying date and the date by which the employee must make the election.

Follow these steps to generate COBRA letters for dependents:

- 1 Follow the steps listed in the "Enrolling Participants in COBRA Benefit Plans" topic to display the Update COBRA Enrollments screen shown in Figure 12-11.
-

Figure 12-11: Update COBRA Enrollments screen

2 Press F13 to display the pop-up window displayed in Figure 12-12.

```

10/28/04 09:43:21      Update COBRA Enrollments      PRGBE30  PRDBE30
                                                                1 of 2

COBRA Employer : COB      COBRA COMPANY
Tax ID# . . . . : 000110001  A- A  FREQ, JR, PMT  FREQ-M R
Benefit ID . . . : 003      MEDICAL
Plan . . . . . : CMD-*     COB-MD-*

Relative Employer  GMR +          Related to EE . . 1655 +
Payer Employer .  +          Premium paid by .  +
Policy# . . . . .  CMD-MD-*003    Status . . . . . 1 (0->1)
Qualifying Event.  RED +
Qualifying Date
Notification Dat
Continuation Dat
Enrollment Date
Cancellation Dat
Insur. Prem. Amt
COBRA Prem. Amt

                                Print COBRA Letter
                                Select letter, Press Enter
                                = Employee - Group Medical/Dental Plans
                                _ Dependent - Dependent Medical/Dental Plans
                                _ Employee - Medical Reimbursement Plan
                                _ Dependent - Dependent Medical Reimbursement
                                _ Notification of Termination of Benefits

                                F3=Exit F12=Cancel

F3=Exit F4=Prompt F8=Calc Cncl Date F10=Access F13=Letters F22=Delete
    
```

Figure 12-12: Update COBRA Enrollments screen with Print COBRA Letter window

3 Type any character next to Dependent – Dependent Medical/Dental Plans.

4 Press Enter. The system displays the window shown in Figure 12-13.

```

10/28/04 09:45:33      Entry of COBRA Info      PRGCOB02  PRDCOB02

Return and COBRA Info.
Name . . . . . : Amy Adams
Title . . . . . : Benefits Administrator
Company . . . . . : SSA-GT
Address line 1 : 25 Communications Way
                  2 : _____
City . . . . . : HYANNIS
State & Zip. . . : MA   02860
Benefit ID Grp.: _____ + Trade Adj. Asst: 0 (0/1)
1st Payment Due: _____ Reminders Sent : 0 (0/1)

Dependent Letter Info.
Employer . . . . : COB +
Employee . . . . : 000110001 + or Last Name _____ +
Dependent Name : _____ +
Spouse/Former. . : -
Dependents . . . : -
End Depend . . . : -

F3=Exit  F4=Prompt  F12=Cancel
    
```

Figure 12-13: Entry of COBRA Info screen

5 Use the information below to fill in the fields on this screen.

Name and address information

Type the name, address and title of the person to whom the participant must return the COBRA form.

Benefit ID Grp

If the participant is eligible to make coverage elections, specify the benefit ID group that includes the plans to which the participant is eligible. The system displays the list of plans from which the participant can make coverage selections.

Trade Adj. Asst.

Specify whether the participant is eligible for trade adjustment assistance.

1st Payment Due

Type the date when the first payment for COBRA coverage is due.

Reminders Sent

Specify yes if reminders of payment are sent to the participant. Otherwise, specify no.

Employer

Specify the COBRA employer or employer of the employee with whom the participant is associated.

Employee

Specify the participant number of the employee whose dependent is eligible for COBRA benefits. You must enter a value in the *Employee* or *Last Name* field.

Last Name

Specify the last name of the employee participant whose dependent is eligible for the COBRA benefit.

Dependent Name

This is the combined full name for this beneficiary. Select a dependent name from the prompt list.

Spouse/Former

Type any character to indicate that the COBRA notice is for the spouse or former spouse.

Dependents

Type any character to indicate that the COBRA notice is for the dependents.

End Depend

Type any character to indicate that the COBRA notice is for dependents whose coverage has ended.

- 6 Press Enter. The system uses interactive processing to immediately generate the COBRA letter and displays the following message at the bottom of the screen:

COBRA letter being printed. Please wait.

It then displays the Update COBRA Enrollments selection screen.

- 7 You can generate letters for a different plan for the selected employee or press F3 twice to return to the Infinium Human Resources main menu.
 - 8 Access the Work with All Spooled Files screen to view or print your COBRA letters. Refer to the table provided in the beginning of this topic to identify the printer file names the system assigns to each letter.
-

Completing the Notification of Termination of Benefits Letter

If you select the Notification of Termination of Benefits letter, the system displays a window in which you can type the name and title of the sender of the letter.

The system automatically prints the COBRA participant's name and address in the termination letter. It also includes the date on which the participant's COBRA coverage terminates.

Entering COBRA Premium Payments

You can use the *Enter Premium Payments* function to record the COBRA plan premium payments made by and for COBRA participants.

You can enter cash or check payments. You can also indicate if a premium payment is made by someone other than the COBRA participant.

Follow these steps to record COBRA premium payments:

- 1 From the Infinium Human Resources main menu select *COBRA Administration*.
- 2 Select *Update COBRA Data*.
- 3 Select *Enter Premium Payments* [ECOPB]. The system displays the Enter COBRA Premium Payments prompt screen.
- 4 Type the values that represent your COBRA employer and the COBRA participant for whom you are entering premium payment information.
- 5 Press Enter. The system displays the screen shown in Figure 12-14.

```
Infinium: Enter Premium Payments (PE-310)
File Edit Tools Window Help
3/21/97 19:25:10 Enter COBRA Premium Payments PRGIKM PRDIKM
COBRA Employer : COB COBRA COMPANY
Tax ID# . . . . : 367987345 BEAR, TEDDY

5=Work With
Opt Benefit ID Plan Description
5 COBRA DENTAL PLANS COEM1 COBRA DENTAL PLAN - SINGLE
1 COBRA MEDICAL PLANS CMED1 COBRA MEDICAL PLAN - SINGLE
5 COBRA MEDICAL PLANS CMED2 COBRA MEDICAL PLAN - FAMILY
1 COBRA MEDICAL PLANS CMED3 MED PLAN FOR 29 MONTHS

F3=Exit F10=Access
Field Action: 5 Background Action: F12
```

Figure 12-14: Enter COBRA Premium Payments screen

6 Use the information below to fill in the fields on this screen.

The system displays the COBRA plans for which you have entered information for the participant.

Opt

Type **5** next to the benefit plan for which you want to enter premium payment information.

7 Press Enter. The system displays the screen shown in Figure 12-15.

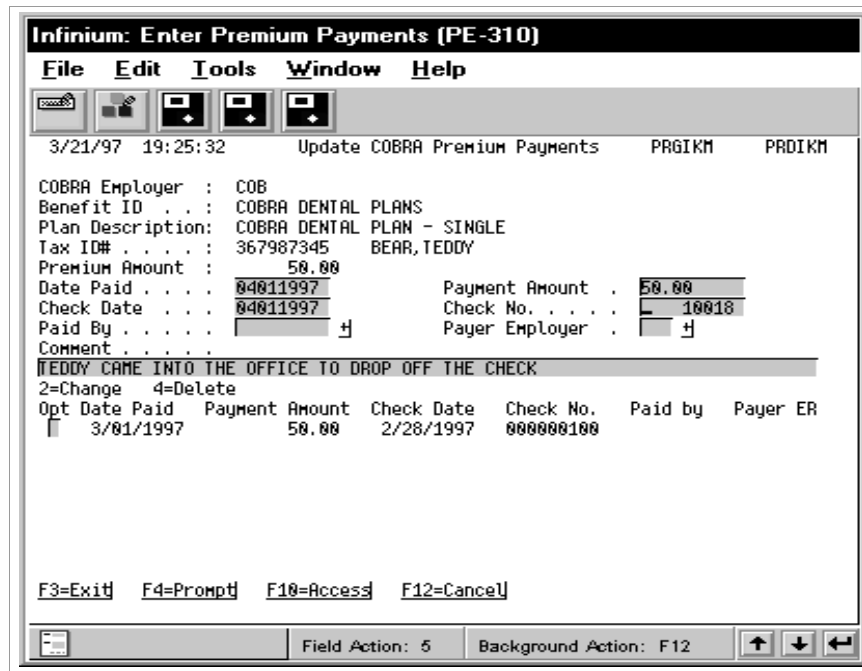


Figure 12-15: Update COBRA Premium Payments screen

8 Use the information below to fill in the fields on this screen.

Entering Payment Data

You enter information for a new payment in the top portion of the screen. The system displays previously recorded premium payments in the sub-file at the bottom of the screen.

Reviewing or Changing Previous Payment Data

Type **2** in the *Opt* field at the bottom of the screen to retrieve a previous payment record from the sub-file of the screen. The system displays the information in the top portion of the screen. You can review or make changes

to the information. Press Enter to return the record to the sub-file of the screen.

Deleting a Previous Payment

Type **4** in the *Opt* field at the bottom of the screen to delete a previous payment record from the sub-file of the screen. The system replaces the record with **DELETED**. It completely removes the record when you press F3 to exit from this screen.

Premium Amount

The system defaults the value from the *COBRA Prem. Amt* field on the employee's COBRA enrollment record into this field.

Date Paid

Type the date on which you received the COBRA premium payment.

Payment Amount

Type the amount of the COBRA premium payment.

Check Date

If the participant pays by check, type the date of the check.

Check No

If the participant pays by check, type the amount of the check.

Paid By

If an employee other than the participant pays the premium, type the employee number of the payer.

Payer Employer

If an employee other than the participant pays the premium, type the value that represents the employer of the payer. Leave this field blank if the COBRA participant pays the premium or the premium is paid by a non-employee.

Comment

Use the dotted line below this field to enter any comments or additional information concerning the participant's COBRA premium payment.

- 9 Press Enter. The system takes one of the following actions:
-

- If the amount that you entered in the *Payment Amount* field agrees with the value in the *Premium Amount* field, the system stores the information in the sub-file of the screen.
- If the amounts do not agree, the system displays the following **WARNING** message:

Amount paid does not match COBRA premium amount due - F21 to accept

Press Reset and then press F21 to override the warning message and store your information in the sub-file of the screen.

- 10 Repeat steps 8 and 9 to enter additional COBRA premium payments for the specified plan and participant or press F3 to exit this screen.

Repeat steps 7 and 8 to enter additional COBRA premium payments for a different plan for the specified participant or press F3 twice to return to the Infinium Human Resources main menu.

Printing COBRA Reports

You can generate three categories of reports for your COBRA employer. Refer to the “Maintaining Employee Benefit Enrollments” chapter for detailed information on how to generate reports in the first two categories listed below. This topic contains information on how to generate reports using options within the *COBRA Administration* function.

- You can generate reports for your COBRA benefit controls using the following options in the *Benefits Administration* function:
 - *List Benefit Plans*
 - *List Benefit Identities*
 - *Insurance Premium Summary - Alpha*
 - *Insurance Activity Report*
- You can generate reports for your COBRA enrollments using the following options in the *Benefits Administration* function:
 - *List Employee Enrollments*
 - *List EE Enrollments - Plan*
- You can generate the four reports listed below pertaining to COBRA activity using options within the *COBRA Administration* function:
 - *List Dependents by Age*
 - *List Outstanding Requests*
 - *List Coverage Cancellations*
 - *List Outstanding Premium Payment*

List Dependents by Age Report

You use this report to identify dependent children who reach the maximum age allowed for dependents in your health insurance plans. You generally run this report using benefit identities and plans in your active employer. The system checks the ages of dependents associated with employee enrollment records in plans within the designated identity to determine which of the dependents have reached or will reach the specified age during the date range that you select.

Follow these steps to generate the List Dependents by Age report:

- 1 From the Infinium Human Resources main menu select *COBRA Administration*.
- 2 Select *List COBRA Data*.
- 3 Select *List Dependents by Age* [LDSA].
- 4 Press Enter. The system displays the screen shown in Figure 12-16.

```

6/25/12 18:51:58      List Dependents by Age      PRGJC50  PRDJC50

Employer . . . .  ___ +

Benefit Identity.  ___ +
Benefit Plan . .  _____ +

Dependent Age . .  ___

From Date . . . .  _____
To Date . . . . .  _____

Include Inactive?  _ (0=No 1=Yes)

F3=Exit  F4=Prompt  F10=Access
    
```

Figure 12-16: List Dependents by Age screen

- 5 Use the information below to fill in the fields on this screen.

Employer

Type the value that identifies your COBRA or active employer.

Benefit Identity

Type the value that identifies the benefit identity for the report. You must specify a benefit identity to obtain data on the report.

Benefit Plan

Type the value that identifies the benefit plan for the report. Leave this field blank to print a report that includes dependents in all of the benefit plans within the specified identity.

Dependent Age

Type the age beyond which dependents are excluded from your benefit plan(s).

From Date

Type the starting date the system should use to select dependents for the report. The report includes all dependents who reach the specified age on or after this date.

To Date

Type the ending date the system should use to select dependents for the report. The report includes all dependents who reach the specified age on or before this date.

Include Inactive?

Specify whether to include inactive dependents on the list. Valid values are:

- 0** Include only active dependents on the list.
- 1** Include both active and inactive dependents on the list.

- 6** Press Enter. The system generates the following message and returns you to the Infinium Human Resources main menu:

Building submission request . . .

The system uses batch processing to generate the List Dependents of Specified Age report. Access the Work with Submitted Jobs screen, the Work with All Spooled Files screen, or the Work with Printer Output screen. You can view or print the report using options on these screens. A sample of this report is provided at the end of this chapter.

List Outstanding Requests Report

Use this report to identify COBRA participants who have elected to continue their benefits but not made their initial COBRA premium payment.

Follow these steps to generate the List Outstanding COBRA Participation Requests report.

- 1** From the Infinium Human Resources main menu select *COBRA Administration*.
-

- 2 Select *List COBRA Data*.
- 3 Select *List Outstanding Requests* [LOCR].
- 4 Press Enter. The system displays the screen shown in Figure 12-17.

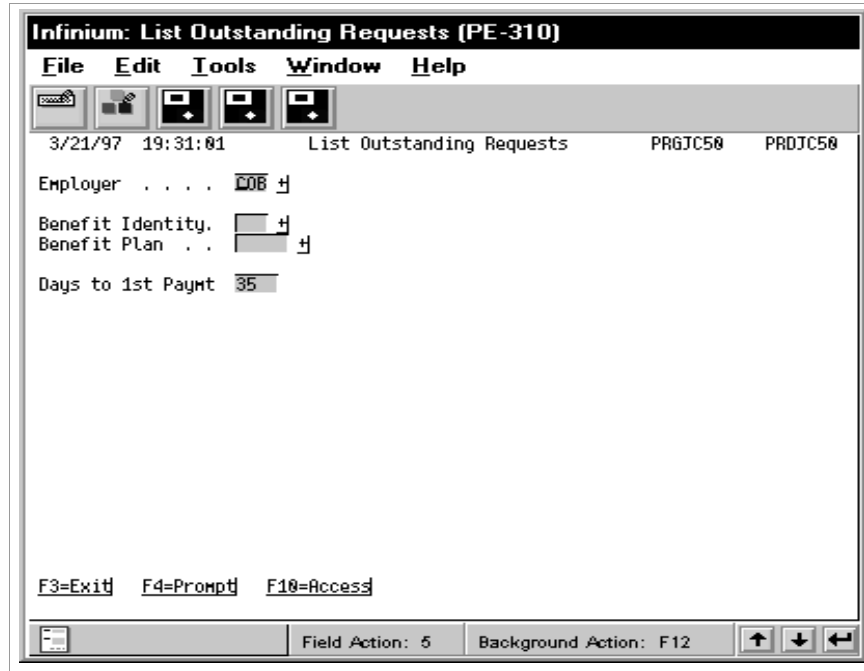


Figure 12-17: List Outstanding Requests screen

- 5 Use the information below to fill in the fields on this screen.

Employer

Type the value that identifies your COBRA or active employer.

Benefit Identity

Type the value that identifies the benefit identity for the report. Leave this field blank to print a report for all benefit identities.

Benefit Plan

Type the value that identifies the benefit plan for the report. Leave this field blank to print a report for all benefit plans.

Days to 1st Paymt

Type the number of days beyond a participant's COBRA continuation date that you received the participant's first COBRA premium payment. The system includes participants for which you have received no premium

payments as well as those whose payment date is more than the specified number of days after their continuation date.

The system compares the date in the *Continuation Date* field in each participant's Update COBRA Enrollments screen to the date in the *Date Paid* field of the earliest record in the sub-file of the Update COBRA Premium Payments screen.

- 6 Press Enter. The system generates the following message and returns you to the Infinium Human Resources main menu:

Building submission request . . .

The system uses batch processing to generate the Outstanding COBRA Participation Requests report. Access the Work with Submitted Jobs screen, the Work with All Spooled Files screen, or the Work with Printer Output screen. You can view or print the report using options on these screens.

List Coverage Cancellations Report

Use this report to identify COBRA participants whose benefit coverage ends during a specified time period.

Follow these steps to generate the List Coverage Cancellations report.

- 1 From the Infinium Human Resources main menu select *COBRA Administration*.
 - 2 Select *List COBRA Data*.
 - 3 Select *List Coverage Cancellations* [LCCC].
 - 4 Press Enter. The system displays the screen shown in Figure 12-18.
-

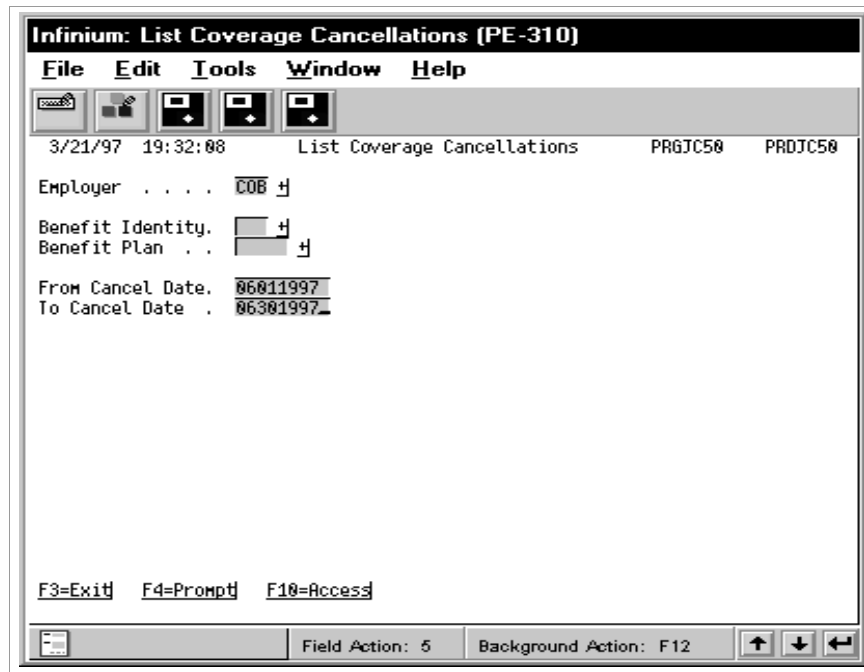


Figure 12-18: List Coverage Cancellations screen

- 5 Use the information below to fill in the fields on this screen.

Employer

Type the value that identifies your COBRA or active employer.

Benefit Identity

Type the value that identifies the benefit identity for the report.

Benefit Plan

Type the value that identifies the benefit plan for the report.

From Cancel Date

Type the starting date the system should use to select participants for the report. The report includes COBRA participants whose coverage in the specified plan ends on or after this date.

To Cancel Date

Type the ending date the system should use to select participants for the report. The report includes all COBRA participants whose coverage in the specified plan ends on or before this date.

- 6 Press Enter. The system generates the following message and returns you to the Infinium Human Resources main menu:

Building submission request . . .

The system uses batch processing to generate the List COBRA Coverage Cancellations report. Access the Work with Submitted Jobs screen, the Work with All Spooled Files screen, or the Work with Printer Output screen. You can view or print the report using options on these screens.

List Outstanding Premium Payment Report

You use this report to identify participants whose COBRA premium payments are not current.

Follow these steps to generate the Outstanding COBRA Premium Payments report.

- 1 From the Infinium Human Resources main menu select *COBRA Administration*.
 - 2 Select *List COBRA Data*.
 - 3 Select *List Outstanding Premium Payment [LOPP]*.
 - 4 Press Enter. The system displays the screen shown in Figure 12-19.
-

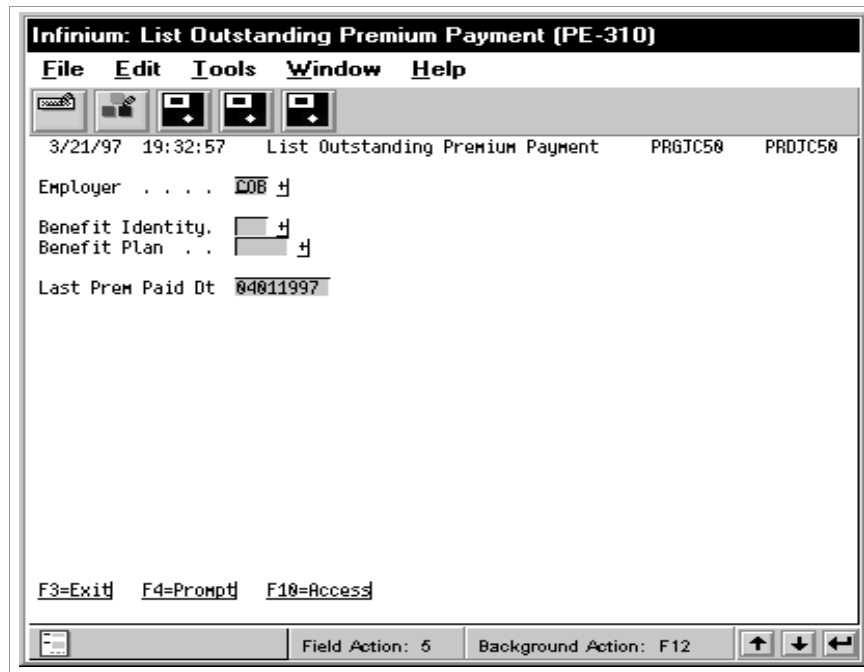


Figure 12-19: List Outstanding Premium Payment screen

- 5 Use the information below to fill in the fields on this screen.

Employer

Type the value that identifies your COBRA or active employer.

Benefit Identity

Type the value that identifies the benefit identity for the report.

Benefit Plan

Type the value that identifies the benefit plan for the report.

Last Prem Paid Dt

Type the date beyond which participants in the selected plan have not made COBRA premium payments. The report includes COBRA participants whose last premium payment date is on or before the specified date. The report also includes participants for whom you have not recorded any COBRA premium payments.

- 6 Press Enter. The system generates the following message and returns you to the Infinium Human Resources main menu:

Building submission request . . .

The system uses batch processing to generate the Outstanding COBRA Premium Payments report. Access the Work with Submitted Jobs screen, the Work with All Spooled Files screen, or the Work with Printer Output screen. You can view or print the report using options on these screens.

5/20/97 17:23:10

EMPLOYER ZUS

SAMPLE US COMPANY

BENEFIT IDENTITY M01 MEDICAL PROVIDER #1

TO REACH AGE 21 BETWEEN 1/01/1997 AND 12/31/1997

DEPENDENT NAME

D.O.B.

AGE RELATIONSHIP

EMPLOYEE

BENEFIT PLAN: M1FB MED FAMILY HMO B/W

ROCKY BEACH

5/15/1976

21.0 SON

80103 BEACH, SANDY

BENEFIT PLAN: M1FW MED FAMILY HMO WEEKLY

ALVA ACCURATE

2/08/1976

21.3 DAUGHTER

80005 ACCURATE, ALAN C

ALVIN ACCURATE

2/08/1976

21.3 SON

80005 ACCURATE, ALAN C

TOTAL NUMBER OF DEPENDENTS LISTED: 3

□

**Sample COBRA Letter: Employee - Group Medical/Dental Plans
(PRTC0B03)**

12/15/2004

Dear Ms. Jones:

This notice contains important information about your right to continue your health care coverage in the COB-MD-* (the Plan). Please read the information contained in this notice very carefully.

To elect COBRA continuation coverage, follow the instructions on the next page to complete the enclosed Election Form and submit it to us.

If you do not elect COBRA continuation coverage, your coverage under the Plan will end on 1/01/2005 due to: REDUCTION OF WORKING HOURS

Each person ("qualified beneficiary") in the category(ies) checked below is entitled to elect COBRA continuation coverage, which will continue group health coverage under the Plan for up to 18 months.

- X Employee or former employee
- Spouse or former spouse
- Dependent child(ren) covered under the Plan on the day the event that caused the loss of coverage
- Child who is losing coverage under the Plan because he or she is no longer a dependent under the Plan

If elected, COBRA continuation coverage will begin on 1/01/2005 and can last until

COBRA continuation coverage will cost:500.00

You do not have to send any payment with the Election Form. Important additional information about payment for COBRA continuation coverage is included in the pages following the Election Form.

If you have any questions about this notice or your rights to COBRA continuation coverage, you should contact:

Jane Jones
Benefits Administrator
SSA-Global
25 Communications Way
HYANNIS
MA 02860

Signature

Date

Print Name

Relationship to individual(s) listed above

Print Address

Telephone number

**IMPORTANT INFORMATION
ABOUT YOUR COBRA CONTINUATION COVERAGE RIGHTS**

What is continuation coverage?

Federal law requires that most group health plans (including this Plan) give employees and their families the opportunity to continue their health care coverage when there is a "qualifying event" that would result in a loss of coverage under an employer's plan. Depending on the type of qualifying event, "qualified beneficiaries" can include the employee (or retired employee) covered under the group health plan, the covered employee's spouse, and the dependent children of the covered employee.

Continuation coverage is the same coverage that the Plan gives to other participants or beneficiaries under the Plan who are not receiving continuation coverage. Each qualified beneficiary who elects continuation coverage will have the same rights under the Plan as other participants or beneficiaries covered under the Plan, including special enrollment rights.

How long will continuation coverage last?

In the case of a loss of coverage due to end of employment or reduction in hours of employment, coverage generally may be continued only for up to a total of 18 months. In the case of losses of coverage due to an employee's death, divorce or legal separation, the employee's becoming entitled to Medicare benefits or a dependent child ceasing to be a dependent under the terms of the plan, coverage may be continued for up to a total of 36 months. When the qualifying event is the end of employment or reduction of the employee's hours of employment, and the employee became entitled to Medicare benefits less than 18 months before the qualifying event, COBRA continuation coverage for qualified beneficiaries other than the employee lasts until 36 months after the date of Medicare entitlement. This notice shows the maximum period of continuation coverage available to the qualified beneficiaries.

Continuation coverage will be terminated before the end of the maximum period if:

- any required premium is not paid in full on time,
- a qualified beneficiary becomes covered, after electing continuation coverage, under another group health plan that does not impose any pre-existing condition exclusion for a pre-existing condition of the qualified beneficiary,
- a covered employee becomes entitled to Medicare benefits (under Part A, Part B, or both) after electing continuation coverage, or
- the employer ceases to provide any group health plan for its employees.

Continuation coverage may also be terminated for any reason the Plan would terminate coverage of a participant or beneficiary not receiving continuation coverage (such as fraud).

How can you extend the length of COBRA continuation coverage?

If you elect continuation coverage, an extension of the maximum period of coverage may be available if a qualified beneficiary is disabled or a second qualifying event occurs. You must notify Jane Jones of a disability or a second qualifying event in order to extend the period of continuation coverage. Failure to provide notice of a disability or second qualifying event may affect the right to extend the period of continuation coverage.

Disability

An 11-month extension of coverage may be available if any of the qualified beneficiaries is determined by the Social Security Administration (SSA) to be disabled. The disability has to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of continuation coverage. Each qualified beneficiary who has elected continuation coverage will be entitled to the 11-month disability extension if one of them qualifies. If the qualified beneficiary is determined by SSA to no longer be disabled, you must notify the Plan of that fact within 30 days after SSA's determination.

Second Qualifying Event

An 18-month extension of coverage will be available to spouses and dependent children who elect continuation coverage if a second qualifying event occurs during the first 18-months of continuation coverage. The maximum amount of continuation coverage available when a second qualifying event occurs is 36 months. Such second qualifying events may include the death of a covered employee, divorce or

separation from the covered employee, the covered employee's becoming entitled to Medicare benefits (under Part A, Part B or both), or a dependent child's ceasing to be eligible for coverage as a dependent under the Plan. These events can be a second qualifying event only if they would have caused the qualified beneficiary to lose coverage under the Plan if the first qualifying event had not occurred. You must notify the Plan within 60 days after a second qualifying event occurs if you want to extend your continuation coverage.

How can you elect COBRA continuation coverage?

To elect continuation coverage, you must complete the Election Form and furnish it according to the directions on the form. Each qualified beneficiary has a separate right to elect continuation coverage. For example, the employee's spouse may elect continuation coverage even if the employee does not. Continuation coverage may be elected for only one, several, or for all dependent children who are qualified beneficiaries. A parent may elect to continue coverage on behalf of any dependent children. The employee or the employee's spouse can elect continuation coverage on behalf of all of the qualified beneficiaries. In considering whether to elect continuation coverage, you should take into account that a failure to continue your group health coverage will affect your future rights under federal law. First, you can lose the right to avoid having pre-existing condition exclusions applied to you by other group health plans if you have more than a 63-day gap in health coverage, and election of continuation coverage may help you not have such a gap. Second, you will lose the guaranteed right to purchase individual health insurance policies that do not impose such pre-existing condition exclusions if you do not get continuation coverage for the maximum time available to you. Finally, you should take into account that you have special enrollment rights under federal law. You have the right to request special enrollment in another group health plan for which you are otherwise eligible (such as a plan sponsored by your spouse's employer) within 30 days after your group health coverage ends because of the qualifying event listed above. You will also have the same special enrollment right at the end of continuation coverage if you get continuation coverage for the maximum time available to you.

How much does COBRA continuation coverage cost?

Generally, each qualified beneficiary may be required to pay the entire cost of continuation coverage. The amount a qualified beneficiary may be required to pay may not exceed 102 percent (or, in the case of an extension of continuation coverage due to a disability, 150 percent) of the cost to the group health plan (including both employer and employee contributions) for coverage of a similarly situated plan participant or beneficiary who is not receiving continuation

coverage. The required payment for each continuation coverage period for each option is described in this notice.

The Trade Act of 2002 created a new tax credit for certain individuals who become eligible for trade adjustment assistance and for certain retired employees who are receiving pension payments from the Pension Benefit Company Corporate (PBGC) (eligible individuals). Under the new tax provisions, eligible individuals can either take a tax credit or get advance payment of 65% of premiums paid for qualified health insurance, including continuation coverage. If you have questions about these new tax provisions, you may call the Health Coverage Tax Credit Customer Contact Center toll-free at 1-866-628-4282. TTD/TTY callers may call toll-free at 1-866-626-4282. More information about the Trade Act is also available at

www.doleta.gov/tradeact/2002act_index.asp

When and how must payment for COBRA continuation coverage be made?

First payment for continuation coverage

If you elect continuation coverage, you do not have to send any payment with the Election Form. However, you must make your first payment for continuation coverage not later than 45 days after the date of your election. (This is the date the Election Notice is post-marked, if mailed.) If you do not make your first payment for continuation coverage in full not later than 45 days after the date of your election, you will lose all continuation coverage rights under the Plan. You are responsible for making sure that the amount of your first payment is correct. You may contact

Jane Jones
Benefits Administrator
25 Communications Way
HYANNIS
MA 02860

to confirm the correct amount of your first payment.

Periodic payments for continuation coverage

After you make your first payment for continuation coverage, you will be required to make periodic payments for each subsequent coverage period. The amount due for each coverage period for each qualified beneficiary is shown in this notice. The periodic payments can be made on a monthly basis. Under the Plan, each of these periodic payments for continuation coverage is due on day 01 for that coverage period. If you make a periodic payment on or before the first day of

the coverage period to which it applies, your coverage under the Plan will continue for that coverage period without any break. The Plan will not send periodic notices of payments due for these coverage periods.

Grace periods for periodic payments

Although periodic payments are due on the dates shown above, you will be given a grace period of 30 days after the first day of the coverage period to make each periodic payment. Your continuation coverage will be provided for each coverage period as long as payment for that coverage period is made before the end of the grace period for that payment. However, if you pay a periodic payment later than the first day of the coverage period to which it applies, but before the end of the grace period for the coverage period, your coverage under the Plan will be suspended as of the first day of the coverage period and then retroactively reinstated (going back to the first day of the coverage period) when the periodic payment is received. This means that any claim you submit for benefits while your coverage is suspended may be denied and may have to be resubmitted once your coverage is reinstated. If you fail to make a periodic payment before the end of the grace period for that coverage period, you will lose all rights to continuation coverage under the Plan.

Your first payment and all periodic payments for continuation coverage should be sent to:

Jane Jones
Benefits Administrator
25 Communications Way
HYANNIS
MA 02860

For more information

This notice does not fully describe continuation coverage or other rights under the Plan. More information about continuation coverage and your rights under the Plan is available in your summary plan description or from the Plan Administrator.

If you have any questions concerning the information in this notice, your rights to coverage, or if you want a copy of your summary plan description, you should contact

Jane Jones

Benefits Administrator

25 Communications Way

HYANNIS

MA 02860

For more information about your rights under ERISA, including COBRA, the Health Insurance Portability and Accountability Act (HIPAA), and other laws affecting group health plans, contact the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit the EBSA website at www.dol.gov/ebsa. (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.)

Keep your Plan Informed of Address Changes

In order to protect you and your family's rights, you should keep the Plan Administrator informed of any changes in your address and the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

Figure 12-20: COBRA Sample Letter for Employee Group Medical/Dental Plans

**Sample COBRA Letter: Dependent - Dependent Medical/Dental Plans
(PRTC0B05)**

12/15/2004

Dear: FREQ, SALLY

This notice contains important information about your right to continue your health care coverage in the

COB-MD-*

(the Plan). Please read the information contained in this notice very carefully.

To elect COBRA continuation coverage, follow the instructions on the next page to complete the enclosed Election Form and submit it to us.

If you do not elect COBRA continuation coverage, your coverage under the Plan will end on 1/01/2005 due to: REDUCTION OF WORKING HOURS

Each person ("qualified beneficiary") in the category(ies) checked below is entitled to elect COBRA continuation coverage, which will continue group health coverage under the Plan for up to 18 months.

- Employee or former employee
- Spouse or former spouse
- Dependent child(ren) covered under the Plan on the day the event that caused the loss of coverage
- Child who is losing coverage under the Plan because he or she is no longer a dependent under the Plan

If elected, COBRA continuation coverage will begin on 1/01/2005 and can last until .

COBRA continuation coverage will cost: 500.00
You do not have to send any payment with the Election Form. Important additional information about payment for COBRA continuation coverage is included in the pages following the Election Form.

If you have any questions about this notice or your rights to COBRA continuation coverage, you should contact:

Jane Jones
Benefits Administrator
SSA-Global
25 Communications Way

HYANNIS
MA 02860

COBRA CONTINUATION COVERAGE ELECTION FORM

| INSTRUCTIONS: To elect COBRA continuation coverage, complete this
| Election Form and return it to us. Under federal law, you must have
| 60 days after the date of this notice to decide whether you want to
| elect COBRA continuation coverage under the Plan.

| Send completed Election Form to: Jane Jones
| Benefits Administrator
| SSA-Global
| 25 Communications Way

HYANNIS
MA 02860

| This Election Form must be completed and returned by mail. If
| mailed, it must be post-marked no later than 3/02/2005.

| If you do not submit a completed Election Form by the due date
| shown above, you will lose your right to elect COBRA continuation
| coverage. If you reject COBRA continuation coverage before the due
| date, you may change your mind as long as you furnish a completed
| Election Form before the due date. However, if you change your mind
| after first rejecting COBRA continuation coverage, your COBRA
| continuation coverage will begin on the date you furnish the
| completed Election Form.

| Read the important information about your rights included in the
| pages after the Election Form.

I (We) elect COBRA continuation coverage in the _____
(the Plan) as indicated below:

Name	Date of Birth	Relationship to Employee	SSN (or other identifier)
------	---------------	--------------------------	---------------------------

a. _____

{Add if appropriate: Coverage option elected: _____}

b. _____

{Add if appropriate: Coverage option elected: _____}

c. _____

{Add if appropriate: Coverage option elected: _____}

Signature

Date

Print Name

Relationship to individual(s) listed above

Print Address

Telephone number

IMPORTANT INFORMATION ABOUT YOUR COBRA CONTINUATION COVERAGE RIGHTS

What is continuation coverage?

Federal law requires that most group health plans (including this Plan) give employees and their families the opportunity to continue their health care coverage when there is a "qualifying event" that would result in a loss of coverage under an employer's plan. Depending on the type of qualifying event, "qualified beneficiaries" can include the employee (or retired employee) covered under the group health plan, the covered employee's spouse, and the dependent children of the covered employee.

Continuation coverage is the same coverage that the Plan gives to other participants or beneficiaries under the Plan who are not receiving continuation coverage. Each qualified beneficiary who elects continuation coverage will have the same rights under the Plan as other participants or beneficiaries covered under the Plan, including special enrollment rights.

How long will continuation coverage last?

In the case of a loss of coverage due to end of employment or reduction in hours of employment, coverage generally may be continued only for up to a total of 18 months. In the case of losses of coverage due to an employee's death, divorce or legal separation, the employee's becoming entitled to Medicare benefits or a dependent child ceasing to be a dependent under the terms of the plan, coverage may be continued for

up to a total of 36 months. When the qualifying event is the end of employment or reduction of the employee's hours of employment, and the employee became entitled to Medicare benefits less than 18 months before the qualifying event, COBRA continuation coverage for qualified beneficiaries other than the employee lasts until 36 months after the date of Medicare entitlement. This notice shows the maximum period of continuation coverage available to the qualified beneficiaries.

Continuation coverage will be terminated before the end of the maximum period if:

- any required premium is not paid in full on time,
- a qualified beneficiary becomes covered, after electing continuation coverage, under another group health plan that does not impose any pre-existing condition exclusion for a pre-existing condition of the qualified beneficiary,
- a covered employee becomes entitled to Medicare benefits (under Part A, Part B, or both) after electing continuation coverage, or
- the employer ceases to provide any group health plan for its employees.

Continuation coverage may also be terminated for any reason the Plan would terminate coverage of a participant or beneficiary not receiving continuation coverage (such as fraud).

How can you extend the length of COBRA continuation coverage?

If you elect continuation coverage, an extension of the maximum period of coverage may be available if a qualified beneficiary is disabled or a second qualifying event occurs. You must notify Jane Jones of a disability or a second qualifying event in order to extend the period of continuation coverage. Failure to provide notice of a disability or second qualifying event may affect the right to extend the period of continuation coverage.

Disability

An 11-month extension of coverage may be available if any of the qualified beneficiaries is determined by the Social Security Administration (SSA) to be disabled. The disability has to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of continuation coverage. Each qualified beneficiary who has elected continuation coverage will be entitled to the 11-month disability extension if one of them qualifies. If the qualified beneficiary is determined by SSA to no longer be disabled, you must notify the Plan of that fact within 30 days after SSA's determination.

Second Qualifying Event

An 18-month extension of coverage will be available to spouses and dependent children who elect continuation coverage if a second qualifying event occurs during the first 18-months of continuation coverage. The maximum amount of continuation coverage available when a second qualifying event occurs is 36 months. Such second qualifying events may include the death of a covered employee, divorce or separation from the covered employee, the covered employee's becoming entitled to Medicare benefits (under Part A, Part B or both), or a dependent child's ceasing to be eligible for coverage as a dependent under the Plan. These events can be a second qualifying event only if they would have caused the qualified beneficiary to lose coverage under the Plan if the first qualifying event had not occurred. You must notify the Plan within 60 days after a second qualifying event occurs if you want to extend your continuation coverage.

How can you elect COBRA continuation coverage?

To elect continuation coverage, you must complete the Election Form and furnish it according to the directions on the form. Each qualified beneficiary has a separate right to elect continuation coverage. For example, the employee's spouse may elect continuation coverage even if the employee does not. Continuation coverage may be elected for only one, several, or for all dependent children who are qualified beneficiaries. A parent may elect to continue coverage on behalf of any dependent children. The employee or the employee's spouse can elect continuation coverage on behalf of all of the qualified beneficiaries.

In considering whether to elect continuation coverage, you should take into account that a failure to continue your group health coverage will affect your future rights under federal law. First, you can lose the right to avoid having pre-existing condition exclusions applied to you by other group health plans if you have more than a 63-day gap in health coverage, and election of continuation coverage may help you not have such a gap. Second, you will lose the guaranteed right to purchase individual health insurance policies that do not impose such pre-existing condition exclusions if you do not get continuation coverage for the maximum time available to you. Finally, you should take into account that you have special enrollment rights under federal law. You have the right to request special enrollment in another group health plan for which you are otherwise eligible (such as a plan sponsored by your spouse's employer) within 30 days after your group health coverage ends because of the qualifying event listed above. You will also have the same special enrollment right at the end of continuation coverage if you get continuation coverage for the maximum time available to you.

How much does COBRA continuation coverage cost?

Generally, each qualified beneficiary may be required to pay the entire cost of continuation coverage. The amount a qualified beneficiary may be required to pay may not exceed 102 percent (or, in the case of an extension of continuation coverage due to a disability, 150 percent) of the cost to the group health plan (including both employer and employee contributions) for coverage of a similarly situated plan participant or beneficiary who is not receiving continuation coverage. The required payment for each continuation coverage period for each option is described in this notice.

When and how must payment for COBRA continuation coverage be made?

First payment for continuation coverage

If you elect continuation coverage, you do not have to send any payment with the Election Form. However, you must make your first payment for continuation coverage not later than 45 days after the date of your election. (This is the date the Election Notice is post-marked, if mailed.) If you do not make your first payment for continuation coverage in full not later than 45 days after the date of your election, you will lose all continuation coverage rights under the Plan. You are responsible for making sure that the amount of your first payment is correct. You may contact

Jane Jones
Benefits Administrator

25 Communications Way

HYANNIS
MA 02860

to confirm the correct amount of your first payment.

Periodic payments for continuation coverage

After you make your first payment for continuation coverage, you will be required to make periodic payments for each subsequent coverage period. The amount due for each coverage period for each qualified beneficiary is shown in this notice. The periodic payments can be made on a monthly basis. Under the Plan, each of these periodic payments for continuation coverage is due on day 01 for that coverage period. If you make a periodic payment on or before the first day of the coverage period to which it applies, your coverage under the Plan will continue for that coverage period without any break. The Plan will not send periodic notices of payments due for these coverage periods.

Grace periods for periodic payments

Although periodic payments are due on the dates shown above, you will be given a grace period of 30 days after the first day of the coverage period to make each periodic payment. Your continuation coverage will be provided for each coverage period as long as payment for that coverage period is made before the end of the grace period for that payment. However, if you pay a periodic payment later than the first day of the coverage period to which it applies, but before the end of the grace period for the coverage period, your coverage under the Plan will be suspended as of the first day of the coverage period and then retroactively reinstated (going back to the first day of the coverage period) when the periodic payment is received. This means that any claim you submit for benefits while your coverage is suspended may be denied and may have to be resubmitted once your coverage is reinstated. If you fail to make a periodic payment before the end of the grace period for that coverage period, you will lose all rights to continuation coverage under the Plan. Your first payment and all periodic payments for continuation coverage should be sent to:

Jane Jones
Benefits Administrator
25 Communications Way
HYANNIS
MA 02860

For more information

This notice does not fully describe continuation coverage or other rights under the Plan. More information about continuation coverage and your rights under the Plan is available in your summary plan description or from the Plan Administrator.

If you have any questions concerning the information in this notice, your rights to coverage, or if you want a copy of your summary plan description, you should contact

Jane Jones
Benefits Administrator
25 Communications Way
HYANNIS
MA 02860

For more information about your rights under ERISA, including COBRA, the Health Insurance Portability and Accountability Act (HIPAA), and other laws affecting group health plans, contact the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit the EBSA website at www.dol.gov/ebsa. (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.)

Keep your Plan Informed of Address Changes

In order to protect you and your family's rights, you should keep the Plan Administrator informed of any changes in your address and the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

Figure 12-21: Sample COBRA Letter for Dependent Medical /DentalPlan

Sample COBRA Letter: Employee - Medical Reimbursement Plan (PRTC0B04)

12/15/2004

Dear: PMT FREQ-M R A- A FREQ,JR

This notice contains important information about your right to continue your health care coverage in the
 COB-MD-*
 (the Plan). Please read the information contained in this notice very carefully.

To elect COBRA continuation coverage, follow the instructions on the next page to complete the enclosed Election Form and submit it to us.

If you do not elect COBRA continuation coverage, your coverage under the Plan will end on 1/01/2005 due to: REDUCTION OF WORKING HOURS
 Each person ("qualified beneficiary") in the category(ies) checked below is entitled to elect COBRA continuation coverage, which will continue group health coverage under the Plan for up to 18 months.

- X Employee or former employee
- Spouse or former spouse
- Dependent child(ren) covered under the Plan on the day the event that caused the loss of coverage
- Child who is losing coverage under the Plan because he or she is no longer a dependent under the Plan

If elected, COBRA continuation coverage will begin on 1/01/2005 and can last until .

COBRA continuation coverage will cost: 500.00

You do not have to send any payment with the Election Form. Important additional information about payment for COBRA continuation coverage is included in the pages following the Election Form.

If you have any questions about this notice or your rights to COBRA continuation coverage, you should contact:

Jane Jones
Benefits Administrator
SSA-Global
25 Communications Way

HYANNIS
MA 02860

COBRA CONTINUATION COVERAGE ELECTION FORM

| INSTRUCTIONS: To elect COBRA continuation coverage, complete this
| Election Form and return it to us. Under federal law, you must have
| 60 days after the date of this notice to decide whether you want to
| elect COBRA continuation coverage under the Plan.

| Send completed Election Form to: Jane Jones
| Benefits Administrator
| SSA-Global
| 25 Communications Way

HYANNIS
MA 02860

| This Election Form must be completed and returned by mail. If
| mailed, it must be post-marked no later than 3/02/2005.

| If you do not submit a completed Election Form by the due date
| shown above, you will lose your right to elect COBRA continuation
| coverage. If you reject COBRA continuation coverage before the due
| date, you may change your mind as long as you furnish a completed
| Election Form before the due date. However, if you change your mind
| after first rejecting COBRA continuation coverage, your COBRA
| continuation coverage will begin on the date you furnish the
| completed Election Form.

| Read the important information about your rights included in the
| pages after the Election Form.

|

I (We) elect COBRA continuation coverage in the _____
(the Plan) as indicated below:

Name other	Date of Birth	Relationship to Employee	SSN (or identifier)
---------------	---------------	--------------------------	------------------------

a. _____

{Add if appropriate: Coverage option elected: _____}

b. _____

{Add if appropriate: Coverage option elected: _____}

c. _____

{Add if appropriate: Coverage option elected: _____}

_____	_____
Signature	Date

_____	_____
Print Name	Relationship to individual(s) listed above

_____	_____
-------	-------

Print Address	Telephone number
---------------	------------------

**IMPORTANT INFORMATION
ABOUT YOUR COBRA CONTINUATION COVERAGE RIGHTS**

What is continuation coverage?

Federal law requires that most group health plans (including this Plan) give employees and their families the opportunity to continue their health care coverage when there is a "qualifying event" that would result in a loss of coverage under an employer's plan. Depending on the type of qualifying event, "qualified beneficiaries" can include the employee (or retired employee) covered under the group health plan, the covered employee's spouse, and the dependent children of the covered employee.

Continuation coverage is the same coverage that the Plan gives to other participants or beneficiaries under the Plan who are not receiving continuation coverage. Each qualified beneficiary who elects continuation coverage will have the same rights under the Plan as other participants or beneficiaries covered under the Plan, including special enrollment rights.

How long will continuation coverage last?

In the case of a loss of coverage due to end of employment or reduction in hours of employment, coverage generally may be continued only for up to a total of 18 months. In the case of losses of coverage due to an employee's death, divorce or legal separation, the employee's becoming entitled to Medicare benefits or a dependent child ceasing to be a dependent under the terms of the plan, coverage may be continued for up to a total of 36 months. When the qualifying event is the end of employment or reduction of the employee's hours of employment, and the employee became entitled to Medicare benefits less than 18 months before the qualifying event, COBRA continuation coverage for qualified beneficiaries other than the employee lasts until 36 months after the date of Medicare entitlement. This notice shows the maximum period of continuation coverage available to the qualified beneficiaries.

Continuation coverage will be terminated before the end of the maximum period if:

- any required premium is not paid in full on time,
- a qualified beneficiary becomes covered, after electing continuation coverage, under another group health plan that does not impose any pre-existing condition exclusion for a pre-existing condition of the qualified beneficiary,
- a covered employee becomes entitled to Medicare benefits (under Part A, Part B, or both) after electing continuation coverage, or
- the employer ceases to provide any group health plan for its employees.

Continuation coverage may also be terminated for any reason the Plan would terminate coverage of a participant or beneficiary not receiving continuation coverage (such as fraud).

How can you extend the length of COBRA continuation coverage?

If you elect continuation coverage, an extension of the maximum period of coverage may be available if a qualified beneficiary is disabled or a second qualifying event occurs. You must notify Jane Jones of a disability or a second qualifying event in order to extend the period of continuation coverage.

Failure to provide notice of a disability or second qualifying event may affect the right to extend the period of continuation coverage.

Disability

An 11-month extension of coverage may be available if any of the qualified beneficiaries is determined by the Social Security Administration (SSA) to be disabled. The disability has to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of continuation coverage. Each qualified beneficiary who has elected continuation coverage will be entitled to the 11-month disability extension if one of them qualifies. If the qualified beneficiary is determined by SSA to no longer be disabled, you must notify the Plan of that fact within 30 days after SSA's determination.

Second Qualifying Event

An 18-month extension of coverage will be available to spouses and dependent children who elect continuation coverage if a second qualifying event occurs during the first 18-months of continuation coverage. The maximum amount of continuation coverage available when a second qualifying event occurs is 36 months. Such second qualifying events may include the death of a covered employee, divorce or separation from the covered employee, the covered employee's becoming entitled to Medicare benefits (under Part A, Part B or both), or a dependent child's ceasing to be eligible for coverage as a dependent under the Plan. These events can be a second qualifying event only if they would have caused the qualified beneficiary to lose coverage under the Plan if the first qualifying event had not occurred. You must notify the Plan within 60 days after a second qualifying event occurs if you want to extend your continuation coverage.

How can you elect COBRA continuation coverage?

To elect continuation coverage, you must complete the Election Form and furnish it according to the directions on the form. Each qualified beneficiary has a separate right to elect continuation coverage. For example, the employee's spouse may elect continuation coverage even if the employee does not. Continuation coverage may be elected for only one, several, or for all dependent children who are qualified beneficiaries. A parent may elect to continue coverage on behalf of any dependent children. The employee or the employee's spouse can elect continuation coverage on behalf of all of the qualified beneficiaries. In considering whether to elect continuation coverage, you should take into account that a failure to continue your group health coverage will affect your future rights under federal law. First, you can lose the right to avoid having pre-existing condition exclusions applied

to you by other group health plans if you have more than a 63-day gap in health coverage, and election of continuation coverage may help you not have such a gap. Second, you will lose the guaranteed right to purchase individual health insurance policies that do not impose such pre-existing condition exclusions if you do not get continuation coverage for the maximum time available to you. Finally, you should take into account that you have special enrollment rights under federal law. You have the right to request special enrollment in another group health plan for which you are otherwise eligible (such as a plan sponsored by your spouse's employer) within 30 days after your group health coverage ends because of the qualifying event listed above. You will also have the same special enrollment right at the end of continuation coverage if you get continuation coverage for the maximum time available to you.

How much does COBRA continuation coverage cost?

Generally, each qualified beneficiary may be required to pay the entire cost of continuation coverage. The amount a qualified beneficiary may be required to pay may not exceed 102 percent (or, in the case of an extension of continuation coverage due to a disability, 150 percent) of the cost to the group health plan (including both employer and employee contributions) for coverage of a similarly situated plan participant or beneficiary who is not receiving continuation coverage. The required payment for each continuation coverage period for each option is described in this notice.

When and how must payment for COBRA continuation coverage be made?

First payment for continuation coverage

If you elect continuation coverage, you do not have to send any payment with the Election Form. However, you must make your first payment for continuation coverage not later than 45 days after the date of your election. (This is the date the Election Notice is post-marked, if mailed.) If you do not make your first payment for continuation coverage in full not later than 45 days after the date of your election, you will lose all continuation coverage rights under the Plan. You are responsible for making sure that the amount of your first payment is correct. You may contact

Jane Jones
Benefits Administrator
25 Communications Way
HYANNIS
MA 02860

to confirm the correct amount of your first payment.

Periodic payments for continuation coverage

After you make your first payment for continuation coverage, you will be required to make periodic payments for each subsequent coverage period. The amount due for each coverage period for each qualified beneficiary is shown in this notice. The periodic payments can be made on a monthly basis. Under the Plan, each of these periodic payments for continuation coverage is due on day 01 for that coverage period. If you make a periodic payment on or before the first day of the coverage period to which it applies, your coverage under the Plan will continue for that coverage period without any break. The Plan will not send periodic notices of payments due for these coverage periods.

Grace periods for periodic payments

Although periodic payments are due on the dates shown above, you will be given a grace period of 30 days after the first day of the coverage period to make each periodic payment. Your continuation coverage will be provided for each coverage period as long as payment for that coverage period is made before the end of the grace period for that payment. However, if you pay a periodic payment later than the first day of the coverage period to which it applies, but before the end of the grace period for the coverage period, your coverage under the Plan will be suspended as of the first day of the coverage period and then retroactively reinstated (going back to the first day of the coverage period) when the periodic payment is received. This means that any claim you submit for benefits while your coverage is suspended may be denied and may have to be resubmitted once your coverage is reinstated. If you fail to make a periodic payment before the end of the grace period for that coverage period, you will lose all rights to continuation coverage under the Plan. Your first payment and all periodic payments for continuation coverage should be sent to:

Jane Jones
Benefits Administrator

25 Communications Way

HYANNIS
MA 02860

For more information

This notice does not fully describe continuation coverage or other rights under the Plan. More information about continuation coverage and your rights under the Plan is available in your summary plan

description or from the Plan Administrator.

If you have any questions concerning the information in this notice, your rights to coverage, or if you want a copy of your summary plan description, you should contact

Jane Jones
Benefits Administrator

25 Communications Way
HYANNIS

MA 02860

For more information about your rights under ERISA, including COBRA, the Health Insurance Portability and Accountability Act (HIPAA), and other laws affecting group health plans, contact the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit the EBSA website at www.dol.gov/ebsa. (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.)

Keep your Plan Informed of Address Changes

In order to protect you and your family's rights, you should keep the Plan Administrator informed of any changes in your address and the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

Figure 12-22: Sample COBRA Letter for Dependent Medical /Dental Plan

Sample COBRA Letter: Dependent - Medical Reimbursement Plan (PRTC0B06)

12/15/2005

Dear: FREQ, SALLY

This notice contains important information about your right to continue your health care coverage in the

COB-MD-*

(the Plan). Please read the information contained in this notice very carefully.

To elect COBRA continuation coverage, follow the instructions on the next page to complete the enclosed Election Form and submit it to us.

If you do not elect COBRA continuation coverage, your coverage under the Plan will end on 1/01/2005 due to: REDUCTION OF WORKING HOURS

Each person ("qualified beneficiary") in the category(ies) checked below is entitled to elect COBRA continuation coverage, which will continue group health coverage under the Plan for up to 18 months.

- Employee or former employee
- Spouse or former spouse
- X Dependent child(ren) covered under the Plan on the day the event that caused the loss of coverage
 - Child who is losing coverage under the Plan because he or she is no longer a dependent under the Plan

If elected, COBRA continuation coverage will begin on 1/01/2005 and can last until .

COBRA continuation coverage will cost: 500.00
ou do not have to send any payment with the Election Form. Important additional information about payment for COBRA continuation coverage is included in the pages following the Election Form.

If you have any questions about this notice or your rights to COBRA continuation coverage, you should contact:

Jane Jones
Benefits Administrator
SSA-Global
25 Communications Way

HYANNIS
MA 02860

COBRA CONTINUATION COVERAGE ELECTION FORM

| INSTRUCTIONS: To elect COBRA continuation coverage, complete this
| Election Form and return it to us. Under federal law, you must have
| 60 days after the date of this notice to decide whether you want to
| elect COBRA continuation coverage under the Plan.

|
| Send completed Election Form to: Jane Jones
| Benefits Administrator
| SSA-Global
| 25 Communications Way
|
| HYANNIS
| MA 02860
|

| This Election Form must be completed and returned by mail. If
 | mailed, it must be post-marked no later than 3/02/2005.
 |
 | If you do not submit a completed Election Form by the due date
 | shown above, you will lose your right to elect COBRA continuation
 | coverage. If you reject COBRA continuation coverage before the due
 | date, you may change your mind as long as you furnish a completed
 | Election Form before the due date. However, if you change your mind
 | after first rejecting COBRA continuation coverage, your COBRA
 | continuation coverage will begin on the date you furnish the
 | completed Election Form.
 |
 | Read the important information about your rights included in the
 | pages after the Election Form.

I (We) elect COBRA continuation coverage in the _____
 (the Plan) as indicated below:

Name	Date of Birth	Relationship to Employee	SSN (or other identifier)
------	---------------	--------------------------	------------------------------

a. _____

{Add if appropriate: Coverage option elected: _____}

b. _____

{Add if appropriate: Coverage option elected: _____}

c. _____

{Add if appropriate: Coverage option elected: _____}

_____	_____
Signature	Date

_____	_____
Print Name	Relationship to individual(s) listed above

_____	_____
Print Address	Telephone number

IMPORTANT INFORMATION ABOUT YOUR COBRA CONTINUATION COVERAGE RIGHTS

What is continuation coverage?

Federal law requires that most group health plans (including this Plan) give employees and their families the opportunity to continue their health care coverage when there is a "qualifying event" that would result in a loss of coverage under an employer's plan. Depending on the type of qualifying event, "qualified beneficiaries" can include the employee (or retired employee) covered under the group health plan, the covered employee's spouse, and the dependent children of the covered employee.

Continuation coverage is the same coverage that the Plan gives to other participants or beneficiaries under the Plan who are not receiving continuation coverage. Each qualified beneficiary who elects continuation coverage will have the same rights under the Plan as other participants or beneficiaries covered under the Plan, including special enrollment rights.

How long will continuation coverage last?

In the case of a loss of coverage due to end of employment or reduction in hours of employment, coverage generally may be continued only for up to a total of 18 months. In the case of losses of coverage due to an employee's death, divorce or legal separation, the employee's becoming entitled to Medicare benefits or a dependent child ceasing to be a dependent under the terms of the plan, coverage may be continued for up to a total of 36 months. When the qualifying event is the end of employment or reduction of the employee's hours of employment, and the employee became entitled to Medicare benefits less than 18 months before the qualifying event, COBRA continuation coverage for qualified beneficiaries other than the employee lasts until 36 months after the date of Medicare entitlement. This notice shows the maximum period of continuation coverage available to the qualified beneficiaries.

Continuation coverage will be terminated before the end of the maximum period if:

- any required premium is not paid in full on time,
 - a qualified beneficiary becomes covered, after electing continuation coverage, under another group health plan that does not impose any pre-existing condition exclusion for a pre-existing condition of the qualified beneficiary,
 - a covered employee becomes entitled to Medicare benefits (under Part A, Part B, or both) after electing continuation coverage, or
-

- the employer ceases to provide any group health plan for its employees.

Continuation coverage may also be terminated for any reason the Plan would terminate coverage of a participant or beneficiary not receiving continuation coverage (such as fraud).

How can you extend the length of COBRA continuation coverage?

If you elect continuation coverage, an extension of the maximum period of coverage may be available if a qualified beneficiary is disabled or a second qualifying event occurs. You must notify Jane Jones of a disability or a second qualifying event in order to extend the period of continuation coverage. Failure to provide notice of a disability or second qualifying event may affect the right to extend the period of continuation coverage.

Disability

An 11-month extension of coverage may be available if any of the qualified beneficiaries is determined by the Social Security Administration (SSA) to be disabled. The disability has to have started at some time before the 60th day of COBRA continuation coverage and must last at least until the end of the 18-month period of continuation coverage. Each qualified beneficiary who has elected continuation coverage will be entitled to the 11-month disability extension if one of them qualifies. If the qualified beneficiary is determined by SSA to no longer be disabled, you must notify the Plan of that fact within 30 days after SSA's determination.

Second Qualifying Event

An 18-month extension of coverage will be available to spouses and dependent children who elect continuation coverage if a second qualifying event occurs during the first 18-months of continuation coverage. The maximum amount of continuation coverage available when a second qualifying event occurs is 36 months. Such second qualifying events may include the death of a covered employee, divorce or separation from the covered employee, the covered employee's becoming entitled to Medicare benefits (under Part A, Part B or both), or a dependent child's ceasing to be eligible for coverage as a dependent under the Plan. These events can be a second qualifying event only if they would have caused the qualified beneficiary to lose coverage under the Plan if the first qualifying event had not occurred. You must notify the Plan within 60 days after a second qualifying event occurs if you want to extend your continuation coverage.

How can you elect COBRA continuation coverage?

To elect continuation coverage, you must complete the Election Form and furnish it according to the directions on the form. Each qualified beneficiary has a separate right to elect continuation coverage. For example, the employee's spouse may elect continuation coverage even if the employee does not. Continuation coverage may be elected for only one, several, or for all dependent children who are qualified beneficiaries. A parent may elect to continue coverage on behalf of any dependent children. The employee or the employee's spouse can elect continuation coverage on behalf of all of the qualified beneficiaries.

In considering whether to elect continuation coverage, you should take into account that a failure to continue your group health coverage will affect your future rights under federal law. First, you can lose the right to avoid having pre-existing condition exclusions applied to you by other group health plans if you have more than a 63-day gap in health coverage, and election of continuation coverage may help you not have such a gap. Second, you will lose the guaranteed right to purchase individual health insurance policies that do not impose such pre-existing condition exclusions if you do not get continuation coverage for the maximum time available to you. Finally, you should take into account that you have special enrollment rights under federal law. You have the right to request special enrollment in another group health plan for which you are otherwise eligible (such as a plan sponsored by your spouse's employer) within 30 days after your group health coverage ends because of the qualifying event listed above. You will also have the same special enrollment right at the end of continuation coverage if you get continuation coverage for the maximum time available to you.

How much does COBRA continuation coverage cost?

Generally, each qualified beneficiary may be required to pay the entire cost of continuation coverage. The amount a qualified beneficiary may be required to pay may not exceed 102 percent (or, in the case of an extension of continuation coverage due to a disability, 150 percent) of the cost to the group health plan (including both employer and employee contributions) for coverage of a similarly situated plan participant or beneficiary who is not receiving continuation coverage. The required payment for each continuation coverage period for each option is described in this notice.

When and how must payment for COBRA continuation coverage be made?

First payment for continuation coverage

If you elect continuation coverage, you do not have to send any payment with the Election Form. However, you must make your first payment for continuation coverage not later than 45 days after the date of

your election. (This is the date the Election Notice is post-marked, if mailed.) If you do not make your first payment for continuation coverage in full not later than 45 days after the date of your election, you will lose all continuation coverage rights under the Plan. You are responsible for making sure that the amount of your first payment is correct. You may contact

Jane Jones
Benefits Administrator
25 Communications Way

HYANNIS

MA 02860

to confirm the correct amount of your first payment.

Periodic payments for continuation coverage

After you make your first payment for continuation coverage, you will be required to make periodic payments for each subsequent coverage period. The amount due for each coverage period for each qualified beneficiary is shown in this notice. The periodic payments can be made on a monthly basis. Under the Plan, each of these periodic payments for continuation coverage is due on day 01 for that coverage period. If you make a periodic payment on or before the first day of the coverage period to which it applies, your coverage under the Plan will continue for that coverage period without any break. The Plan will not send periodic notices of payments due for these coverage periods.

Grace periods for periodic payments

Although periodic payments are due on the dates shown above, you will be given a grace period of 30 days after the first day of the coverage period to make each periodic payment. Your continuation coverage will be provided for each coverage period as long as payment for that coverage period is made before the end of the grace period for that payment. However, if you pay a periodic payment later than the first day of the coverage period to which it applies, but before the end of the grace period for the coverage period, your coverage under the Plan will be suspended as of the first day of the coverage period and then retroactively reinstated (going back to the first day of the coverage period) when the periodic payment is received. This means that any claim you submit for benefits while your coverage is suspended may be denied and may have to be resubmitted once your coverage is reinstated. If you fail to make a periodic payment

before the end of the grace period for that coverage period, you will lose all rights to continuation coverage under the Plan.

Your first payment and all periodic payments for continuation coverage should be sent to:

Jane Jones
Benefits Administrator

25 Communications Way

HYANNIS
MA 02860

For more information

This notice does not fully describe continuation coverage or other rights under the Plan. More information about continuation coverage and your rights under the Plan is available in your summary plan description or from the Plan Administrator.

If you have any questions concerning the information in this notice, your rights to coverage, or if you want a copy of your summary plan description, you should contact

Jane Jones
Benefits Administrator

25 Communications Way

HYANNIS
MA 02860

For more information about your rights under ERISA, including COBRA, the Health Insurance Portability and Accountability Act (HIPAA), and other laws affecting group health plans, contact the U.S. Department of Labor's Employee Benefits Security Administration (EBSA) in your area or visit the EBSA website at www.dol.gov/ebsa. (Addresses and phone numbers of Regional and District EBSA Offices are available through EBSA's website.)

Keep your Plan Informed of Address Changes

In order to protect you and your family's rights, you should keep the

Plan Administrator informed of any changes in your address and the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

Figure 12-23: Sample COBRA Letter for Dependent Medical Reimbursement Plan

**Sample COBRA Letter: Notification of Termination of Benefits
(PRTC0B07)**

10/09/04

AMY ADAMS
22 MAIN
HYANNIS
MA

Social Security No. 111-22-4444

This letter is to advise you that your entitlement to COBRA benefits coverage ends on 11/09/2004 and accordingly your benefits under the plan will terminate as of that date.

Jane Jones
DIRECTOR, HUMAN RESOURCES

Figure 12-24: Sample COBRA Letter for Notification of Termination of Benefits

You can use the *Benefit Statement* options described in this chapter to produce a comprehensive individualized benefit statement for your employees. With assistance from your technical staff, you can use the Infinium HR benefit statement shell program to design a customized benefit statement for your organization. After you customize the shell program, you can generate statements for your employees.

The chapter consists of the following topics:

Topic	Page
Overview of Benefit Statements	13-2
Designing the Benefit Statement	13-3
Creating the Benefit Statement Work File	13-8
Printing Benefit Statements	13-11
Issuing a Certificate of Coverage Using Print HIPAA Certificates	13-14

Overview of Benefit Statements

The Benefit Statement shell program in Infinium HR provides a comprehensive printed overview of employee benefit programs. It includes detailed text and monetary values for the following categories of benefits:

- Employee benefits, such as health and life insurance, retirement and savings plans
- Social Security benefits
- Paid time off, such as vacation, holidays and sick leave

The system sums all of the benefit costs for each employee and presents them as a percentage of each employee's annualized base pay. It also includes the total annual benefit cost in a graphical image of a paycheck.

You use the three options listed below to produce benefit statements:

Use this option . . .	To . . .
<i>Design Benefit Statement</i>	Customize the shell program provided by Infinium Software
<i>Create Statements Workfile</i>	Generate a work file of employee and benefit data used to print the Benefit Statements
<i>Print Benefit Statements</i>	Print a benefit statement for one or more employees

To customize the shell program using the *Design Benefit Statement* function, you must understand how to use the IBM SEU (Source Entry Utility) facility and its commands.

Designing the Benefit Statement

You use the *Design Benefit Statement* option to modify the sample printer file (PRTBE100) in Infinium HR to:

- provide specific information about your organization's employee benefit programs
- design the layout and appearance of your benefit statement

After you make your changes, you must recompile the printer file prior to using it to print employee benefit statements. Unless you are familiar with the IBM SEU utility, you should work closely with a technical resource when you use this option.

If your changes affect more than text and layout information, you may need to modify the shell RPG program, PRGBE100.

Only one user at a time can access the *Design Benefit Statement* function and you can work on only one version of the benefit statement at a time. If you require multiple versions of the benefit statement, you must copy the benefit statement format to different members. You can retrieve the format by using the member name **STATEMENT** in file **HRBENSRC** in library **HR2000**. You can copy this member name to as many different member names as you need. The system recalls these members when needed.

Infinium Software predefines the fields that you can use in the benefit statement. These fields are contained in the benefits statement work file (PRPBW). Refer to the *Infinium Human Resources/Payroll File Field Reference Guide* for a complete listing of the fields in this file.

Using Format Names

When you select the *Design Benefit Statement* function, the system displays a sample benefit statement. Some lines contain a name preceded by #, which identifies a format name for a separate section of the statement. The system does not print format names on the finished benefit statement; you use them only as internal identifiers of different sections of the statement. Your format names cannot exceed ten characters in length.

For example, you can name the section heading for medical insurance information **#MEDHEAD**. You can then define **#MEDDET** as the format name for the section that provides detailed information about medical insurance.

WARNING! If you change the format names supplied by Infinium HR, you must also change the RPG benefit statement program (PRGBE100) to refer to your format names.

The format name must begin in position one of the line and that line must contain only the format name. Try to use format names whenever possible to provide greater control for the printing program.

Refer to the *Infinium HR/PY Technical Guide* for more information about updating the benefit statement shell program.

Designing the Benefit Statement

You use the *Design Benefit Statement* function to review or update the benefit statement printer file. Unless you are familiar with the IBM SEU utility, you should work closely with a technical resource to update the benefit statement RPG printer file.

Follow these steps to review or update the printer file:

- 1 From the Infinium Human Resources main menu or desktop select *Benefits Administration*.
 - 2 Select *Benefit Statement*.
 - 3 Select *Design Benefit Statement [DBS]*. The system displays the screen shown in Figure 13-1.
-

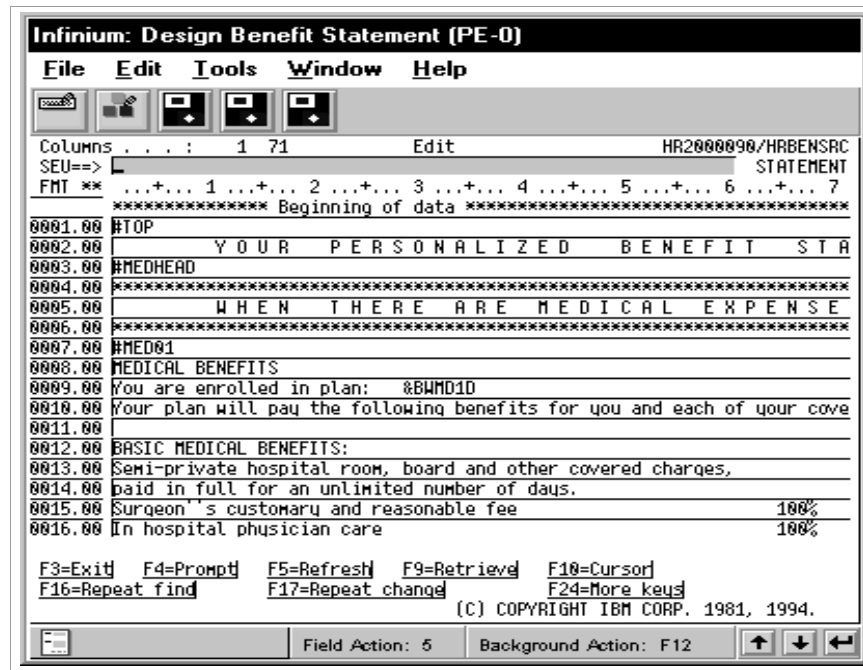


Figure 13-1: Edit HRBENSRC Statement screen

4 Use the following information to work with this screen:

Lay out the benefit statement exactly as you want it to appear when you print it, including blank lines and ignoring format names. Do not enter any text beyond position 131 or any field variable that occupies positions 131 or 132; otherwise, errors will result when you print the statement.

The benefit statement cannot exceed 176 lines in length. The format is designed to print one form per employee. Each form is designed to print up to 176 lines per page.

5 Press F3 to exit from this screen. The system displays the screen shown in Figure 13-2.

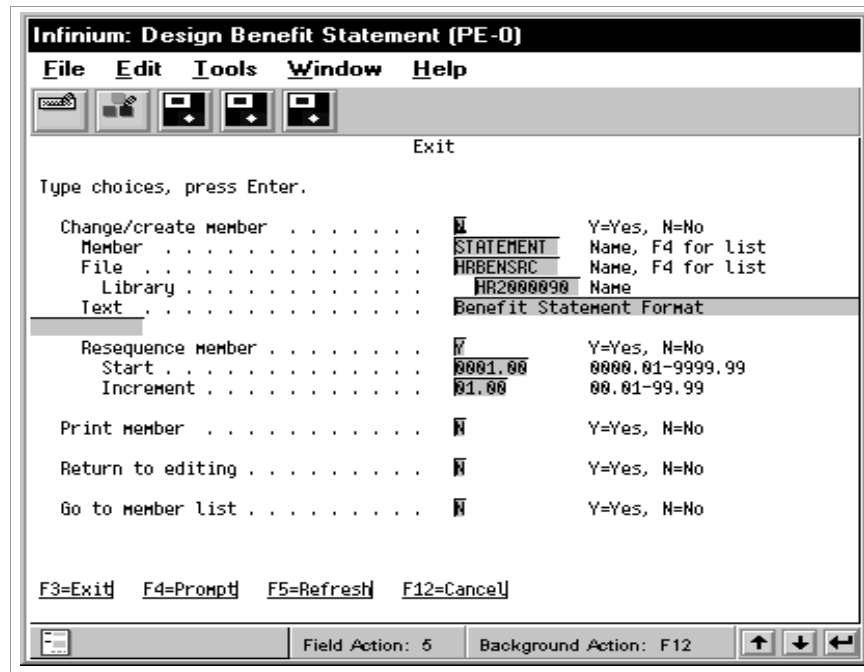


Figure 13-2: Exit screen

- 6 Press F3 to exit from this screen. The system displays the screen shown in Figure 13-3.

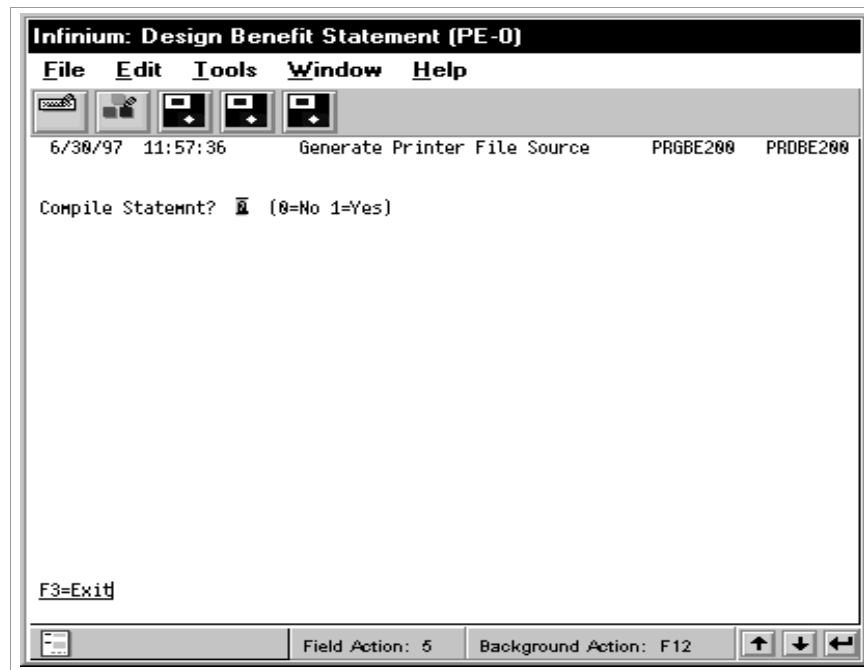


Figure 13-3: Generate Printer File Source screen

- 7 Use the following information to complete the field on this screen:

Compile Statement?

If you have made changes to the benefit statement program, indicate whether the system should recompile the printer file. Regardless of the value you specify in this field, if you press Enter to exit from this screen the system analyzes the benefit statement format and replaces the source lines to the printer file PRTBE100.

Valid values are:

- 0** Do not compile the benefit statement printer file.
- 1** Compile the benefit statement printer file.

8 Exit from this screen using one of these methods:

- Press Enter to exit from the screen. The system automatically analyzes the benefit statement, replaces the source lines and compiles the printer file, if specified.
 - Press F3 to exit from the screen. The system does not analyze the benefit statement, replace source lines or recompile the printer file.
-

Creating the Benefit Statement Work File

You use the *Create Statements Workfile* function to generate a file that contains a record of information for each employee for whom you want to print a benefit statement. The system uses the data in this file to complete the field variables referenced in the benefit statement program. You must build the work file before you can print benefit statements.

You can produce a benefit statement for one employee, for all employees or groups of employees in a specified employer based on their organizational level assignments, or for all employees in all employers in your database.

Note that certain fields in the work file that contain monetary values, such as retirement benefit amounts, are updated by a custom program called PRGRETIR. If you require this information on your statement, you must write a custom program to transfer the values to the work file.

The system extracts data from the following files when it builds the benefit statement work file:

The system extracts this information . . .	From this file . . .	In this system
Name, address, paid time off, hire information, and date of birth, which is then used to calculate the age as of December 31 of the prior year	Employee Basic Data (PRPMS)	HR and PY
Employee benefit enrollment data	Employee Enrollments (PRPBE)	HR
Previous year's deduction balances	Employee Deductions (PYPDE)	PY

If the files listed above do not produce the data you require for the work file, you must modify the program used by the *Create Statements Workfile* function.

Follow these steps to generate the benefit statement work file:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
- 2 Select *Benefit Statement*.

- 3 Select *Create Statements Workfile* [CBWF]. The system displays the Create Statements Workfile screen shown in Figure 13-4.

```

6/25/02 18:47:06      Create Statements Workfile      PRGJC50  PRDJC50

Employer . . . . . _ +

Employee . . . . . _____ +  -or-  Last Name . . . . . _____ +

Level 1 . . . . . _____ +          Level 2 . . . . . _____ +
Level 3 . . . . . _____ +          Level 4 . . . . . _____ +

F3=Exit  F4=Prompt  F10=Access
    
```

Figure 13-4: Create Statements Workfile screen

- 4 Use the following information to work with this screen:

Employer

Type the value that represents your employer or leave this field blank to generate a statement for all employees in all employers in your database.

Employee

To generate a statement for only one employee, type his or her number. If you are unsure of the employee’s number, leave this field blank and type some or all of the employee’s last name in the *Last Name* field.

Leave this field blank to generate a statement for more than one employee.

Last Name

To generate a statement for only one employee, type some or all of the employee’s last name and press F4. Select the employee from the displayed list.

Leave this field blank to generate a statement for more than one employee.

Level 1 - 4

To include information in the work file for only those employees assigned to a specified level, type the value that represents that part of your organization in this field.

Leave this field blank to include employees in the work file regardless of their level assignment.

- 5 Press Enter. The system displays the following message and returns to the Infinium HR main menu:

Building submission request . . .

- 6 The system generates the benefit statement work file.
-

Printing Benefit Statements

After you have created the benefit statement work file, you use the *Print Benefit Statements* function to generate statements for your employees. You can print statements for only those employees whose information is included in the work file.

To obtain the most professional results, you can print the statement on business form stationery using a laser printer. You can also copy the spooled file to a tape and forward it to a business form printer to print the statements on high quality business forms customized to your organization's specifications.

Before you print the statements, you must set up a printer control record for printer file PRTBE100 using Infinium Application Manager. Ensure that you specify forms length and overflow parameters that correctly correspond to the physical size of your benefit statement. Parameters for the sample Infinium HR benefit statement are 176 lines per page and eight lines per inch.

If you print your benefit statements on a special form, you can specify in the printer control record that the printer file should go on hold, so that you can release it to print after you have loaded your benefit statement forms into the printer.

Follow these steps to generate the benefit statement work file:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Benefit Statement*.
 - 3 Select *Print Benefit Statements* [PBS]. The system displays the Print Benefit Statements screen shown in Figure 13-5.
-

```
6/25/02 18:48:00      Print Benefit Statements      PRGJC50      PRDJC50

Employer . . . . . = +

Employee . . . . . _____ + -or- Last Name . . . . . _____ +

Level 1 . . . . . _____ +           Level 2 . . . . . _____ +
Level 3 . . . . . _____ +           Level 4 . . . . . _____ +

F3=Exit  F4=Prompt  F10=Access
```

Figure 13-5: Print Benefit Statements screen

4 Use the following information to work with this screen:

Employer

Type the value that represents your employer or leave this field blank to print statements for all employees in all employers in your benefit statement work file.

Employee

To print a statement for only one employee, type his or her number. If you are unsure of the employee's number, leave this field blank and type some or all of the employee's last name in the *Last Name* field.

Leave this field blank to print statements for more than one employee.

Last Name

To print a statement for only one employee, type some or all of the employee's last name and press F4. Select the employee from the displayed list.

Leave this field blank to print statements for more than one employee.

Level 1 - 4

To print statements for only those employees in your work file who are assigned to a specified level, type the value that represents that part of your organization in this field.

Leave this field blank to print statements for employees regardless of their level assignment.

- 5 Press Enter. The system displays the following message and returns to the Infinium HR main menu:

Building submission request . . .

- 6 The system uses batch processing to generate the benefit statement printer file. Access the Work with Submitted Jobs screen, the Work with All Spooled Files screen, or the Work with Printer Output screen. You can view or print the statements using options on these screens.
-

Issuing a Certificate of Coverage Using Print HIPAA Certificates

Issuing a Certificate of Coverage

The Health Insurance Portability Accountability Act (HIPAA) requires that upon termination the employer issue a certificate of coverage to employees enrolled in a company group health plan.

Infinium provides you with a shell custom program and shell printer file that you can modify for your specific needs

Printing a HIPAA Certificate

Follow these steps to print a HIPAA certificate.

- 1 From the Infinium Human Resource main menu select *Benefits Administration*.
 - 2 Select *List Benefit Data*.
 - 3 Select *Print HIPAA Certificates* [PHC]. The system displays the screen shown in Figure 13-6.
-

Infinium: Update Employee Enrollments (PE-303)

File Edit Tools Window Help

6/10/98 15:35:29 Print HIPAA Certificates PRGJC50 PRDJC50

Employer

Issue Date . . .

Benefit Group . . .

Selection Type . . .

Employee -or- Last Name

- OR -

From Cancel Date. . . . To Cancel Date

From Term Date To Term Date

Issuer Name Overd

Issuer Addr 1

Issuer Addr 2

City/State/Zip

Issuer Phone Ovr. . . . Addl Info Phone

Line 8 Indicator. . . . Wait Pd Date Ovr. . . .

Cov. Beg. Dt Ovr. . . . Cov. End Dt Ovr

Cov. Continue Ind Custom Select Pgm

F3=Exit F4=Prompt F10=Access

Field Action: 5 Background Action: F12

Figure 13-6: Print HIPAA Certificates screen

4 Use the following information to fill in the fields on this screen:

Employer

Type the value that identifies the employer for which you are issuing HIPAA certificates.

Issue Date

Type the issue dates of the certificates.

Benefit Group

Type the value that identifies a benefit group that contains eligible benefit plans for HIPAA processing. The system only generates HIPAA certificates for plans associated with the specified benefit group.

Selection Type

Type the value that identifies the individuals who will receive certificates.

Valid values for this field are:

- 1 Employees only
- 2 Employees and dependents attached to the plans

3 Dependents only

Clear Workfile?

Type the value that indicates if you want to clear the certificate work file, PRPHI, before you add records for the certificates generated by this request.

If you do not clear the work file, the system adds new certificate information to the existing information stored in the work file. The system adds records to the work file when you generate the certificates on the AS/400 or iSeries. The work file contains all the employee specific information required for printing a certificate.

To issue a certificate with text that differs from the text Infinium Software provides, you can export the work file from the AS/400 or iSeries to a file on a PC. Then, use the mail-merge feature of a word processor package to merge this data with a master document and create specialized certificates.

Valid values for this field are:

- 0** Do not clear the work file. The system adds records to the end of the current file.
- 1** Clear the work file before adding new records to the file.

Employee

Type the value associated with the single employee whose records you are processing. Press F4 to view and select from a list of valid employees.

Last Name

Type up to the first 18 characters of the employee's last name. Press F4 to display all employees that match the entered information. Select the employee you want to process and the system enters the employee number.

From Cancel Date

Type the starting cancellation date for employees eligible to receive certificates.

If you enter a starting date, you must enter an ending date. Employees with a benefit cancellation date within this range will receive HIPAA certificates.

To Cancel Date

Type the ending cancellation date for employees eligible to receive certificates.

If you enter an ending date, you must enter a starting date. Employees with a benefit cancellation date within this range will receive HIPAA certificates.

From Term Date

Type the starting termination date for employees eligible to receive certificates.

If you enter a starting date, you must enter an ending date. Employees with a termination date within this range will receive HIPAA certificates.

To Term Date

Type the ending termination date for employees eligible to receive certificates.

Use this field to type the ending termination date for employees eligible to receive certificates.

Issuer Name Overd

Type the value that identifies the issuer of the certificate if different from the name on the employer control record. Leave this field blank to use the employer name on the employer control record.

Issuer Addr 1

Type the value that identifies the first address line on the certificate if different from the address line 1 on the employer control record. Leave this field blank to use the employer address line 1 on the employer control record.

Issuer Addr 2

Type the value that identifies the second address line on the certificate if different from the address line 2 on the employer control record. Leave this field blank to use the employer address line 2 on the employer control record.

City/State/Zip

Type the value that identifies the issuer city, state, and zip code on the certificate if different from the issuer city, state, and zip code on the employer control record. Leave this field blank to use the employer city, state, and zip code on the employer control record.

Issuer Phone Ovr

Type the value that identifies the issuer telephone number on the certificate if different from the issuer telephone number on the employee control record. Leave this field blank to use the telephone number on the employer control record.

Addl Info Phone

Type the additional telephone number to print on the certificate.

Line 8 Indicator

Type the value that indicates that the individuals identified on the certificate have at least 18 months of creditable coverage. This information appears on line 8 of the HIPAA certificate.

Valid values are:

- 0** The system leaves the space for information in line 8 of the HIPAA certificate blank to indicate that the individuals have less than 18 months of creditable service.
- 1** The system places an **X** in line 8 of the HIPAA certificate to indicate that the individuals have at least 18 months of creditable service.

Wait Pd Date Ovr

Type the date a waiting period or affiliation period (if any) began.

Cov. Beg Dt Ovr

Leave this field blank to use the enrollment date on the employer benefit enrollment record. Type an override for the coverage begin date.

If you type 1 in the *Line 8 Indicator* field, leave this field blank.

Cov. End Dt Ovr

Leave this field blank to use the cancellation date on the benefit enrollment record. Type an override for the coverage end date.

If you type 1 in the *Line 8 Indicator* field, leave this field blank.

Cov. Continue Ind

Type the value that indicates that the coverage is continuing as of the date of this certificate. This information appears on line 11 of the HIPAA certificate.

Valid values for this field are:

- 0** The system prints the coverage end date in line 11 of the HIPAA certificate.
-

- 1 The system places an **X** in line 11 of the HIPAA certificate to indicate coverage will continue.

Custom Select Program

Type the name of the custom program your company will call to perform the employee benefit enrollment selection and HIPAA certificate printing. Leave this field blank to use the standard program, PRGHIPEX.

- 5 Press Enter The system displays the following message at the bottom of the Print HIPAA Certificates screen and returns you to the Infinium Human Resources main menu:

Building Submission request...

The system uses batch processing to generate the HIPAA certificate. Access the Work with Submitted Jobs screen, the Work with All Spooled Files screen, or the Work with Printer Output screen. You can view or print the HIPAA certificate using options on these screens.

Notes

Chapter 14 Working with HIPAA Information for EDI Transmission

14

The chapter consists of the following topics:

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Overview

When you use Infinium HR and Infinium PY, during normal processing the system processes the benefits information that can be used for a Benefit Enrollment and Maintenance Transaction or 834 transaction. This chapter discusses setup requirements and the process used to work with data for 834 EDI transmission.

Before you process HIPAA information for transmission, you may need to set up certain HIPAA code types, some of which can be cross referenced by your existing code types and code values. When you use the cross referencing for code values, the system uses the code value specified as the HIPAA relationship code as the code value in the work files available for EDI transmission.

You use the *Create 834 Work Files* function to create a work file that contains the data needed to transmit 834 data electronically. You can send the work files to your benefits vendor by using third party EDI translation software or through a custom program.

You can manually correct certain work file information by using the *Correct 834 Work Files* function. The work files can be converted to a transaction set that can be grouped with other transaction sets into a functional group. Use the *Create Functional Group* function to create a work file that your translation software or custom program can use to group work file transaction sets to be submitted together.

You can generate reports by using the *List Work Files Members* and *List Work Files* functions. These reports list the information included in the work files.

You can also purge work files and functional groups. Use the *Purge 834 Work Files* function to purge the data in the work files, and use the *Purge Functional Groups* function to purge functional group data.

Terminology

Header

The information at the beginning of the functional group file.

Functional Group

A grouping of work files that are combined into one file for transmission purposes.

Transaction Set

A business grouping of data that includes information in a group of work files.

Work File

A grouping of similar benefit information such as primary care physician data, into one file which can be modified.

Setting Up Code Values for 834 Work File Processing

Overview

When you process HIPAA information, the system uses certain code types. You must set up code values associated with these code types. The code types used for HIPAA processing are described in the table below.

Code Type	Description
BIG	Benefit ID reporting group
BTC	Broker/TPA (third party administrator) ID code
CLC	Coverage level code
CQC	Communications qualifier
CQE	COBRA qualifying event - HIPAA
DTQ	Date/Time qualifier
HET	HIPAA ethnic code
HRL	HIPAA relationship
HST	HIPAA employment status
ILC	Insurance line code
MRC	Change reason code
PEI	Preferred entity identifier
PPM	Preferred provider maintenance reason code
TZN	Time zone

See the *Infinium Human Resources Guide to Controls* for more information about setting up code values for code types.

For certain code types, the values set up on your system may not correspond with the codes used for EDI transmission of 834 information. If your values for certain code types are not the same as those required for 834 transmission, you can set up values for cross reference code types that the system uses to supply the correct codes for 834 EDI transmission. After you

set up values for the cross reference code types, the system uses the specified value for 834 transmission when you create the work files.

The table below describes the code types that use cross reference code types for HIPAA processing.

Code Type	Cross Reference Code Type	Example
REL – Dependent Relationship	HRL – HIPAA Relationship	You may use the code values DAUGHTER and SON for the REL code type. You might specify the HIPAA relationship code, HRL, as 19, CHILD , which is the HIPAA code value for child and would apply to both son and daughter.
STS – Employment Status	HST – HIPAA Employment Status	You may use the code values FULL and ACTIVE for the STS code type. You might specify the HIPAA employment status code, HST, as FT, full-time employee or full-time active employee , which is the HIPAA code value for both full time and full time active employee.
QUA – COBRA Qualifying Event	CQE – COBRA Qualifying Event - HIPAA	You may use the code value TERMINATED for the QUA code type. You might specify the HIPAA COBRA qualifying event code, CQE, as 1, Termination of Employment , which is the HIPAA code value for termination of employment.

Perform the steps below to establish cross reference codes.

- 1 Set up code values for the cross reference code types, HRL, HST and CQE.

- 2 Associate HIPAA code values with values for code types REL, STS and QUA.

Setting up Code Values for Cross Reference Codes

Follow the steps below to establish values for the cross reference code types HRL, HST and CQE. This example uses the cross reference code type HRL and value **19**, **CHILD**, for existing value **SON** for code type REL.

- 1 From the Infinium HR main menu select *Master Files*.
- 2 Select *Update Master Files*.
- 3 Select *Update Employer Codes [UCC]*. The system displays the Update Employer Codes screen similar to Figure 14-1.

```

5/20/03  09:09:09      Update Employer Codes      PRGMCD  PRDMCD
-----
Employer  . . . . .  _  +      -or-  Employer group  . . .  _  +
Code type . . . . .  _  +
Code value . . . . .  _____  +

-----
F3=Exit  F4=Prompt  F10=QuikAccess  F18=Message line  F21=Override

```

Figure 14-1: Update Employer Codes screen

- 4 Type your employer in the *Employer* field.
- 5 Type **HRL** in the *Code type* field.
- 6 Type **19** in the *Code value* field (19 is the HIPAA code value for CHILD).
- 7 Press Enter. The system displays the Update Employer Codes screen similar to Figure 14-2.

```
5/20/03  09:28:40      Update Employer Codes      PRGMCD  PRDMCD
-----
Employer . . . . . : ZUS  SAMPLE US COMPANY
Code type . . . . . : HRL  HIPAA RELATIONSHIP
Code value . . . . . : 19
Description . . . . . _____

Active/Inactive . . . 0      (0=Act./1=Inact)

-----
F3=Exit  F4=Prompt  F10=QuikAccess  F12=Cancel  F24=More keys
```

Figure 14-2: Update Employer Codes screen

- 8 Type **CHILD** in the *Description* field.

Associating Cross Reference Codes with Existing Code Types and Code Values

Follow the steps below to establish cross reference codes. This example uses the REL code type and code value **SON**, the HIPAA code **19**, **CHILD**.

- 1 From the Infinium HR main menu select *Master Files*.
- 2 Select *Update Master Files*.
- 3 Select *Update Employer Codes* [UCC]. The system displays the Update Employer Codes screen similar to Figure 14-3.

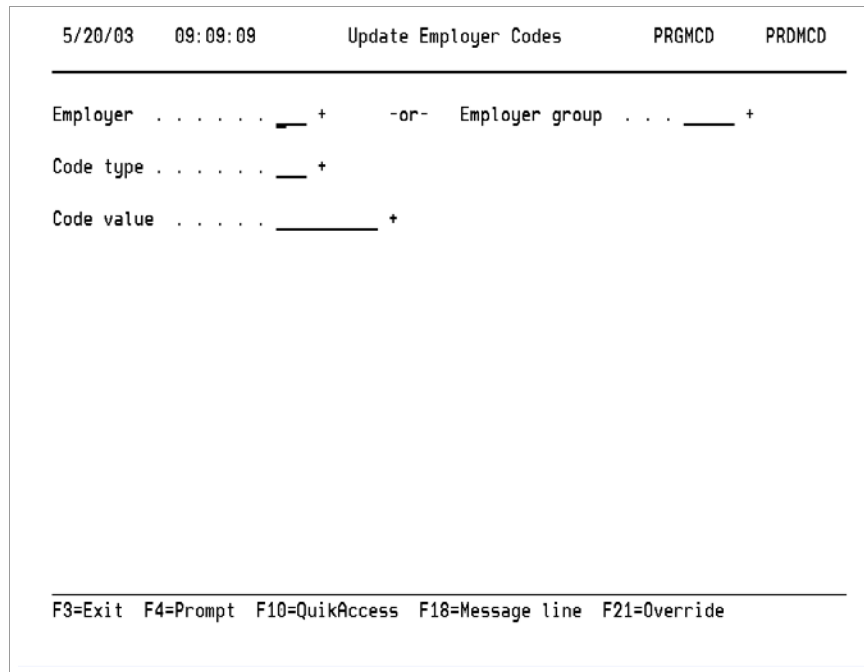


Figure 14-3: Update Employer Codes screen

- 4 Type your employer in the *Employer* field.
- 5 Type **REL** in the *Code type* field.
- 6 Type **SON** in the *Code value* field. The system displays the Update Codes screen similar to Figure 14-4.

```
5/20/03  09:23:33      Update Employer Codes      PRGMCD  PRDMCD
-----
Employer . . . . . : ZUS  SAMPLE US COMPANY
Code type . . . . . : REL  DEPENDENT RELATIONSHIP
Code value . . . . . : SON
Description . . . . . : SON
HIPAA Relat. Code . . . . . : 19 +
Active/Inactive . . . . . : 0      (0=Act./1=Inact)

-----
F3=Exit  F4=Prompt  F10=QuikAccess  F12=Cancel  F24=More keys
```

Figure 14-4: Update Employer Codes screen with the HIPAA Relat. Code field

- 7 Type **19** in the *HIPAA Relat. Code* field.
- 8 Press Enter. The system returns to the first Update Employer Codes screen. Repeat the above steps to associate additional existing code values with the corresponding HIPAA code types.

Creating 834 Work Files

Overview

Use the *Create 834 Work Files* function to create a file of 834 information that is extracted from Infinium HR and that can be used for EDI transmission. You create work files for a specified employer and benefit reporting ID group, which includes benefit plans associated with a single vendor. When you create the work files, the system extracts the information into the appropriate work file. The work files that are created are described below.

- Header Work File – PRPA834

The header work file information includes the employer and benefit ID group, the effective date and a reference ID, the time zone where the computer that created the work file is used, a control number, master policy number, sponsor information, if any and broker or third party administrator (TPA) information.

- Subscriber/Member Level Detail Work File – PRPB834

The Subscriber/Member Level Detail Work file includes information about the subscriber and each dependent. The information includes social security number, benefit status, name and student status for each member, if applicable.

- Disability Data Work File - PRPD834

The Disability Data Work File contains disability information for the employee. The information includes the type of disability, the beginning and ending dates of the disability and whether the disability is related to end stage renal failure (ENRF).

- Health Coverage Data Work File – PRPE834

The information in the Health Coverage Data Work File includes member's coverage information based upon criteria entered when the *Create 834 Work Files* function is used. The information can include the maintenance code, insurance line code, plan description, coverage level code, a date time qualifier and the coverage period. For new enrollments only, the file also includes identification card information, including the type of card: dental, health or prescription.

- Preferred Provider Data Work File – PRPP834

This work file includes information for new enrollments and changes to the primary care physician.

- Additional Member Level Data Work File – PRPC834

The information in this file includes additional member information, such as the member's phone and alternate address and wages, that can be entered or changed on the second Create 834 Work Files screen.

- Optional Data Work File – PRPF834

This file contains information that is optional for most vendors. It includes language information, dependent employer, dependent school, custodial parent, responsible person and coordinator of benefits (COB) information.

You can also specify whether to include certain optional information in the work files. This information includes:

- Member communication information
- Marital status
- Member ethnicity
- Member citizenship
- Member income
- Cost of benefits policies to the member

Creating the Work File

To create the 834 work file, follow the steps below.

- 1 From the Infinium HR main menu select *Benefits Administration*.
 - 2 Select *HIPAA 834 Work Files*.
 - 3 Select *Create 834 Work Files [A834]*. The system displays a screen similar to Figure 14-5.
-

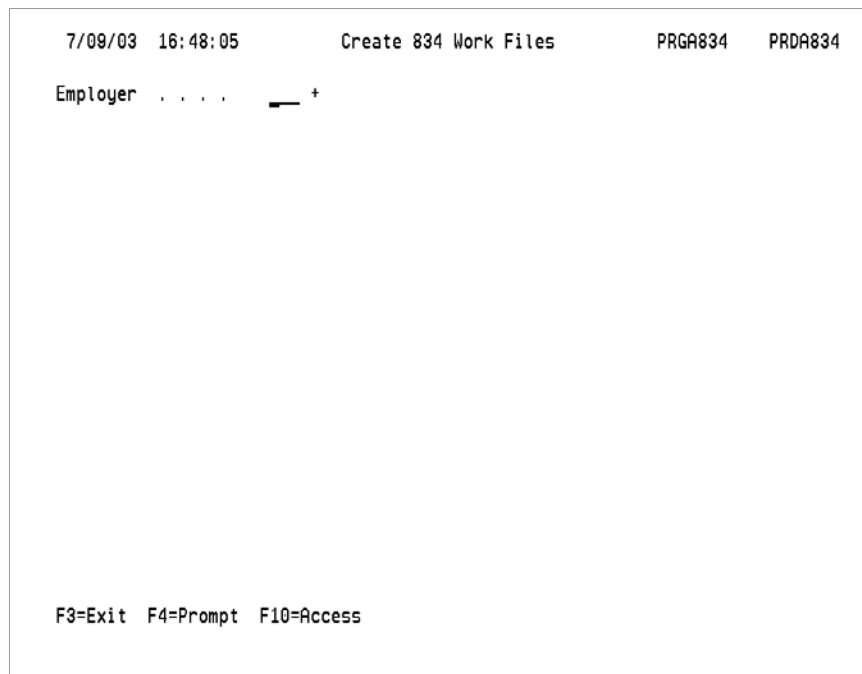


Figure 14-5: Create 834 Work Files prompt screen

On the Create 834 Work Files prompt screen you specify the employer for whom you are creating work files.

- 4 Use the information below to complete the fields on this screen.

Employer

Type the value that represents your employer.

- 5 Press Enter. The system displays the first Create 834 Work Files screen shown in Figure 14-6.
-

```

7/09/03 16:48:33          Create 834 Work Files          PRGA834  PRDA834

Employer . . . : ZUS  SAMPLE US COMPANY

Change/Verify . .      -          Ben. ID Group. . . _____ +
File Effect. Date _____      Future?. . . . . 0 (1/0)
Control # . . . . _____      Eff. Date Code . . . _____
Current Plan Year _____ +      Time Zone. . . . . _ +
Compare Type. . . . _ (N=None,F=Future,P=Prior)
Compare Plan Year _____ +
Period Begin Date _____      Period End Date. _____
Master Policy # . . _____
Plan Sponsor. . . . _____
Sponsor ID #. . . . _____
Sponsor ID# Type _____
Insurer . . . . . _____
Insurer ID #. . . . _____
Insurer ID Type. . . _____

F3=Exit F4=Prompt F10=Access F12=Cancel
    
```

Figure 14-6: Create 834 Work Files screen 1

On the Create 834 Work Files screen you specify the benefit ID group for which you are creating the work files. You specify whether the work file set is a change or verification type. You also specify plan, sponsor and insurer information and whether to compare plans for different years.

6 Use the information below to complete the fields on this screen.

Change/Verify

Specify whether this work file set includes only updates to information already reported or all enrollment information for the specified employer and benefit ID group.

A change work file set includes new enrollments, changes to existing enrollments and cancellations. A verification work file set includes all enrollments and is used to synchronize your data with your vendor’s data.

Valid values are:

- C** Change
- V** Verification

Ben ID Group

Specify the benefit ID group whose work files you are creating.

File Effect Date

Specify the date the work files being transmitted to your vendor are effective.

Future?

Use this field if you specify verification in the *Change/Verification* field. Specify whether to include pending enrollments from the change enrollment transaction file in this work file set. Valid values are:

- 0** No, do not include pending enrollments.
- 1** Yes, include pending enrollments.

Control #

Type the control number to be used for the transaction set created from this work file. Consult your vendor for vendor requirements for the control number.

Eff Date Code

Type the value that indicates the reason the work files were created on the specified file effective date. Consult your vendor for vendor requirements. Valid values are:

- 007** Effective
- 303** Maintenance effective
- 382** Enrollment
- 388** First payment

Current Plan Year

If you use plan year processing, specify the current plan year for the employee benefit plan enrollments for this work file.

Time Zone

Specify the value that represents your computer system's time zone. To verify, consult your IT department.

Compare Type

Specify whether to compare current enrollments to a future or prior plan year to determine whether enrollment activity represents actual cancellations and new enrollments as defined by an insurance provider. Valid values are:

- N** Do not compare current year enrollments to a future or prior year plan.
- F** Compare current year enrollments to a future plan year.
- P** Compare current year enrollments to a prior plan year.

The **F** and **P** type enrollments are used to distinguish between first time or canceled enrollments and those canceled at the end of each plan year and reopened for the next plan year.

Compare Plan Year

You must complete this field if you specify **P** or **F** in the *Compare Type* field.

Specify the plan year to be compared to the year in the *Current Plan Year* field.

Period Begin Date

Specify the earliest date for which you want to include information in the work files. For a verification type this is the beginning date for current enrollments. For a change type, this is the earliest date for reporting enrollment changes based on the last date the information is updated.

Period End Date

Specify the latest date for which you want to include information in the work files. For a verification type this is the last date for current enrollments. For a change type, this is the latest date for reporting enrollment changes based on the last date the information is updated.

Master Policy #

Type the master policy number if all the plans included in the work file have the same policy number. When you enter a value here, the transaction set policy number header reference record is created in the transaction set.

Plan Sponsor

Type the name of the plan's sponsor if the sponsor is not the employer. Leave blank to use the employer as the sponsor.

Sponsor ID #

Type the sponsor's ID number if it is not the employer's federal tax ID.

Sponsor ID# Type

You must complete this field if you enter a value in the *Sponsor ID #* field.

Type the value that defines this sponsor. Valid values are:

- | | |
|-----------|---|
| FI | Federal taxpayer ID |
| ZZ | Mutually defined (a number is issued to you by your vendor) |

Insurer

Type the name of the insurer or payer for the plans included in this work file.

Insurer ID #

Type the ID number for this insurer.

Insurer ID Type

Type the type of your insurer's ID. Valid values are:

- | | |
|-----------|---------------------|
| FI | Federal taxpayer ID |
| XV | National plan ID |

- 7 Press Enter. The system displays the second Create 834 Workfiles screen similar to Figure 14-7.
-

B Broker*ID# Type*

You must complete this field if you enter a value in the *TPA/Broker* field.

Specify the type of TPA or broker ID code. Valid values are:

- F1** Federal taxpayer ID
- XV** National plan ID
- 94** ID assigned by the final receiver of data

TPA/Broker Acct 1

Type the TPA's or broker's account number if the number is different from the sponsor's number.

TPA Broker Acct 2

If the TPA or broker uses more than one account number for the plans being reported, type the TPA's or broker's second account number.

Use EE# or SS#?

Specify whether to use the employee number or social security number for the subscriber's supplemental identification number. Valid values are:

- 0** Employee number
- 1** Social security number

Member Comm?

Specify whether to include information in these work files about member communications, such as telephone number or email address. Valid values are:

- 0** No
- 1** Yes

Student Age?

Type the age when a non-spousal dependent must confirm student status to retain benefit coverage.

This is the age through which the dependent is eligible for benefit coverage.

For example, if age 18 is the last year a dependent has benefit coverage, type **18** here. When you use the *Create 834 Work Files* function, the system uses the age entered here and the information entered in the *Student* field on the Update Dependents/Beneficiaries screen to identify the dependent's eligibility for benefits.

If you type **18** here, if **1**, full time, is the value in the *Student* field on the Dependents/Beneficiaries screen and the dependent's age is 19 or greater, the value in the *Student Status* field in the HIPAA subscriber/member detail workfile, PRPB834, is **F**, full time.

Marital Status?

Specify whether to include information in the work files about the subscriber's marital status. Valid values are:

0 No

1 Yes

Eth/Race Data?

Specify whether to include information in the work files about the subscriber's ethnicity. Valid values are:

0 No

1 Yes

Citizenship Info?

Specify whether to include information in the work files about the subscriber's citizenship. Valid values are:

0 No

1 Yes

Income?

Specify whether to include information in the work files about the subscriber's income. Valid values are:

0 No

1 Yes

Policy Amounts?

Specify whether to include information in the work files about the amounts paid by the subscriber for benefits policies. Valid values are:

0 No

1 Yes

Hlth Cov. Policy?

Specify whether to include information in the work files about the subscriber's health coverage. Valid values are:

0 No

1 Yes

9 Press Enter. The system creates the benefits enrollment EDI file.

Correcting 834 Work Files

Overview

Use the *Correct 834 Work Files* function to correct 834 information that is in the 834 work files. You select the work file set which contains information you want to correct. Each screen used in the *Correct 834 Work Files* function contains fields associated with one of the work files that is created when you use the *Create 834 Work Files* function. The table below shows the correction screens that are associated with each work file.

Work File	Correct Work File Screen
Header	Correct Header Work File
Subscriber/Member Level Detail	Correct Subscriber/Member Details
	Correct Additional Member Data
Disability Data	Correct Disability Data
Health Coverage Data	Correct Health Coverage
Additional Member Level Data	Correct Additional Member Data
Preferred Provider Data	Correct Preferred Provider Data
Optional Data	Optional Data Work Files <ul style="list-style-type: none"> ■ Optional Data Work Files Dependent Employer ■ Optional Data Work Files Dependent School ■ Optional Data Work Files Custodial Parent ■ Optional Data Work Files Responsible Person ■ Optional Data Work File COB Information

Correcting 834 Work Files

To correct 834 work files, follow the steps below.

- 1 From the Infinium HR main menu select *Benefits Administration*.
- 2 Select *HIPAA 834 Work Files*.
- 3 Select *Correct 834 Work Files [U834]*. The system displays the Correct 834 Work Files 834 Work File List selection screen similar to Figure 14-8.

7/09/03 16:58:07		Correct 834 Work Files		PRGU834	PRDU834	
834 Work File List						
Sorted By Employer						
2=Update						
Opt	ER	Effective Date	Reference ID	Begin Date	End Date	Flex
-	GMR	2003/07/02	GALESTEST	0702200311435273	6/01/2003	8/01/2003
-	GMR	2003/07/02	GALESTEST	0702200311474632	6/01/2003	7/01/2003
-	GMR	2003/07/02	GALESTEST	0702200311483747	6/01/2003	7/02/2003
-	GMR	2003/07/02	GALESTEST	0702200314302923	6/01/2003	8/01/2003
-	GMR	2003/07/02	GALESTEST	0702200314320039	6/01/2003	8/02/2003
-	GMR	2003/07/02	GALESTEST	0702200314362489	6/01/2003	7/02/2003
-	GMR	2003/07/02	GALESTEST	0702200314471351	6/01/2003	8/01/2003
-	GMR	2003/07/02	GALESTEST	0702200316392088	7/01/2003	7/01/2003
-	GMR	2003/07/02	GALESTEST	0702200317524437	6/01/2003	6/30/2003
-	KAF	2003/06/25	BC/BS	0625200308133308	1/01/2003	1/31/2003
-	ZUS	2003/07/09	AAA TEST	0709200316551754	1/01/2001	12/31/2003
-	ZYX	2003/06/24	DLH1	0624200319091957	1/01/2003	1/25/2003

Bottom

F3=Exit F10=Access F12=Cancel F14=Sort Eff. Date F15=Sort Employer

Figure 14-8: Correct 834 Work Files 834 Work File List selection screen

- 4 Use the information below to fill in the fields on this screen.

Opt

Type **2** next to the 834 work file record to update.

- 5 Press Enter. the system displays the Correct 834 Work Files Selection screen similar to Figure 14-9.

```

7/09/03 16:58:31      Correct Work File Selection      PRGU834  PRDU834

Employer . . . : GMR  GALE TEST
Effective Date. : 2003/07/02
ID Group. . . . : GALESTEST
Reference ID #. : 0702200314302923

Header Workfile?. . 0 (0=No,1=Yes)
Subscriber Sup. ID. _____ + -or- Sub. Last Name. . _____ +
Member SS # . . . . : _____ Member Sequence # . _____
Benefit ID. . . . . _____ + Benefit Plan. . . . _____ +

Work files Select  2=Change

Sub/Member Detail . _
Additional Detail . _
Disability Data . . _
Health Coverage . . _
Preferred Provider. _
Optional Data . . . _

F3=Exit F4=Prompt F10=Access F12=Previous
    
```

Figure 14-9: Correct 834 Work Files Selection screen

Use this screen to specify whether to correct certain header information and the specific work files to correct. You can select from the work files below.

- Subscriber/Member detail
- Additional detail
- Disability data
- Health coverage
- Preferred provider
- Optional data

6 Use the information below to complete the fields on this screen.

Header Workfile?

Specify whether to correct information in the header work file. Valid values are:

- 0 No
- 1 Yes

Subscriber Sup ID

Prompt to select the subscriber's supplemental ID. This is either the social security number or employee number, depending upon your entry in the *Use EE# Or SSN?* field on the second Create 834 Work Files screen.

Sub. Last Name

Specify the subscriber's last name and prompt to select a subscriber and member. Or, at the beginning of the field, type the beginning letters of the subscriber's last name and press F4. The system displays a list that matches the letters you type. Select the subscriber and member.

Member SS #

The social security number for the member you selected is displayed.

Member Sequence #

If the specified member is a dependent of a subscriber, this field displays a sequence number associated with the dependent. If the specified member is not a dependent, the subscriber number is 000, and this field is blank.

Benefit ID

Specify the benefit identify associated with the benefit plan for which you are correcting 834 work file data.

Benefit Plan

Specify the benefit plan for which you are correcting 834 work file data.

Sub/Member Detail

Type **2** to select the subscriber or member work file to change. Otherwise, leave blank.

Additional Detail

Type **2** to select the additional detail work file to change. Otherwise, leave blank.

Disability Data

Type **2** to select the additional member level detail work file to change. Otherwise, leave blank.

Health Coverage

Type 2 to select the health coverage data work file to change. Otherwise, leave blank.

Preferred Provider

Type 2 to select the preferred provider work file to change. Otherwise, leave blank.

Optional Data

Type 2 to select the optional work file to change. Otherwise, leave blank.

- 7 Press Enter. Depending upon the criteria you specify on the second Correct 834 Work Files selection screen, the system displays some or all of the correction screens. The information below discusses all the screens that can be displayed.

The system displays the Correct Header Work File screen similar to Figure 14-10.

```

7/10/03 09:39:25      Correct Header Work File      PRGU834  PRDU834

Employer . . . . : ZUS  SAMPLE US COMPANY
Effective Date. : 2003/07/09
ID Group. . . . : AAA TEST
Reference ID #. : 0709200316551754

Time Zone. . . . : ED +                      Transmitted? . . 0 (0/1)
Control #. . . . : 123
Master Policy # . : 123
Plan Sponsor. . . : MARY SMITH
Sponsor ID. . . . : 123
Insurer Name. . . : MARY SMITH
Insurer ID #. . . : 123
TPA/Broker Code . : F1 +                      Broker/TPA. . . T
TPA/Broker. . . . : MARY SMITH
TPA/Broker ID . . : 123
TPA/Broker Acct 1 :
TPA/Broker Acct 2 :

F3=Exit F4=Prompt F10=Access F12=Previous

```

Figure 14-10: Correct Header Work File screen

If you specify yes in the *Header Workfile?* field on the second Correct 834 Work Files selection screen, you use this screen to specify header work file information including the time zone where your iSeries machine resides, whether work files were transmitted to the vendor, sponsor information, insurer information and broker or TPA information.

8 Use the information below to complete the fields on this screen.*Time Zone*

Specify the value that represents your computer system's time zone. To verify, consult your IT department.

Transmitted?

Specify whether these work files were transmitted to the vendor. You can complete this field manually after transmission or the value can be set by your EDI translation product after the work files are transmitted to the vendor. Valid values are:

0 Not transmitted

1 Transmitted

Control #

This number was entered in the *Control #* field on the first Create 834 Work Files screen.

Master Policy #

Type the correct master policy number if all plans included in the work file have the same policy number.

Plan Sponsor

Type the correct name of the plan's sponsor if the sponsor is not the employer.

Sponsor ID

Type the correct sponsor ID if the sponsor is not the employer.

Insurer Name

Type the correct name of the insurer or payer for the plans included in this work file.

Insurer ID #

Type the correct ID for this insurer.

TPA/Broker Code

You must complete this field if you enter a value in the *TPA/Broker* field.

Specify the type of TPA or broker ID code.

Broker TPA

If you enter a value in the *TPA/Broker* field, you must complete this field.

Specify whether you are a TPA or broker. Valid values are:

T TPA

B Broker

Broker/TPA ID

Type the name of your TPA (third party administrator) or broker.

TPA/Broker Acct 1

Type the TPA's or broker's account number if the number is different from the sponsor's number.

TPA/Broker Acct 2

If the TPA or broker uses more than one account number for the plans being reported, type the TPA's or broker's second account number.

- 9 Press Enter. The system displays the Correct Subscriber/Member Details screen similar to Figure 14-11.
-

```
7/09/03 16:59:11      Correct Subscriber/Member Details  PRGB834  PRDB834

Employer . . . . . GMR GALE TEST
ID Group. . . . . GALESTEST
Reference ID #. . . : 0702200314302923

Subscriber Supp ID:      355
Member Name . . . . . BREEDON, MARY
Sequence #. . . . . 000

Member SS#. . . . . 026-45-8522
Benefit Status. . . . A
Medicare Plan Code. . -
Date of Death . . . . _____

F3=Exit F10=Access F12=Previous
```

Figure 14-11: Correct Subscriber/Member Details screen

Use this screen to enter the member's social security number if not already entered, benefit status, a Medicare plan code and member's date of death, if applicable.

- 10** Use the information below to complete the fields on this screen.

Member SS#

This is the subscriber's social security number. If this field is blank and you now know the social security number, type it. If the social security number is displayed, you cannot enter a value in this field. Your entry here does not change the social security number in the dependent file.

Benefit Status

Specify the correct benefit status for this member. Valid values are:

- | | |
|----------|--|
| A | Active |
| C | COBRA |
| S | Surviving insured |
| T | Tax Equity And Fiscal Responsibility Act |

Medicare Plan Code

Type the Medicare coverage value. This value is provided by your vendor or the *National Electronic Data Interchange Transaction Set Implementation Guide for 834 Reporting*.

Date of Death

Specify the date of the member's death. This value may be supplied for this subscriber from the *Date of Death* field in the personnel master file.

- 11 Press Enter. The system displays the first Correct Additional Member Data screen similar to Figure 14-12.

```

6/25/12 09:54:47      Correct Additional Member Data      PRGC834      PRDC834

Employer . . . . . : JAB
ID Group. . . . . : HIPAAGROUP
Reference ID #. . . : 0607201211111213

Subscriber Supp ID: 472125698
Member Name . . . . : MCDONOUGH, JEN
Sequence #. . . . . : 000

Telephone # . . . . . _____
Email . . . . . _____
Additional Comm # . _____
Location. . . . . _____
Citizenship?. . . . . 1
Wage Frequency. . . . 2
Wage Amount . . . . . 90000.0000
Alt. Address 1. . . . _____
Alt. Address 2. . . . _____
Alt. City . . . . . _____
Alt. Zip/Postal . . . _____

Comm Code. . . . . __ +
Location Code. . . . __
Work Hours . . . . . __.00
Salary Grade . . . . . ____

Alt. State/Prov. __ +
Alt. Country . . . . __ +

F3=Exit F4=Prompt F10=Access F12=Previous
    
```

Figure 14-12: Correct Additional Member Data screen 1

Use this screen to enter corrections to additional member data including communications information, the type of citizenship the member holds, wage information and alternate address information.

- 12 Use the information below to complete the fields on this screen.

Telephone #

Type the member's home phone number.

Email

Type the member's email address.

Additional Comm #

Type an additional phone number, email or fax number for the member.

Comm Code

If you complete the *Additional Comm #* field, you must specify an additional communication code value. Specify the type of additional communication.

This value is associated with code type CQC, communications qualifier.

Location

Type the correct location if required by your vendor.

Location Code

You must complete this field if you enter a value in the *Location* field.

Type the value that identifies the type of location. Valid values are:

- 60** Out of area
- CY** County/Parish

Citizenship?

Type the value that describes the subscriber's citizenship. Valid values are:

- 1** US citizen
- 2** Non-resident alien
- 3** Resident alien
- 4** Illegal alien
- 5** Alien
- 6** US citizen, non-resident
- 7** US citizen, resident

Wage Frequency

Specify the wage frequency for the subscriber's wage amount that is being reported. Valid values are:

- 1** Weekly
-

- 2** Biweekly
- 3** Semi-monthly
- 4** Monthly
- 6** Daily
- 7** Annual
- 8** Two calendar months
- 9** Lump sum separation allowance

Work Hours

Type the number of hours the subscriber works.

Wage Amount

Type the subscriber's correct wages.

Salary Grade

Type the subscriber's salary grade.

Alt Address 1

Type the member's alternate street address.

Alt Address 2

Type the second line of the member's alternate address.

Alt City

If you complete the *Alt Address 1* field, you must enter a value in this field.

Type the city for the member's alternate address.

Alt State/Prov

Specify the state or province for the member's alternate address.

Alt Zip/Postal

Type the zip or postal code for the member's alternate address.

Alt Country

Specify the value for the country of the member's alternate address.

- 13 Press Enter. The system displays the second Correct Additional Member Data screen similar to Figure 14-13.

```
6/25/12 09:55:39      Correct Additional Member Data      PRGC834      PRDC834

Employer . . . . : JAB
ID Group. . . . : HIPAAGROUP
Reference ID #. . : 0607201211111213

Subscriber Supp ID: 472125698
Member Name . . . : MCDONOUGH, JEN
Sequence #. . . . : 000

Policy Amount . . . _____ .00      Pol Amt Code . . ____
Policy Amount . . . _____ .00      Pol Amt Code . . ____
Policy Amount . . . _____ .00      Pol Amt Code . . ____
Policy Amount . . . _____ .00      Pol Amt Code . . ____
Policy Amount . . . _____ 800.00     Pol Amt Code . . P3

F3=Exit  F10=QuikAccess  F12=Cancel
```

Figure 14-13: Correct Additional Member Data screen 2

Use this screen to enter corrections to policy amount information.

- 14 Use the information below to complete the fields on this screen.

Policy Amount

Type the policy amount.

Pol Amt Code

Type the policy amount code.

B9

C1

D2

EBA

FK

P3

R

- 15 Press Enter. The system displays the Correct Disability Data screen shown in Figure 14-14.

```
7/10/03 09:37:20          Correct Disability Data      PRGD834  PRDD834

Employer . . . . : GMR GALE TEST
ID Group. . . . : GALESTEST
Reference ID #. . : 0702200314362489

Subscriber Supp ID:      80005
Member Name . . . . : ACCURATE,ALAN N
Sequence #. . . . : 000

Disability Type Code . . 1
End Stage Renal Failure. 0
Disability Begin Date. . 5142003
Disability End Date. . . _____

F3=Exit F10=Access F12=Previous
```

Figure 14-14: Correct Disability Data screen

Use this screen to provide member disability information including the type of disability, whether the disability is associated with end stage renal failure and a beginning and ending date for the disability.

- 16 Use the information below to complete the fields on this screen.

Disability Type Code

Type the value for the disability code for the term of the member's disability. Valid values are:

- 1 Short term disability
- 2 Long term disability
- 3 Permanent or total disability

Blank None

End Stage Renal Failure

Specify whether the disability diagnosis is ESRF (end stage renal failure).
Valid values are:

1 Yes

0 No

Disability Begin Date

You must complete this field if you enter a value in the *Disability Type Code* field. Type the date the disability began.

Disability End Date

You must complete this field if you enter a value in the *Disability Type Code* field. Type the date the disability ended.

- 17 Press Enter. The system displays the Correct Health Coverage Data screen similar to Figure 14-15.

```

6/25/12 09:53:26      Correct Health Coverage Data      PRGE834      PRDE834

Employer . . . . . : JAB COMPANY
ID Group. . . . . : HIPAGROUP
Reference ID #. . . : 0607201211111213

Subscriber Supp ID: 472125698
Member Name . . . : MCDONOUGH, JEN
Sequence #. . . . : 000
Benefit ID. . . . . : M01                      Benefit Plan. : MED*

Maintenance Code. . 030
Cover. Date Qlfr. .  ___
ID Card Type. . . . -
ID Card Quantity. .  ___
Action Code . . . . -
Reference ID Code .  1L

F3=Exit F4=Prompt F10=Access F12=Previous

```

Figure 14-15: Correct Health Coverage Data screen

Use this screen to enter health coverage information. The information includes the maintenance code, insurance line code, plan description, coverage level code, a date time qualifier and the coverage period. You can

also enter identification card information, including the number of cards to be created and the type of card: dental, health or prescription.

- 18 Use the information below to complete the fields on this screen.

Maintenance Code

Type the value that identifies the type of coverage being reported for this member. Valid values are:

001	Change
002	Delete
021	Addition
024	Cancellation or termination
025	Reinstatement
026	Correction
030	Audit or compare
032	Employee information not applicable

Cover. Date Qlfr

Specify the value that identifies the reason for the coverage period being reported on this date and at this time. Valid values are:

300	
303	Maintenance effective
343	
348	Benefit begin
349	Benefit end
543	Last premium paid only
695	

ID Card Type

If ID cards are required, type the value that identifies the type of card. Valid values are:

D	Dental
H	Health insurance
P	Prescription

ID Card Quantity

You must complete this field if you enter a value in the *ID Card Type* field.

Type the quantity of ID cards you need.

Action Code

You must complete this field if you enter a value in the *ID Card Type* field.

Specify the action to be taken for ID cards. Valid values are:

1	Add
2	Change
RX	Replace

Reference ID Code

Specify the value that identifies the reference ID code being reported. Valid values are:

17
1L
9V
CE
E8
M7
PID
RB
X9
XM

XX1

XX2

ZX

ZZ

- 19 Press Enter. The system displays the first Correct Preferred Provider Data screen similar to Figure 14-16.

```

6/25/12 09:48:19   Correct Preferred Provider Data   PRGP834   PRDP834

Employer . . . . : JAB JEAN'S COMPANY
ID Group. . . . : HIPAAGROUP
Reference ID #. . : 0607201211111213

Subscriber Supp ID: 472125698
Member Name . . . : MCDONOUGH, JEN
Sequence #. . . . : 000      Counter Seq: A
Benefit ID. . . . : M01      Benefit Plan. : MED*
Full Name . . . . _____ Prefix. . _____
First Name. . . . _____ Suffix. . _____
Middle Name . . . _____
Last/Org. Name. . _____
Address Line 1 . _____
Address Line 2 . _____
City/Town . . . . _____ State/Prov. MA +
Postal Code . . . _____ Country . . ____ +

F3=Exit  F4=Prompt  F6=Add PCP  F10=Access  F12=Previous
    
```

Figure 14-16: Correct Preferred Provider Data screen 1

On this screen you can update preferred provider information or you can create an additional preferred provider record by pressing F6.

- 20 Use the information below to complete the fields on this screen.

Full Name

Type the complete name for the organization or provider.

Prefix

Type the provider's correct prefix such as **MS.**, **MR.**, **MRS.** and so on.

First Name

You must complete this field if you enter a provider's name in the *Last/Org Name* field.

Type the provider's first name.

Suffix

Type the provider's correct suffix such as **JR.**, **SR.**, **II**, **III** and so on.

Middle Name

Type the provider's middle name.

Last/Org Name

Type the organization's name or the provider's last name.

Address Line 1

Type the address for the organization or provider.

Address Line 2

Type a second line of the address for the organization or provider.

City/Town

You must complete this field if you enter a provider's name in the *Last/Org Name* field.

Type the organization or provider's correct city or town.

State/Prov

You must complete this field if you enter a provider's name in the *Last/Org Name* field.

Specify the code for the state or province for the organization or preferred provider's mailing address.

Postal Code

You must complete this field if you enter a provider's name in the *Last/Org Name* field.

Type the postal code for the organization or provider's address.

Country

Specify the country of the organization or preferred provider’s address.

- 21 Press Enter. The system displays the second Correct Preferred Provider Data screen similar to Figure 14-17.

```

6/25/12 09:51:59   Correct Preferred Provider Data   PRGP834   PRDP834

Employer . . . . : JAB COMPANY
ID Group. . . . . : HIPAAGROUP
Reference ID #. . : 0607201211111213

Provider ID . . . 121554                               NPI Qual. . XX +
Entity Type . . . 1 (1=Person, 2=Non-person)          Entity ID . 1 +
Telephone . . . . _____
Location. . . . . _____                          Loc. Code . __
Current Patient?. 1_                                  Reason. . . AI +
Effective Date. . _____

F3=Exit F4=Prompt F10=QuikAccess F12=Cancel
    
```

Figure 14-17: Correct Preferred Provider Data screen 2

On this screen you can update additional preferred provider information.

Provider ID

You must complete this field if you enter a provider’s name in the *Last/Org Name* field.

Type the organization or preferred provider’s ID.

NPI Qual

Type the value that identifies the qualifier code for the provider ID. Use a code value associated with code type NPI.

Entity Type

You must complete this field if you enter a provider’s name in the *Last/Org Name* field.

Specify the type of entity for this provider. Valid values are:

- 1** Person
- 2** Non-person

Entity ID

You must complete this field if you enter a provider's name in the *Last/Org Name* field.

Specify the identifier that is used for this provider.

Telephone

You must complete this field if you enter a provider's name in the *Last/Org Name* field.

Type the provider's telephone number. Editing of this field is the responsibility of the user. Use edit characters, such as hyphens (-), that are meaningful.

Location

Type a location if required by your vendor.

Loc Code

You must complete this field if you enter a value in the *Location* field.

Specify the type of location for this provider. Valid values are:

- 60** Area
- CY** County/Parish
- RJ** Region

Current Patient?

You must complete this field if you enter a provider's name in the *Last/Org Name* field.

Specify whether this member is currently a patient of the preferred provider. Valid values are:

- 0** Unknown
 - 1** Established patient
 - 2** Not an established patient
-

Reason

You must complete this field if you enter a provider's name in the *Last/Org Name* field.

Specify the value that identifies the reason for this member's current status.

This value is associated with code type MRC.

Effective Date

You must complete this field if you enter a provider's name in the *Last/Org Name* field.

Specify the effective date for this preferred provider information.

- 22** Press Enter. The system displays the Optional Data selection screen similar to Figure 14-18.

```

7/09/03 17:04:23          Correct Optional Data          PRGF834  PRDF834

Employer . . . . . : GMR GALE TEST
ID Group. . . . . : GALESTEST
Reference ID #. . . : 0702200314320039
Subscriber Supp ID:      355
Member Name . . . . . : BREEDON,MARY
Sequence #. . . . . : 000

Section select  2=Change

                - Language
                - Dependent Employer
                - Dependent School
                - Custodial Parent
                - Responsible Person
                - :OBRA

F3=Exit F10=Access F12=Previous

```

Figure 14-18: Correct Optional Data selection screen

- 23** Type **2** next to the information to change. You can type **2** next to each selection to be changed. Assume that you type **2** next to all selections for the information below.
- 24** Press Enter. The system displays the Correct Language Data screen similar to Figure 14-19.

```

7/09/03 17:08:29          Correct Language Data      PRGF834  PRDF834
                                                Page 1
Employer. . . . . : GMR GALE TEST
ID Group. . . . . : GALESTEST
Reference ID #. . . : 0702200314320039
Subscriber Supp.ID:      355
Member Name . . . . : BREEDON,MARY
Sequence #. . . . . : 000

Language. . . . . _____ Lang. Type .  __
Language Use. . . . . -
Prior Incorrect Data
Prior Last Name . . _____
Prior First Name. . _____ Prior Prefix _____
Prior Middle Name . _____ Prior Suffix _____
Prior Insur. ID . . _____ ID Type. . .  __
Prior DOB . . . . . _____
Prior Inc. Gendr. . . -

F3=Exit F10=Access F12=Previous

```

Figure 14-19: Correct Language Data screen

Use this screen to enter language information for the member including the language used by the member, incorrect name information previously entered and incorrect insurance information previously entered.

- 25** Use the information below to complete the fields on this screen.

Language

Type the member's language.

Lang Type

Type the language type code provided by your vendor.

Language use

Specify the member's usage level in the reported language. Valid values are:

- 5** The member has a reading knowledge of the language.
- 7** The member has a speaking knowledge of the language.
- 8** The specified language is the member's native language.

Prior Last Name

Type the incorrect last name previously reported for this member.

Prior First Name

Type the incorrect first name previously reported for this member.

Prior Prefix

Type the incorrect prefix previously reported for this member.

Prior Middle Name

Type the incorrect middle name previously reported for this member.

Prior Suffix

Type the incorrect suffix previously reported for this member.

Prior Insur ID

Type the incorrect insurance ID previously reported for this member.

ID Type

Type the incorrect insurance ID previously reported for this member.

Prior DOB

Specify the incorrect date of birth previously reported for this member.

Prior Inc Gendr

Type the incorrect gender previously reported for this member.

- 26** Press Enter. The system displays the Correct Dependent Employer Data screen similar to Figure 14-20.
-

```

7/09/03 17:10:38      Correct Dependent Employer Data      PRGF834      PRDF834
                                                              Page 2
Employer . . . . . : GMR GALE TEST
ID Group. . . . . : GALESTEST
Reference ID #. . . : 0702200314320039
Subscriber Supp ID:      355
Member Name . . . . : BREEDON, MARY
Sequence #. . . . . : 000

Dependent Employer

Last Name/Org. . . . _____
Employer First Name _____ Entity Type.  _
Employer Middle Nm. _____ Emp. ID. . . _____
Employer Telephone. _____
Employer Email. . . . _____
Employer Fax. . . . . _____
Employer Address 1. _____
Employer Address 2. _____
Employer City . . . . _____ State/Prov .  __ +
Emplr Postal Code. _____

F3=Exit F4=Prompt F10=Access F12=Previous

```

Figure 14-20: Correct Dependent Employer Data screen

Use this screen to enter the dependent's employer information.

- 27 Use the information below to complete the fields on this screen.

Last Name/Org

Type the member's employer's last name or the organization's name.

Employer First Name

Type the member's employer's first name.

Entity Type

Specify whether the member's employer is a person or non-person. Valid values are:

- 1 Person
- 2 Non-person

Employer Middle Nm

Type the member's employer's middle name.

Emp ID

Type the member's employer's ID.

Employer Telephone

Type the member's employer's telephone number.

Employer Email

Type the member's employer's email address.

Employer Fax

Type the member's employer's fax number.

Employer Address 1

Type the first line of the member's employer's street address.

Employer Address 2

Type the second line, if any, of the member's employer's street address.

Employer City

Type the city for the member's employer's address.

State/Prov

Specify the state for the member's employer's address.

Emplyr Postal Code

Type the postal code for the member's employer's address.

- 28** Press Enter. The system displays the Correct Dependent School Data screen similar to Figure 14-21.
-

```
7/09/03 17:12:38  Correct Dependent School Data  PRGF834  PRDF834
                                                    Page 3

Employer . . . . : GMR GALE TEST
ID Group. . . . : GALESTEST
Reference ID #. . : 0702200314320039
Subscriber Supp ID: 355
Member Name . . . : BREEDON, MARY
Sequence #. . . . : 000

Dependent School

School Name . . . . _____
School Telephone. . _____
School Email. . . . _____
School Fax. . . . _____
School Address 1. . _____
School Address 2. . _____
School City . . . . _____ State/Prov . ____ +
School Postal Code. _____ Country. . . ____ +

F3=Exit F4=Prompt F10=Access F12=Cancel
```

Figure 14-21: Correct Dependent School Data screen

Use this screen to enter a dependent's school information.

- 29 Use the information below to complete the fields on this screen.

School Name

Type the member's school name.

School Telephone

Type the member's school telephone number.

School Email

Type the member's school email address.

School Fax

Type the member's school fax number.

School Address 1

Type the first line of the member's school mailing address.

School Address 2

Type the second line, if any, of the member's school address.

School City

Type the city for the member's school address.

State/Prov

Specify the state or province for the address of the member's school.

School Postal Code

Type the postal code for the member's school address.

Country

Specify the country for the member's school address.

- 30 Press Enter. The system displays the Correct Custodial Parent Data screen similar to Figure 14-22.

```

7/09/03 17:13:52   Correct Custodial Parent Data   PRGF834   PRDF834
                                                    Page 4
Employer . . . . . : GMR GALE TEST
ID Group . . . . . : GALESTEST
Reference ID #. . . : 0702200314320039
Subscriber Supp ID:   355
Member Name . . . . : BREEDON, MARY
Sequence #. . . . . : 000

Custodial Parent
Last Name . . . . . _____
First Name . . . . . _____ Prefix . . . _____
Middle Name . . . . . _____ Suffix . . . _____
Tax ID. . . . . _____
Telephone . . . . . _____
Email . . . . . _____
Fax . . . . . _____
Address 1 . . . . . _____
Address 2 . . . . . _____
City . . . . . _____ State/Prov . ____ +
Postal Code . . . . . _____ Country. . . ____ +

F3=Exit F4=Prompt F10=Access F12=Previous
    
```

Figure 14-22: Correct Custodial Parent Data screen

Use this screen to enter information about the dependent's custodial parent.

- 31 Use the information below to complete the fields on this screen.

Last Name

Type the dependent's custodial parent's last name.

First Name

Type the dependent's custodial parent's first name.

Prefix

Type the dependent's custodial parent's prefix.

Middle Name

Type the dependent's custodial parent's middle name.

Suffix

Type the dependent's custodial parent's suffix.

Tax ID

Type the dependent's custodial parent's federal tax ID.

Telephone

Type the dependent's custodial parent's telephone number.

Email

Type the dependent's custodial parent's email address.

Fax

Type the dependent's custodial parent's fax number.

Address 1

Type the first address line for the dependent's custodial parent's mailing address.

Address 2

Type the second address line, if any, for the dependent's custodial parent's mailing address.

City

Type the city for the dependent's custodial parent's mailing address.

State/Prov

Specify the state or province for the dependent's custodial parent's mailing address.

Postal Code

Type the postal code for the dependent's custodial parent's mailing address.

Country

Specify the country for the dependent's custodial parent's mailing address.

- 32 Press Enter. The system displays the Correct Responsible Person screen similar to Figure 14-23.

```

7/09/03 17:14:54          Correct Responsible Person    PRGF834    PRDF834
                                                Page 5
Employer . . . . . : GMR GALE TEST
ID Group. . . . . : GALESTEST
Reference ID #. . . : 0702200314320039
Subscriber Supp ID:    355
Member Name . . . . : BREEDON, MARY
Sequence #. . . . . : 000

Responsible Person
Last Name . . . . . _____
First Name. . . . . _____ Prefix . . . _____
Middle Name . . . . _____ Suffix . . . _____
Tax ID. . . . . _____
Telephone . . . . . _____
Email . . . . . _____
Fax . . . . . _____
Address 1 . . . . . _____
Address 2 . . . . . _____
City. . . . . _____ State/Prov . ____ +
Postal Code . . . . _____ Country. . . ____ +

F3=Exit F4=Prompt F10=Access F12=Previous
    
```

Figure 14-23: Correct Responsible Person screen

Use this screen to enter information about the responsible person. This person is not the subscriber. The information includes name, address and phone numbers.

- 33 Use the information below to complete the fields on this screen.

Last Name

Type the last name for the person responsible for the member.

First Name

Type the first name for the person responsible for the member.

Prefix

Type the prefix for the person responsible for the member.

Middle Name

Type the middle name for the person responsible for the member.

Suffix

Type the suffix for the person responsible for the member.

Tax ID

Type the federal tax ID for the person responsible for the member.

Telephone

Type the telephone number for the person responsible for the member.

Email

Type the email address for the person responsible for the dependent's benefit coverage.

Fax

Type the fax number for the person responsible for the member.

Address 1

Type the first address line for the mailing address for the person responsible for the member.

Address 2

Type the second address line, if any, for the mailing address for the person responsible for the member.

City

Type the city for the mailing address for the person responsible for the member.

State/Prov

Specify the state or province for the mailing address for the person responsible for the member.

Postal Code

Type the postal code for the mailing address for the person responsible for the member.

Country

Specify the country for the mailing address for the person responsible for the member.

- 34 Press Enter. The system displays the first Correct COB Data screen similar to Figure 14-24.

```

6/25/12 09:41:53          Correct COB Data          PRGF834  PRDF834
                                                Page 6

Employer . . . . . : JAB COMPANY
ID Group. . . . . : HIPAAGROUP
Reference ID #. . . : 0607201211111213
Subscriber Supp ID: 472125698
Member Name . . . . : MCDONOUGH, JEN
Sequence #. . . . . : 000

COB Seq. Number .      _
COB Ins Grp Pol.#     _____ COB Code . . . . _
COB Reference ID.     _____ COB Ref ID Qual.  __
COB Insurer Name.    _____
COB Grp/Policy #.     _____ COB ID Type. . . __
COB Begin Date. .    _____
COB End Date. . .    _____
COB Srvc Type . .    _____

F3=Exit  F10=Access  F12=Previous
    
```

Figure 14-24: Correct COB Data screen 1

Use this screen to enter coordination of benefits (COB) information for the member. The information includes a sequence number, insurance name, group policy number and beginning and ending dates.

- 35 Use the information below to complete the fields on this screen.

COB Seq Number

For individuals who require coordination of benefits (COB), type the value that identifies the insurance carrier’s level of responsibility for insurance claims. Valid values are:

- P** Primary
- S** Secondary
- T** Tertiary

U Unknown*COB Ins Grp Pol #*

For individuals who have coordination of benefits (COB) coverage, type the group policy number for the coordinating policy.

COB Code

For individuals who have coordination of benefits (COB) coverage, type the value that specifies whether there is coordination of benefits. Valid values are:

- | | |
|----------|---|
| 1 | Coordination of benefits |
| 5 | Unknown |
| 6 | No coordination of benefits; this value verifies there is no coordination of benefits |

COB Reference ID

Type the COB reference ID.

COB Ref ID Qual

You must complete this field if you enter a value in the *COB Ref ID* field.

Type the qualifier value for the specified COB reference ID. Valid values are:

- | | |
|-----------|--------------------------------|
| 60 | Account suffix |
| 6P | Group number |
| A6 | Employee identification number |
| SY | Social security number |
| ZZ | Mutually defined |

COB Insurer Name

For individuals who have coordination of benefits (COB) coverage, type the name of the COB insurer.

COB Grp/Policy #

For individuals who have coordination of benefits (COB) coverage, type the group policy number.

COB ID Type

Type the value that identifies the type of COB group policy number. Valid values are:

- FI** Federal taxpayer identification number
- NI** NAIC identification
- XV** National plan ID

COB Begin Date

Specify the effective date for the start of coordinated benefits.

COB End Date

Specify the effective date for the end of coordinated benefits.

COB Svc Type

Specify the service type qualifier code value for the specified COB reference ID. Valid values are:

1

35

48

50

54

89

90

A4

AG

AL

BB

- 36** Press Enter. The system displays the second Correct COB Data screen similar to Figure 14-25.
-

```

6/25/12 09:44:52          Correct COB Data          PRGF834  PRDF834
                                                Page 7
Employer . . . . . : JAB COMPANY
ID Group. . . . . : HIPAGROUP
Reference ID #. . . : 0607201211111213
Subscriber Supp ID: 472125698
Member Name . . . . : MCDONOUGH, JEN
Sequence #. . . . . : 000

Last/Org. Name. . . _____
First Name. . . . . _____
Middle Name . . . . _____
Prefix . . . . . _____          Suffix . _____
Ident Code Qual . . . _____
Identity Code . . . _____
Entity Rel Code . . . _____
Entity Id Code . . . _____
Address 1 . . . . . _____
Address 2 . . . . . _____
Country Sub Code. . . _____

F3=Exit  F10=QuikAccess  F12=Cancel

```

Figure 14-25: Correct COB Data screen 2

Use this screen to enter additional coordination of benefits (COB) information for the member.

- 37 Use the information below to complete the fields on this screen.

Last/Org Name

Type the last name or organization of the benefits (COD) coordinator.

First Name

Type the first name of benefits (COB) coordinator.

Middle Name

Type the middle name of benefits (COB) coordinator.

Prefix

Type the prefix of benefits (COB) coordinator.

Suffix

Type the suffix of benefits (COB) coordinator.

Ident Code Qual

Type the identity code qualifier of benefits (COB) coordinator. Valid values are:

FI

NI

XV

Identity Code

Type the identity code of benefits (COB) coordinator.

Entity Rel Code

Type the entity relationship code of benefits (COB) coordinator. Valid values are:

25

26

72

Entity Id Code

Type the entity identification code of the benefits (COB) coordinator.

Address 1

Type the first line of the address of the benefits (COB) coordinator.

Address 2

If applicable, type a second line for the address of the benefits (COB) coordinator.

Country Sub Code

Type the country subdivision code of benefits (COB) coordinator.

- 38** Press Enter. The system saves your changes and displays the Infinium HR main menu.
-

Generating Work File Information

You can generate two types of information about work files:

- A member listing
- Work file listing

Generating Work File Information

Use the *List Work Files* function to generate a listing of the information in the various work files. This listing includes information from these work files:

- Header
- Subscriber/Member level detail
- Additional member level detail
- Disability detail
- Health coverage data
- Preferred provider

To generate work file information, follow the steps below.

- 1 From the Infinium HR main menu select *Benefits Administration*.
 - 2 Select *HIPAA 834 Work Files*.
 - 3 Select *List Work Files* [L834WF]. The system displays the List 834 Work Files screen similar to Figure 14-26.
-

```

7/10/03 09:10:50          List 834 Work Files          PRGW834  PRDW834

Sorted By Employer

X>Select
Opt ER  Effective Date      Reference ID      Begin Date  End Date  Flex
-----
-  GMR  2003/07/02  GALESTEST  0702200311435273  6/01/2003  8/01/2003
-  GMR  2003/07/02  GALESTEST  0702200311474632  6/01/2003  7/01/2003
-  GMR  2003/07/02  GALESTEST  0702200311483747  6/01/2003  7/02/2003
-  GMR  2003/07/02  GALESTEST  0702200314302923  6/01/2003  8/01/2003
-  GMR  2003/07/02  GALESTEST  0702200314320039  6/01/2003  8/02/2003
-  GMR  2003/07/02  GALESTEST  0702200314362489  6/01/2003  7/02/2003
-  GMR  2003/07/02  GALESTEST  0702200314471351  6/01/2003  8/01/2003
-  GMR  2003/07/02  GALESTEST  0702200316392088  7/01/2003  7/01/2003
-  GMR  2003/07/02  GALESTEST  0702200317524437  6/01/2003  6/30/2003
-  KAF  2003/06/25  BC/BS      0625200308133308  1/01/2003  1/31/2003
-  ZUS  2003/07/09  AAA TEST   0709200316551754  1/01/2001  12/31/2003
-  ZYX  2003/06/24  DLH1      0624200319091957  1/01/2003  1/25/2003

Bottom

F3=Exit  F10=Access  F12=Cancel  F14=Sort Eff. Date  F15=Sort Employer
    
```

Figure 14-26: List 834 Work Files screen

- 4 Use the information below to complete the field on this screen.

Opt

Type **X** next to the work file whose information you want to list.

- 5 Press Enter. The system generates the listing.

Generating Member Information

You can generate a listing of all the people or members associated with one transaction set. You use the *List Work Files Members* function to generate this list. The information includes the name and address of each member and the effective date for eligibility to benefits.

To generate member information, follow the steps below.

- 1 From the Infinium HR main menu select *Benefits Administration*.
- 2 Select *HIPAA 834 Work Files*.
- 3 Select *List Work File Members [L834WM]*. The system displays the List 834 Work File Set Members screen similar to Figure 14-27.

```
7/10/03 09:12:50 List 834 Work File Set Members PRGL834 PRDL834
834 Work File List
Sorted By Employer
X>Select
Opt ER Effective Date Reference ID Begin Date End Date Flex
- GMR 2003/07/02 GALESTEST 0702200311435273 6/01/2003 8/01/2003
- GMR 2003/07/02 GALESTEST 0702200311474632 6/01/2003 7/01/2003
- GMR 2003/07/02 GALESTEST 0702200311483747 6/01/2003 7/02/2003
- GMR 2003/07/02 GALESTEST 0702200314302923 6/01/2003 8/01/2003
- GMR 2003/07/02 GALESTEST 0702200314320039 6/01/2003 8/02/2003
- GMR 2003/07/02 GALESTEST 0702200314362489 6/01/2003 7/02/2003
- GMR 2003/07/02 GALESTEST 0702200314471351 6/01/2003 8/01/2003
- GMR 2003/07/02 GALESTEST 0702200316392088 7/01/2003 7/01/2003
- GMR 2003/07/02 GALESTEST 0702200317524437 6/01/2003 6/30/2003
- KAF 2003/06/25 BC/BS 0625200308133308 1/01/2003 1/31/2003
- ZUS 2003/07/09 AAA TEST 0709200316551754 1/01/2001 12/31/2003
- ZYX 2003/06/24 DLH1 0624200319091957 1/01/2003 1/25/2003

Bottom
F3=Exit F10=Access F12=Cancel F14=Sort Eff. Date F15=Sort Employer
```

Figure 14-27: List 834 Work File Set Members screen

- 4 Use the information below to complete the field on this screen.

Opt

Type **X** next to the work file whose member information you want to list.

- 5 Press Enter. The system generates the member listing.

Creating Functional Groups

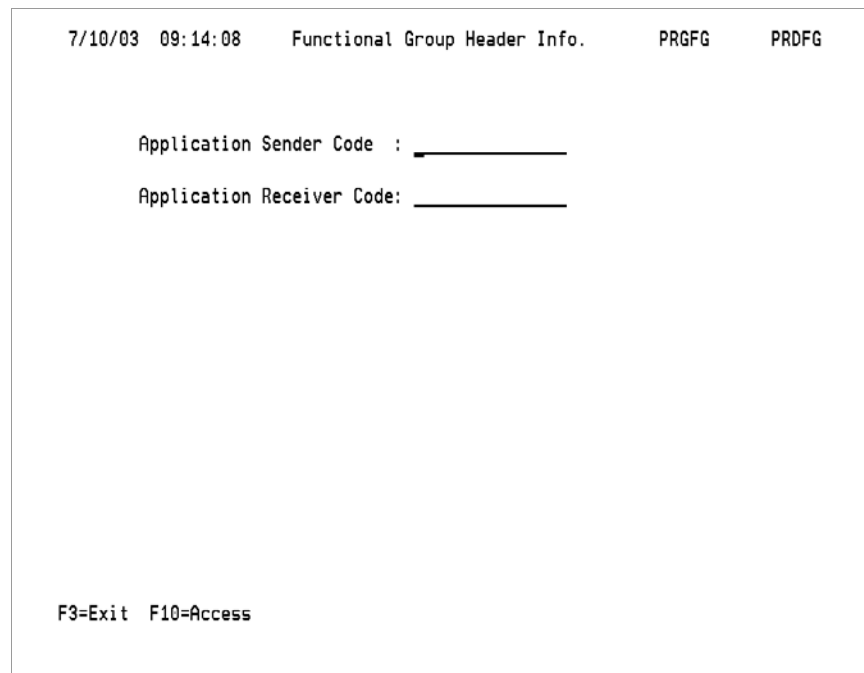
You can group work files or transaction sets into functional groups to be submitted together. Use the *Create Functional Groups* function to create the Functional Group file, PRPFG, which contains records that match the header records in the selected work files. The Functional Group file can be used to map to the appropriate work files.

When you create functional groups, the system does not generate a spool file. You need a utility program to view the contents of the files you create.

To create functional groups, follow the steps below.

- 1 From the Infinium HR main menu select *Benefits Administration*.
- 2 Select *HIPAA 834 Work Files*.
- 3 Select *Create Functional Group* [CFG].

The system displays the Functional Group Header Info. screen similar to Figure 14-28.



```
7/10/03 09:14:08      Functional Group Header Info.      PRGFG      PRDFG

Application Sender Code : _____
Application Receiver Code: _____

F3=Exit  F10=Access
```

Figure 14-28: Functional Group Header Info. screen

- 4 Use the information below to complete the fields on this screen.

Application Sender Code

Type the value provided by your vendor for the application sender code.

Application Receiver Code

Type the value provided by your vendor for the application receiver code.

- 5 Press Enter. The system displays the Create Functional Group Transaction Set List selection screen similar to Figure 14-29.

```

7/10/03 09:14:46          Create Functional Group      PRGFG      PRDFG
                          Transaction Set List

Sorted By Employer

X>Select
Opt ER   Effective Date      Reference ID      Begin Date  End Date  Flex
-  GMR   2003/07/02  GALESTEST      0702200311435273  6/01/2003  8/01/2003
-  GMR   2003/07/02  GALESTEST      0702200311474632  6/01/2003  7/01/2003
-  GMR   2003/07/02  GALESTEST      0702200311483747  6/01/2003  7/02/2003
-  GMR   2003/07/02  GALESTEST      0702200314302923  6/01/2003  8/01/2003
-  GMR   2003/07/02  GALESTEST      0702200314320039  6/01/2003  8/02/2003
-  GMR   2003/07/02  GALESTEST      0702200314362489  6/01/2003  7/02/2003
-  GMR   2003/07/02  GALESTEST      0702200314471351  6/01/2003  8/01/2003
-  GMR   2003/07/02  GALESTEST      0702200316392088  7/01/2003  7/01/2003
-  GMR   2003/07/02  GALESTEST      0702200317524437  6/01/2003  6/30/2003
-  KAF   2003/06/25  BC/BS          0625200308133308  1/01/2003  1/31/2003
-  ZUS   2003/07/09  AAA TEST      0709200316551754  1/01/2001  12/31/2003
-  ZYX   2003/06/24  DLH1          0624200319091957  1/01/2003  1/25/2003

Bottom

F3=Exit  F10=Access  F12=Cancel  F14=Sort Eff. Date  F15=Sort Employer

```

Figure 14-29: Create Functional Group Transaction Set List selection screen

- 6 Type **X** in the *Opt* field next to each transaction set to be included in the functional group.
- 7 Press Enter. The system creates the functional group for the specified records and returns to the Infinium HR main menu.

Purging 834 Data

You can purge transmitted 834 work files and functional group work files. Use the *Purge 834 Work Files* function to purge transmitted 834 work files. Use the *Purge Functional Groups* function to purge functional group work files.

Purging 834 Work Files

Only transmitted 834 work files can be purged. You can specify the employer and date through which you want to purge the information.

To purge 834 work files, follow the steps below.

- 1 From the Infinium HR main menu select *System Operations*.
 - 2 Select *Personnel Purge Functions*.
 - 3 Select *HIPAA 834 Work Files*.
 - 4 Select *Purge 834 Work Files* [PEBWF130]. The system displays the Purge 834 Work Files screen shown in Figure 14-30.
-

```
7/10/03 09:18:08      Purge 834 Work Files      PRGPWF      PRDPWF

Employer . . . . .  _  *
Purge through date . _____

F3=Exit  F4=Prompt  F10=Access  F18=Message Line
```

Figure 14-30: Purge 834 Work Files screen

- 5 Use the information below to complete the fields on this screen.

Employer

Type the value that represents your employer

Purge through date

Specify the date through which the work files will be purged. Transmitted work files whose header effective date is on or before this date are purged.

- 6 Press Enter. The system purges the specified information and returns to the Infinium HR main menu.

Purging Functional Group Work Files

You can specify the date through which to purge the information.

To purge functional group work files, follow the steps below.

- 1 From the Infinium HR main menu select *System Operations*.
 - 2 Select *Personnel Purge Functions*.
-

- 3 Select *HIPAA 834 Work Files*.
- 4 Select *Purge Functional Groups* [PEBFG140]. The system displays the Purge Functional Groups screen shown in Figure 14-31.

```
7/10/03 09:20:35      Purge Functional Groups      PRGPFGW      PRDPFGW

Purge through date : _____

F3=Exit F10=Access F18=Message Line
```

Figure 14-31: Purge Functional Groups screen

- 5 Use the information below to complete the field on this screen.

Purge through date

Specify the date through which the functional groups will be purged. Functional groups whose effective date is on or before this date are purged. The effective date is the date the files were created when you used the *Create Work Files* function.

- 6 Press Enter. The system purges the specified information and returns to the Infinium HR main menu.

Notes

Chapter 15 Maintaining a HIPAA Audit Trail

15

This chapter discusses how to generate HIPAA audit trails, how to purge the audit trails, how to clear the audit trails, and the associated reports.

The chapter consists of the following topics:

Topic	Page
Overview	15-2
Generating HIPAA Audit Trail Reports	15-4
Purging the HIPAA Security Audit Trail	15-6
Saving Purged HIPAA Audit Files	15-8
Restoring Purged HIPAA Audit Files	15-10
Listing Purged HIPAA Audit Files	15-12
Clearing Purged HIPAA Audit Files	15-14

Overview

When you use Infinium HR and Infinium PY to process HIPAA information, the system records the 834 transaction information. The system also tracks information about access to employee personal health information (PHI) and records this audit information.

This chapter discusses the PHI audit functions you can use in Infinium HR. Through these audit functions, you can obtain required information about access to PHI records that includes the date, time, user, and workstation of the user who accesses the employee's personal health records. The system maintains the following files with personal health audit information:

- Safety and Health Master Audit, PEPOSA
- Safety and Health Incident Cost Audit, PEPOCA
- Employee Medical Examinations Audit, PEPMVA
- Personal Medical Claims Audit, PEPMCA

Use the *List HIPAA Security Audit Trail* function to generate reports that list information about access to both employee and non-employee personal health information. You can generate the following reports that include information from the audit files:

- Safety and Health Master Audit
- Safety and Health Incident Cost Audit
- Employee Medical Examinations Audit
- Employee Medical Claims Audit

Use the *Purge HIPAA Security Audit Trail* function to remove audit files based on a specified employer and date. When you use the *Purge HIPAA Security Audit Trail* function, the system moves the audit files to the purged audit files listed below, which you can retain online or move to a tape backup.

- Safety and Health Master Audit, PEPOSAT
- Safety and Health Incident Cost Audit, PEPOCAT
- Employee Medical Examinations Audit, PEPMVAT
- Personal Medical Claims Audit, PEPMCAT

You can specify that the system reorganize the audit files after it purges the audit records. This may take some time, depending on the number of records remaining in your audit files.

Use the *Save Purged HIPAA Audit Files* function to transfer information from the purged audit files to a backup tape.

Use the *Restore Purged HIPAA Audit Files* function to restore records from the audit files on your tape to the purged audit files on your iSeries.

Use the *List Purged HIPAA Audit Files* function to generate a report that shows the purged information.

Use the *Clear Purged HIPAA Audit Files* function to remove the audit files from your database.

Generating HIPAA Audit Trail Reports

Use the *List HIPAA Security Audit Trail* function to generate reports that list information about access to both employee and non-employee personal health information. The reports include the following information:

- Whether the record was only viewed, viewed and updated, added, or deleted
 - The dates the record was accessed
 - The number of times the record was accessed
 - The users who accessed the record
 - The workstation from which the record was accessed
 - Follow the steps below to generate the HIPAA audit reports.
- 1 From the Infinium Human Resources main menu select *System Operations*.
 - 2 Select *HIPAA Security Audit Functions*.
 - 3 Select *List HIPAA Security Audit Trail [LHSA]*. The system displays the screen shown in Figure 15-1.

```
2/11/05 10:17:46 List HIPAA Security Audit Trail PEGHP50 PEDHP50

Employer . . . .  ___ + (Blank for all)
Employee. . . .  _____ + (Blank for all) -or-
Non-employee. . . _____ + (Blank for all)
User Profile. . . _____ + (Blank for all)
Through Date. . . 00000000

F3=Exit F4=Prompt F10=Access
```

Figure 15-1: List HIPAA Security Audit Trail screen

- 4 Use the information below to complete the fields on this screen.

Employer

Specify the employer for which to print HIPAA security audit trail information. Leave this field blank to print the reports for all employers.

Employee

Specify the employee for which to print HIPAA security audit trail information. Leave this field blank to print the reports for all employees.

Non-employee

Specify the non-employee for which to print HIPAA security audit trail information. Leave this field blank to print the reports for all non-employees.

User Profile

Specify the user profile for the user for whom to print HIPAA security audit trail information. Leave this field blank to print the reports for all users.

Through Date

Specify the date through which to print the HIPAA security audit trail reports. Leave this field blank to print the reports through today's date.

- 5 Press Enter to generate the reports and return to the main menu.
-

Purging the HIPAA Security Audit Trail

You use the *Purge HIPAA Security Audit Trail* function to remove records from the following audit files:

- Safety and Health Master Audit, PEPOSA
- Safety and Health Incident Cost Audit, PEPOCA
- Employee Medical Examinations Audit, PEPMVA
- Personal Medical Claims Audit, PEPMCA

Follow the steps below to purge HIPAA audit trail information.

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *HIPAA Security Audit Functions*.
- 3 Select *Purge HIPAA Security Audit Trail* [PHSA]. The system displays the screen shown in Figure 15-2.

```
2/11/05 10:41:49   Purge HIPAA Security Audit Trail   PEGHP50   PEDHP50

Employer . . . .  _  + (Blank for all)
Through Date. . .  00000000
Reorganize Files?  0 (0=No 1=Yes)

F3=Exit  F4=Prompt  F10=Access
```

Figure 15-2: Purge HIPAA Security Audit Trail screen

- 4 Use the information below to complete the fields on this screen.

Employer

Specify the employer for which to purge HIPAA security audit trail information. Leave this field blank to purge for all employers.

Through Date

Specify the date through which to purge the HIPAA security audit trail information. Leave this field blank to purge through today's date.

Reorganize Files?

Specify no to prevent reorganization of the PEPMCA, PEPMVA, PEPOCA, and PEPOSA audit files after you purge them. Specify yes to reorganize the files after you purge them. When you reorganize the files, the system recovers disk space by removing the space the purged records occupy.

The system needs exclusive use of the audit files to reorganize them. Reorganize the files when no users are using Health Administration functions.

- 5 Press Enter to purge the HIPAA audit trail files and return to the main menu.
-

Saving Purged HIPAA Audit Files

You use the *Save Purged HIPAA Audit Files* function to transfer information from the purged audit files to a backup tape.

S2KOBJOWNR must have authority to IBM command SAVOBJ for you to use this function.

You use this function to transfer information from the purged files to a backup tape. You can also specify whether the system should clear the purged benefit enrollment history file after the data is transferred to tape.

Before you run this function, you must initialize enough tapes to hold all of the data in your files. Load one of the initialized tapes on the tape drive before you use this function.

Follow the steps below to save purged HIPAA audit files.

- 1 From the Infinium Human Resources main menu select *System Operations*.
 - 2 Select *HIPAA Security Audit Functions*.
 - 3 Select *Save Purged HIPAA Audit Files* [SHSA]. The system displays the screen shown in Figure 15-3.
-

```
2/11/05 10:55:00      Save Purged HIPAA Audit Files      PRGPHS      PRDPHS
-----
Device name . . . . . _____
Tape volume ID . . . _____
Clear after save? . . 0 (0-No, 1-Yes)

This function should not be run unless a sufficient number of tapes have
been initialized to contain the file(s) to be saved.

Note: S2K0BJ0WNR must have authority to IBM command SAV0BJ.

-----
F3=Exit F10=QuikAccess F18=Message line
```

Figure 15-3: Save Purged HIPAA Audit Files screen

- 4 Use the information below to complete the fields on this screen.

Device name

Type the name of the tape device where you are saving the audit trail information.

Tape volume ID

Type the volume identifier for the tape, if applicable. Leave this field blank to use the default value ***MOUNTED**.

Clear after save?

Specify yes to clear the purged file(s) after saving the files. Otherwise, specify no.

If you do not clear the files after you save them, you can use the menu options under the *Personnel Purge Functions* function to print the purged data.

- 5 Press Enter to save the audit files and exit to the main menu.

Restoring Purged HIPAA Audit Files

Use the *Restore Purged HIPAA Audit Files* function to restore from tape to disk the data in the purged HIPAA audit files, PEPOCAT, PEPOSAT, PEPMCAT, and PEPMVAT. If these files already contain data, the system adds the data on the tape to the data that already exists on disk.

You can restore the data for a specified date range for the dates when the data was accessed. The access date is the date a user viewed or updated an employee's private health information.

S2KOBJOWNR must have authority to IBM command **RSTOBJ** for you to use this function.

Follow the steps below to save purged HIPAA audit files.

From the Infinium Human Resources main menu select *System Operations*.

- 1 Select HIPAA Security Audit Functions.
- 2 Select *Restore Purged HIPAA Audit Files* [RHSA]. The system displays the screen shown in Figure 15-4.

```
2/11/05 11:56:09  Restore Purged HIPAA Audit Files  PRGPHS  PRDPHS
-----
Employer . . . . . __ +
Restore from date . . _____
Restore to date . . . _____
Device name . . . . . _____
Tape volume ID . . . _____

NOTE: S2KOBJOWNR must have authority to IBM command RSTOBJ.

-----
F3=Exit  F4=Prompt  F10=QuikAccess  F18=Message line
```

Figure 15-4: Restore Purged HIPAA Audit Files screen

- 3 Use the information below to complete the fields on this screen.

Employer

Specify the employer for which to restore purged HIPAA security audit trail files. Leave this field blank to restore purged files for all employers.

Restore from date

Specify the earliest date to use to restore purged HIPAA audit files from backup tape. The system compares this date to the date in the *Access Date* field in the purged HIPAA security audit trail files on your backup tape. The system restores from tape only records with an access date on or after this date. Leave this field blank to restore all HIPAA security audit trail records regardless of the access date.

Restore to date

Specify the latest date to use to restore purged HIPAA security audit trail information from your backup tape. The system compares this date to the date in the *Access Date* field in the purged HIPAA security audit trail files on your backup tape. The system restores from the tape only records with an access date that is the same as or before this date. Leave this field blank to restore all HIPAA security audit trail records regardless of the access date.

Device name

Type the device name.

Tape volume ID

Type the volume identifier for the tape, if applicable. Leave this field blank to use the default value ***MOUNTED**.

- 4 Press Enter to restore the purged audit files and return to the main menu.
-

Listing Purged HIPAA Audit Files

Follow the steps below to generate the HIPAA audit reports.

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *HIPAA Security Audit Functions*.
- 3 Select *List Purged HIPAA Audit Files [LPHA]*. The system displays the screen shown in Figure 15-5.

```
2/11/05 12:59:16      List Purged HIPAA Audit Files      PEGHP50      PEDHP50

Employer . . . .  ___ + (Blank for all)
Employee. . . .  _____ + (Blank for all) -or-
Non-employee. . .  _____ + (Blank for all)
User Profile. . .  _____ + (Blank for all)
Through Date. . .  00000000

F3=Exit  F4=Prompt  F10=Access
```

Figure 15-5: List Purged HIPAA Audit Files screen

Employer

Specify the employer for which to print purged HIPAA security audit trail information. Leave this field blank to print the reports for all employers.

Employee

Specify the employee for which to print purged HIPAA security audit trail information. Leave this field blank to print the reports for all employees.

Non-employee

Specify the non-employee for which to print purged HIPAA security audit trail information. Leave this field blank to print the reports for all non-employees.

User Profile

Specify the user profile for the user for whom to print purged HIPAA security audit trail information. Leave this field blank to print the reports for all users.

Through Date

Specify the date through which to print the purged HIPAA security audit trail reports. Leave this field blank to print the reports through today's date.

- 4 Press Enter to generate the reports and return to the main menu.
-

Clearing Purged HIPAA Audit Files

Use the *Clear HIPAA Security Audit Files* function to clear the data in the purged HIPAA security audit files, PEPOCAT, PEPOSAT, PEPMCAT, and PEPMVAT. Before you use this function, we recommend that you use the *Save Purged HIPAA Audit Files* function to save the files.

Follow the steps below to clear purged HIPAA audit files.

- 1 From the Infinium Human Resources main menu select *System Operations*.
- 2 Select *HIPAA Security Audit Functions*.
- 3 Select *Clear Purged HIPAA Audit Files* [CHSA]. The system displays the screen shown in Figure 15-6.



Figure 15-6: Clear Purged HIPAA Audit Files screen

- 4 Press Enter to remove the purged audit files from the database and return to the main menu.

This chapter discusses working with document attachments for benefit transactions.

The chapter consists of the following topics:

Topic	Page
Overview	16-2
Defining the Default Directory for Attachments	16-4
Working with Attachments	16-6

Overview

If you are working in the Web user interface of the application, you can both view and create attachments. If you are using Infor HCM Infinium Self Service (SHCM), you can also view attachments that originate there.

WARNING! If you attach a document to a benefit transaction and you use Infor Infinium HCM Self Service (SHCM) and the open enrollment or benefit change is created in SHCM, the self service originator associated with the employee and any other approvers in the workflow process can also view the document.

You can view and create attachments on the following screens in the Benefits Administration module:

- Update Employee Enrollment screen, which you access by selecting a benefit plan on the Update Employee Benefit Enrollments selection screen
- Update Benefit Enrollment benefit change transaction screen, which you access by pressing F13 on the Update Employee Enrollments screen
- Update Employee Enrollments history screen, which you display by pressing F8 on the Update Employee Enrollment screen and then selecting a specific plan to display
- Update COBRA Enrollments, which you access by selecting *COBRA Administration / Update COBRA Data / Update Enrollments*, entering the employer and employee, and then selecting the benefit record
- Display Employee Enrollments screen 1, which you display after you select a plan
- Display Employee Enrollments history, which you access by pressing F8 on the Display Employee Enrollments screen and then selecting an enrollment record to display

If you implement Infor HCM Infinium Self Service (SHCM), you can also view attachments that are attached to the following SHCM pages:

- Open Enrollments confirmation page
 - Benefit Change confirmation page
 - For My Approval and My Messages pages
 - Document Tracking page
-

Before you can view or create an attachment, you must specify the location of the directory where the attachments are stored.

if you use SHCM and you attach a document to an existing benefit enrollment and you do not make any other changes to the benefit enrollment other than attaching the document, the attachment is not available in Infinium HCM. To make the attachment available in Infinium HCM, you must use the *Update Benefit Enrollments* function in Infinium HCM and attach the document to the benefit enrollment.

WARNING! You are responsible for the validity and legality of any document that you attach to benefit transactions. Infor is not responsible for the validity and legality of the documents that you attach to benefit transactions.

Defining the Default Directory for Attachments

Before you work with attachments, you must:

- Change the IBM user profile of users who work with attachments
- Designate a default folder for the location of attachment files

Changing the IBM User Profile

Infinium PY uses HRDOCS as the group profile that represents the owner the folder where the benefit attachments are located. Only users for whom HRDOCS is their primary or one of their supplemental groups on their IBM profile can view benefit attachments created in Infinium HR.

You must sign on as a user with *SECADM authority to complete these steps. To change the IBM user profile:

- 1 Sign on as a user who has security administrator privileges.
 - 2 On the command line, type **CHGUSRPRF *user_profile***

where *user_profile* is the name of the IBM user profile to change.
 - 3 Press F4.
 - 4 Press F10 and page down twice.
 - 5 Place **HRDOCS** in the supplemental group.
 - 6 If the user already has more than two supplemental groups, type **+** in the second supplemental group.
 - 7 Press **Field Exit**.
 - 8 Press Enter. A new screen is displayed.
 - 9 Add the supplemental group.
 - 10 Press Enter after you add the supplemental group.
-

Creating the Default Attachment Directory

Complete the steps below to create the default attachment directory.

- 1 From the Infinium HR main menu select *Benefits Administration*.
- 2 Select *Update Benefit Data*.
- 3 Select *Update Attachment Directory* [ATTACHDIR]. The system displays a screen similar to Figure 16-1.

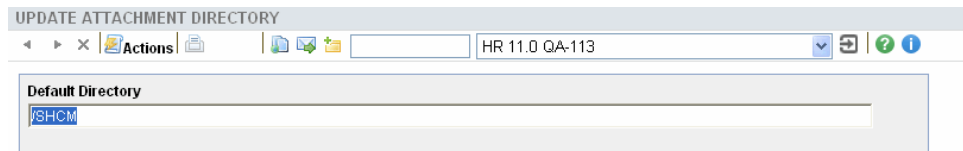


Figure 16-1: Update Attachment Directory screen

- 4 Use the information below to complete this screen.

Default Directory

Type the directory name where you want to store documents that you can attach to benefit transactions. The default value for this field is */SHCM*. You can type a different value in this field if you do not have Infor HCM Infinium Self Service or if you want to store attachments in a different directory.

- 5 Press F3 to exit and save.

Working with Attachments

If you are using the application on the Web, on certain screens you can both view the attachment information, launch the attachment, and create new attachments.

Complete the steps below to attach a file to the Update Employee Enrollments screen.

- 1 From the Infinium HR main menu select *Benefits Administration*.
 - 2 Select *Update Benefit Data*.
 - 3 Select *Update Employee Enrollments [UEEN]*. The system displays the Update Employee Enrollments prompt screen.
 - 4 Specify the employer and employee and press Enter. The system displays the second Update Employee Enrollments prompt screen.
 - 5 Specify the benefit group and plan year, if required, and press Enter. The system displays the Update Employee Enrollments selection screen.
 - 6 Select the enrollment record with which you want to work. The system displays the first Update Employee Enrollments screen for the selected record. The screen in Figure 16-2 is the Update Employee Enrollment screen for a life insurance plan.
-

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Employer: ZUS
 Benefit Identity: L01 PERPETUAL LIFE INSURANCE COMPANY
 Benefit Plan: EHS01 EILEEN'S LIFE TYPE 01 PLAN - EOI REQUI
 Employee: 80005 ACCURATE,ALAN D
 Plan Year: 2009 Status: (0->1)
 Hours to Date: .00 Eligibility Hrs:
 Income Group: Eligibility Date: 1012009
 Enrollment Date: 1012009
 Change Date:
 Change Reason: Cancelled Date:
 Waivered Date: Orig Enroll Date: 1/01/2009
 Declined Date:
 Contributions & Deductions
 EMPLOYEE AMOUNT: 2430.00 EMPLOYEE PERCENT:
 EMPLOYER AMOUNT: EMPLOYER PERCENT:
 Deduction Code: LI1W Deduction Basis: I
 Deduction Freq.: W Last EE Pay Freq.: B
 Coverage
 COVERAGE AMOUNT: 3510000.00 Freeze Coverage?: (0->3)
 Requested Cov.: 3510000.00 EOI Status: 0
 Date EOI Approv.: 00000000

Attachments

Figure 16-2: Update Benefit Enrollment screen

- 7 Click **Attachments**. The system displays the Work with Attachments window similar to Figure 16-3.

DIRECTORY

ATTACHMENTS

Existing Files

File Name	Type	File date	
test1	doc	Fri Mar 06 07:04:51 CST 2009	*EXCLUDE
Attachment_test	doc	Mon Mar 09 11:03:58 CDT 2009	*EXCLUDE
Attachment_test	txt	Mon Mar 09 11:05:29 CDT 2009	*EXCLUDE

Add

Figure 16-3: Work with Attachments window

On this window, you can:

- Add an attachment by clicking **Add**.
- Open an attachment by double clicking the attachment.
- Delete an attachment by selecting the attachment and then right-mouse clicking and selecting **Delete**.

- 8 Click **Add**. The system displays a window similar to Figure 16-4.

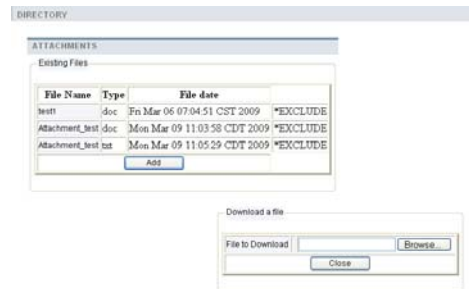


Figure 16-4: Work with Attachments window and Download a file window

- 9 Select the file to attach to this record.
- 10 Click **Close**.
- 11 Click **X** in the upper right corner of the screen to return to the Update Benefit Enrollment screen.
- 12 Click **Exit** to exit and save.

Chapter 17 Working with Miscellaneous Benefit Functions

17

This chapter discusses the setup requirements and the processing options for using the miscellaneous benefit functions supported by Infinium HCM.

The chapter consists of the following topics:

Topic	Page
Overview	17-2
Maintaining Benefit Plans	17-3
Using Miscellaneous Benefit Functions	17-6
Adding Misc. Benefit Functions to the Menu	17-26

Overview

Infinium HR provides functionality to assist customers with calculating and listing average hours for selected employees. This includes:

- Identifying which benefit plans are related to and/or covered by the average hours requirements.
 - Listing groups of employees and calculating their average hours over the specified length of time, to determine which employee should be considered full time or part time.
 - Displaying the average hours for individual employees over the specified length of time.
-

Maintaining Benefit Plans

To include specific medical types of plans on the listing for employee average hours, you must modify each plan that should be included on the average hour listings.

Updating Benefit Plans

You can indicate that a health type of benefit plan is related to average hours requirements by setting the *Avg. Hours Related* field to the applicable value.

You can access this field on the first page for the following types of plans:

- Medical (Type 03)
- Dental (Type 04)
- Dependent Life Insurance (Type 07)
- Vision (Type 11)
- Miscellaneous (Type 18)

To set up a health plan:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Update Benefit Data*.
 - 3 Select *Update Benefit Plans* [UIP]. The system displays the Update Benefit Plans prompt screen.
 - 4 Complete the employer and benefit plan information on the prompt page. Refer to the “Setting Up Flat Amount Savings Plans” section in the “Establishing Benefit Plans” chapter for detailed information about the fields on this page.
 - 5 Press Enter. The system displays the Update Medical Insurance Plans plan controls page shown below.
-

Figure 17-1: Update Medical Insurance Plans plan controls page

- 6 Use the information below to complete the fields on this page.

Avg Hours Related

Use this field to indicate that the plan is related to an average hours requirement. Employee enrollments in plans assigned a value of 1 or 2 are included on the Average Hours-Standard and Average Hours-New Hires reports.

Valid values are:

- 0 This plan is not related to the average hours calculations.
 - 1 This plan is related to standard average hours requirements.
 - 2 This plan is related to grandfathered average hours requirements.
- 7 Complete the Plan Controls fields on this page as you normally would. Refer to the “Setting Up Health Plans” section in the “Establishing Benefit Plans” chapter for detailed information about the other fields on this page.
- 8 Press Enter. The system displays the Update Medical Insurance Plans premiums, contributions, and deductions page. Refer to the “Setting Up Health Plans” section in the “Establishing Benefit Plans” chapter for detailed information about the other fields on this page.

Use the *Display Benefit Plans* function to review the changes you made to the benefit plan information online.

Use the *List Benefit Plans* function to print a report that includes benefit plan specifications for the plans you changed. You can generate a summary report that includes only the benefit ID, the plan name and description, the effective date, and the status code for each plan, or you can generate a detailed report with complete information about the benefit plans. You can run the report for all employers or a specified employer. If you select an employer, you can also specify a benefit identity or benefit group for the report.

Using Miscellaneous Benefit Functions

If this is the first time you are using processing for the *Misc. Benefit Functions* and the functions are not on your menu, see the “Adding Misc. Benefit Functions Menu Options” section in this chapter to add these menu options to your menu.

Use these functions to complete tasks to list or display employee average hours to determine if they qualify as full-time or part-time employees.

- *List Average Hours-Standard*

Use this function to generate a report containing information for “ongoing” employees who have been employed during the entire standard measurement period. You can specify the various calculation and employee selection criteria to do calculations that indicate whether an employee is considered full time or part time.

- *List Average Hours-New Hires*

Use this function to generate a report containing information for employees who were hired or rehired during the standard measurement period. This allows flexibility when the date range is measured and the other calculation values are different for these employees when compared with ongoing employees. You can specify the various calculation and employee selection criteria to do calculations that indicate whether an employee is considered full time or part time.

You can also use the *List Average Hours-Standard* and *List Average Hours-New Hires* functions to update the full time/part time status in the 1995-C Work File if you use the look-back measurement method to determine full time/part time status for your employees.

- *Display Employee Average Hours*

Use this function to look at hours for a specific date range for a single employee. This is useful for looking at hours for newly hired employees but can be used for any employee.

- *Employee Topic List*

The *Employee Average Hours* option is included on the list of available options within the *Employee Topic List* function. From this option, you can access the calculation page of the *Display Employee Average Hours* function. Users with the *CTL value for the *Topic List Group* field on the Restrictions page of their user security record can automatically see this

option. You must manually add this option to the applicable user-defined Topic List Groups or user-specific Topic List authorizations.

List Average Hours-Standard

Use the *List Average Hours-Standard* function to generate a report containing information for “ongoing” employees who have been employed during the entire standard measurement period.

You specify the following information for the report:

- Information that the system uses to do the calculations that determine whether an employee is considered full time or part time.
- Benefit plan year information so that the system includes benefit eligibility and enrollment information for your average hour-related plans on the listing.
- Selection criteria that the system uses to determine which employees are included on the report, if the calculation of full-time status is different for different groups of employees.
- If you use the look-back measurement method to determine the full time/part time status for your employees, the starting and ending month and year that represent your stability period.

You can run the listing multiple times during the year to get an idea of full-time employees who are eligible for benefit enrollments and a snapshot of their enrollment status.

For example, you can run the listing in the fall to help determine which employees qualify as full-time employees for an upcoming open enrollment period, and you can run the listing again at the beginning of the new year to get an idea of which employees have or have not enrolled in average hour related benefits.

To run the listing of average hours for a standard measurement period:

- 1 From the Infinium HR main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *List Average Hours-Standard* [LAHS]. The system displays the List Average Hours-Standard page similar to the page below.
-

```

7/07/21 13:34:58 List Average Hours-Standard PRGAC50 PRDAC50
-----
Employer . . . . . ___ + Update 1095-C Work File? @ (0=No 1=Yes)
Measure From Period End. _____ Stability Start Month/Yr __ __
Measure To Period End . _____ Stability End Month/Yr . __ __
Measured Period Weeks . ___ Full Time Weekly Hours . 30.00
Full Time Hours Based On 3 (1=Actual Average 2=Scheduled 3=Actual or Scheduled)
Calculate Average Hours. 1 (1=Measured Period Weeks 2=Actual Weeks Worked)
Average Hours IRG . . . . . ___ + Include Benefit Plans . _____ +
Benefit Plan Year . . . . . ___ + Include Canceled Plans . 1 (0=No 1=Yes)
Employee Sort Order . . . 1 (1=Number 2=Name)
Employee Selection Criteria:
Include Pay Type S . . . . 1 (0=No 1=Yes) Include New Hires . . . . @ (0=No 1=Yes)
Include Pay Type N . . . . 1 (0=No 1=Yes) Include Terminated . . . @ (0=No 1=Yes)
Include Pay Type H . . . . 1 (0=No 1=Yes) Include Seasonal . . . . 1 (0=No 1=Yes)
Union Code . . . . . _____ + @ (0=N/A 1=Include 2=Exclude)
Current Payroll State . ___ + @ (0=N/A 1=Include 2=Exclude)
Status Reporting Group . _____ + @ (0=N/A 1=Include 2=Exclude)
-or-
Custom Select Program . _____
Custom Select Values . . _____

F3=Exit F4=Prompt F10=QuikAccess

```

Figure 17-2: List Average Hours-Standard submission page

4 Use the information below to complete the fields on this page.

Employer

Specify the employer whose data you are listing.

Measure From Period End

Specify the first period ending date of your standard measurement period.

The system retrieves employee hours from payroll history where the pay period ending date for the check is on or after the *Measure From Period End* date and on or before the *Measure To Period End* date.

Measure To Period End

Specify the last period ending date of your standard measurement period.

The system retrieves employee hours from payroll history where the pay period ending date for the check is on or after the *Measure From Period End* date and on or before the *Measure To Period End* date.

Measure Period Weeks

Specify the number of weeks covered by the measured date range when you calculate the average weekly hours for a standard number of weeks.

Leave this field blank when you calculate the average weekly hours based on the actual number of weeks recorded for each employee in payroll history for the selected date range.

For example: If the measurement period covers a year, you can enter 52 weeks, and if the measurement period covers 3 months, you can enter 13 weeks. If the measurement period covers other time periods, enter the number of weeks that match the pay period dates that you entered. The system calculates the employee average hours by dividing the total hours for the measured period by the applicable weeks.

Update 1095-C Work File?

If you are using the Look Back Measurement method, specify if you want to update the full time/part time indicator in the 1095-C Work File with the results. If you type **1** or **yes** in this field, you must also specify the starting and ending month and year that represent the stability period in the *Stability Start Month/Yr* and *Stability End Month/Yr* fields.

Valid values are:

- 0** Do not update the 1095-C Work File.
- 1** Update the 1095-C Work File. The system determines if an employee averaged full-time or part-time hours during the Measurement Period you selected and updates the full-time/part-time field, CWTYPE, in the 1095-C Work File PRP,1095CWK, with the results.

Note: If you select to update the 1095-C Work File, you must run the *Create 1095-C Work File* function beforehand.

Stability Start Month/Yr

If you choose to update the 1095-C Work File, type the starting month and year that represent your stability period.

Stability End Month/Yr

If you choose to update the 1095-C Work File, type the ending month and year that represent your stability period.

Full Time Weekly Hours

Specify the number of average weekly hours used to classify an employee as full time.

Full Time Hours Based On

Specify which hours are used to determine if an employee is full time or part time. Valid values are:

- 1 Actual average weekly hours from payroll history only
- 2 Scheduled weekly hours from employee basic data only
- 3 Either actual average hours or scheduled weekly hours

Calculate Average Hours

Specify which number of weeks is used to calculate the employee average hours. Valid values are:

- 1 Measured period weeks entered on this page
- 2 Actual weeks worked recorded in payroll history for the selected dates

Note: When you select 2, the system ignores the value in the *Measured Weeks* field and uses the actual weeks worked value for each employee during the measured period when calculating their average hours.

Average Hours IRG

Specify the income reporting group that identifies the income types with hours that are valid for calculating the average weekly hours.

Leave this field blank to retrieve hours from all income types.

Note: The system always excludes hours that are classified as "residual," that is, incomes that are marked with R in the *Residual Hours* field.

Include Benefit Plans

Use this field to indicate which plans are listed on the part 2 and 3 reports.

- Leave this field blank to list only the benefit plans that have an average hours related value of 1 (standard) or 2 (grandfathered).
- Type ***ALL** to list all benefit plans.
- Type a benefit group code to list only the benefit plans that are assigned to that benefit group.

Note: This field is not used to select employees to include on the report. This field is used to indicate which plans are listed for the employees who match your other selection criteria.

Benefit Plan Year

Specify the benefit plan year that the system uses to list existing enrollments, if your employer uses benefit plan year processing.

Leave this field blank if your employer does not use plan year processing.

The system prints employee benefit enrollment information for plans that have a value of 1 or 2 in the *Avg Hours Related* field on the Benefit Plan control.

Include Canceled Plans

Specify whether benefit enrollments that are canceled are included on the report. Valid values are:

- 0 No. Do not include canceled enrollments.
- 1 Yes. Include canceled enrollments.

Employee Sort Order

Specify the sort order for employees included on the report. Valid values are:

- 1 Employee Number
- 2 Name

Employee Selection Criteria

This section allows you to limit the employees on the listing based on certain employee-specific criteria.

Include Pay Type S

Specify whether employees with a pay type of S (Salaried, exempt) are included on the report. Valid values are:

- 0 No. Do not include employees with pay type S.
- 1 Yes. Include employees with pay type S.

Include Pay Type N

Specify whether employees with a pay type of N (Salaried, non-exempt) are included on the report. Valid values are:

- 0 No. Do not include employees with pay type N.
-

- 1** Yes. Include employees with pay type N.

Include Pay Type H

Specify whether employees with a pay type of H (Hourly) are included on the report. Valid values are:

- 0** No. Do not include employees with pay type H.
- 1** Yes, Include employees with pay type H.

Include New Hires

Specify whether newly hired employees are included on the report when their original hire date is on or after the start of the measurement period. Valid values are:

- 0** No. Do not include new hire employees.
- 1** Yes. Include new hire employees.

Include Terminated

Specify whether terminated employees are included on the report when their termination date is on or after the start of the measurement period. Employees who terminated before the start of the measurement period are always excluded. Valid values are:

- 0** No. Do not include terminated employees.
- 1** Yes. Include terminated employees.

Include Seasonal

Specify whether employees with a non-blank season code on their personnel master are included on the report. Valid values are:

- 0** No. Do not include seasonal employees.
- 1** Yes. Include seasonal employees.

Union Code

Specify the union code used to identify employees and specify a code in the associated flag field to include or exclude employees for the report.

The system compares the value with the *Union Code* value on the employee basic data record and includes or excludes according to the flag.

Leave this field blank to perform a comparison for employees with blanks for the union code and specify a value in the associated flag to control selection.

- 0** (N/A) to include all employees.
- 1** (Include) to include all employees with a matching union code.
- 2** (Exclude) to exclude all employees with a matching union code.

If you specify blanks in the associated *Union Code* field, you can include or exclude all employees with blanks in the *Union Code* field.

Current Payroll State

Specify the state code used to identify employees and specify a code in the associated flag field to include or exclude employees for the report.

The system compares the value with the *Current State* value on the employee payroll master record and includes or excludes according to the flag.

Leave this field blank to include all employees.

Status Reporting Group

Specify a status reporting group code to identify employees and specify a code in the associated flag field to include or exclude employees for the report.

The system compares the value with the *Status Code* value on the employee basic data record and includes or excludes employees according to the flag.

Custom Select Program

Type the name of a custom program to control the selection of employees for the report. The system calls the custom program instead of doing comparisons using the standard employee selection criteria.

A sample custom program named PRGACAEX1 is provided in the system as a model for your custom programs. You can copy this program and make your own changes and then use your own program in this field. When called, the custom program is passed the task coupling key, the *Custom Values* field, the employer, and the employee number. The custom program must return a yes/no value to indicate whether the employee is selected for the report.

Note: This is only a template program. You are responsible for maintaining the actual logic within the custom program that you use.

Custom Select Values

Type any custom values that are needed for your *Custom Select Program*, if applicable.

When the system calls the custom program, it passes the custom selection values so that they can be used by your custom selection routines.

5 Press Enter.

List Average Hours-New Hires

Use the *List Average Hours-New Hires* function to generate a report containing information for employees who are hired or rehired during the standard measurement period, to allow flexibility when the date range measured and the other calculation values are different for these employees when compared with ongoing employees.

You specify the following information for the report:

- Information that the system uses to do the calculations that determine whether an employee is considered full time or part time.
- Benefit plan year information so that the system can include benefit eligibility and enrollment information for your average hour related plans on the listing.
- Selection criteria that the system uses to determine which employees are included on the report, if the calculation of full-time status is different for different groups of employees.
- If you use the look-back measurement method to determine the full time/part time status for your employees, the starting and ending month and year that represent your stability period.

You can run the listing any time during the year to get an idea of full-time employees who are eligible for benefit enrollments and a snapshot of their enrollment status.

To run the listing of average hours during an initial measurement period for newly hired or rehired employees:

- 1 From the Infinium HR main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
-

- 3 Select *List Average Hours-New Hires* [LAHNNH]. The system displays the List Average Hours-New Hires page similar to the page below.

```

7/07/21  14:13:46  List Average Hours-New Hires  PRGAC50  PRDAC50
-----
Employer . . . . .  __ +          Update 1095-C Work File? 0 (0=No 1=Yes)
                                           Stability Start Month/Yr  __ __
Measure From Period End.  _____  Stability End Month/Yr .  __ __
Measure To Period End .  _____  -or- Measure Months From Hire  __
Measured Period Weeks .  __
Full Time Hours Based On 3 (1=Actual Average 2=Scheduled 3=Actual or Scheduled)
Calculate Average Hours. 1 (1=Measured Period Weeks 2=Actual Weeks Worked)
Average Hours IRG . . .  __ +          Hire Date Based On . . . 3 (1->5)
Benefit Plan Year . . .  __ +          Full Time Weekly Hours . 30.00
Employee Sort Order . . 1 (1, 2)      Include Benefit Plans .  _____ +
                                           Include Canceled Plans . 1 (0=No 1=Yes)

Employee Selection Criteria:
Include Pay Type S . . . 1 (0=No 1=Yes)  Include Pay Type N . . . 1 (0=No 1=Yes)
Include Pay Type H . . . 1 (0=No 1=Yes)  Employees Hired From . .  _____
Union Code . . . . .  __ + 0          Employees Hired To . . .  _____
Current Payroll State .  __ + 0        Include Terminated . . . 0 (0=No 1=Yes)
Status Reporting Group .  __ + 0        Include Seasonal . . . . 1 (0=No 1=Yes)
-or-
Custom Select Program .  _____
Custom Select Values . .  _____
F3=Exit  F4=Prompt  F10=QuikAccess

```

Figure 17-3: List Average Hours-New Hires submission page

- 4 Use the information below to complete the fields on this page.

Employer

Specify the employer whose data you are listing.

Measure From Period End

Specify the first period ending date of the specific new hire measurement period.

The system retrieves employee hours from payroll history where the period ending date for the check is on or after the *Measure From Period End* date and on or before the *Measure To Period End* date.

You can enter a specific measurement range or a specific number of months from the date of hire, but not both.

Measure To Period End

Specify the last period ending date of the specific new hire measurement period.

The system retrieves employee hours from payroll history where the period ending date for the check is on or after the *Measure From Period End* date and on or before the *Measure To Period End* date.

You can enter a specific measurement range or a specific number of months from the date of hire, but not both.

Update 1095-C Work File?

If you are using the Look Back Measurement method, specify if you want to update the full time/part time indicator in the 1095-C Work File with the results. If you type **1** or **yes** in this field, you must also specify the starting and ending month and year that represent the stability period in the *Stability Start Month/Yr* and *Stability End Month/Yr* fields.

Valid values are:

- | | |
|----------|--|
| 0 | Do not update the 1095-C Work File. |
| 1 | Update the 1095-C Work File. The system determines if an employee averaged full-time or part-time hours during the Measurement Period you selected and updates the full-time/part-time field, CWTYPE, in the 1095-C Work File PRP,1095CWK, with the results. |

Note: If you select to update the 1095-C Work File, you must run the *Create 1095-C Work File* function beforehand.

Stability Start Month/Yr

If you choose to update the 1095-C Work File, type the starting month and year that represent your stability period.

Stability End Month/Yr

If you choose to update the 1095-C Work File, type the ending month and year that represent your stability period.

Measure Months From Hire

Specify the number of months that are used to determine the initial measurement period for an employee who is treated as a new hire.

The system uses the applicable hire date as the "measure from" date, then adds the designated number of months to calculate the applicable "measure to" date. The system then retrieves employee hours from payroll history where the period ending date for the check is on or after the applicable hire date and on or before the calculated "measure to" date.

You can enter a specific measurement range or a specific number of months from the date of hire, but not both.

Use the *Hire Date Based On* field to indicate which date to use as the hire date.

Hire Date Based On

Specify which date to use as the applicable hire date. Valid values are:

- 1 Use the original hire date only.
- 2 Use the adjusted hire date, if specified; otherwise use the original hire date.
- 3 Use the rehire date, if specified, then the adjusted hire date, if specified; otherwise use the original hire date.
- 4 Use the rehire date, if specified; otherwise use the original hire date.
- 5 Use the rehire date only. If the rehire date is empty, omit the employee from the report.

Measure Period Weeks

Specify the number of weeks covered by the measured date range when you calculate the average weekly hours for a standard number of weeks.

Leave this field blank when you calculate the average weekly hours based on the actual number of weeks recorded for each employee in payroll history for the selected date range.

For example: If the measurement period covers a year, you can enter 52 weeks, and if the measurement period covers 3 months, you can enter 13 weeks. If the measurement period covers other time periods, enter the number of weeks that match the pay period dates that you entered. The system calculates the employee average hours by dividing the total hours for the measured period by the applicable weeks.

Full Time Weekly Hours

Specify the number of average weekly hours used to classify an employee as full time.

Full Time Hours Based On

Specify which hours are used to determine if an employee is full time or part time. Valid values are:

- 1 Actual average weekly hours from payroll history only
- 2 Scheduled weekly hours from employee basic data only
- 3 Either actual average hours or scheduled weekly hours

Calculate Average Hours

Specify which number of weeks is used to calculate the employee average hours. Valid values are:

- 1 Measured period weeks entered on this page
- 2 Actual weeks worked recorded in payroll history for the selected dates

Note: When you select a value of **2**, the system ignores the value in the *Measured Weeks* field and uses the actual weeks worked value for each employee during the measured period when calculating their average hours.

Average Hours IRG

Specify the income reporting group that identifies the income types with hours that are valid for calculating the average weekly hours.

Leave this field blank to retrieve hours from all income types.

Note: The system always excludes hours that are classified as "residual", that is, incomes that are marked with **R** in the *Residual Hours* field.

Include Benefit Plans

Use this field to indicate which plans are listed on the part 2 and 3 reports.

- Leave this field blank to list only the benefit plans that have an average hours related value of **1** (standard) or **2** (grandfathered).
- Type ***ALL** to list all benefit plans.
- Type a benefit group code to list only the benefit plans that are assigned to that benefit group.

Note: This field is not used to select employees to include on the report. This field is used to indicate which plans are listed for the employees who match your other selection criteria.

Benefit Plan Year

Specify the benefit plan year that the system uses to list existing enrollments if your employer uses benefit plan year processing.

Leave this field blank if your employer does not use plan year processing.

The system prints employee benefit enrollment information for plans that have a value of **1** or **2** in the *Avg Hours Related* field on the Benefit Plan control.

Include Canceled Plans

Specify whether benefit enrollments that are canceled are included on the report. Valid values are:

- 0** No. Do not include canceled enrollments.
- 1** Yes. Include canceled enrollments.

Employee Sort Order

Specify the sort order for employees included on the report. Valid values are:

- 1** Employee Number
- 2** Name

Employee Selection Criteria

This section allows you to limit the employees on the listing based on certain employee specific criteria.

Employees Hired From

Specify the beginning date used to select employees.

The report lists employees where the applicable hire date is on or after the *Employees Hired From* date and on or before the *Employees Hired To* date.

Use the *Hire Date Based On* field to indicate which date is used as the applicable hire date: original hire date, adjusted hire date, or rehire date.

Employees Hired To

Specify the ending date used to select employees.

The report lists employees where the applicable hire date is on or after the *Employees Hired From* date and on or before the *Employees Hired To* date.

Use the *Hire Date Based On* field to indicate which date is used as the applicable hire date: original hire date, adjusted hire date, or rehire date.

Include Pay Type S

Indicate whether employees with a pay type of S (Salaried, exempt) are included on the report. Valid values are:

- 0** No. Do not include employees with pay type S.
- 1** Yes. Include employees with pay type S.

Include Pay Type N

Specify whether employees with a pay type of N (Salaried, non-exempt) are included on the report. Valid values are:

- 0** No. Do not include employees with pay type N.
- 1** Yes. Include employees with pay type N.

Include Pay Type H

Specify whether employees with a pay type of H (Hourly) are included on the report. Valid values are:

- 0** No. Do not include employees with pay type H.
- 1** Yes. Include employees with pay type H.

Include Terminated

Specify whether terminated employees are included on the report when their termination date is on or after the start of the measurement period. Employees who terminated before the start of the measurement period are always excluded. Valid values are:

- 0** No. Do not include terminated employees.
- 1** Yes. Include terminated employees.

Include Seasonal

Specify whether employees with a non-blank season code on their personnel master are included on the report. Valid values are:

- 0** No. Do not include seasonal employees.
 - 1** Yes. Include seasonal employees.
-

Union Code

Specify the union code used to identify employees and specify a code in the associated flag field to include or exclude employees for the report.

The system compares the value with the *Union Code* value on the employee basic data record and includes or excludes according to the flag.

Leave this field blank to perform a comparison for employees with blanks for the union code and specify a value in the associated flag to control selection.

- 0** (N/A) to include all employees.
- 1** (Include) to include all employees with a matching union code.
- 2** (Exclude) to exclude all employees with a matching union code.

If you specify blanks in the associated *Union Code* field, you can include or exclude all employees with blanks in the *Union Code* field.

Current Payroll State

Specify the state code used to identify employees and specify a code in the associated flag field to include or exclude employees for the report.

The system compares the value with the *Current State* value on the employee payroll master record and includes or excludes according to the flag.

Leave this field blank to include all employees.

Status Reporting Group

Specify a status reporting group code to identify employees and specify a code in the associated flag field to include or exclude employees for the report.

The system compares the value with the *Status Code* value on the employee basic data record and includes or excludes employees according to the flag.

Custom Select Program

Type the name of a custom program to control the selection of employees for the report. The system calls the custom program instead of doing comparisons using the standard employee selection criteria.

A sample custom program named PRGACAEX1 is provided in the system as a model for your custom programs. You can copy this program and make your own changes and then use your own program in this field. When called, the custom program is passed the task coupling key, the *Custom Select Values* field, the employer and the employee number. The custom program must return a yes/no value to indicate whether the employee is selected for the report.

Note: This is only a template program. You are responsible for maintaining the actual logic within the custom program that you use.

Custom Select Values

Type any custom values that are needed for your *Custom Select Program*, if applicable.

When the system calls the custom program, it passes the custom selection values so that they can be used by your custom selection routines.

- 5 Press Enter.

Display Employee Average Hours

Use the *Display Employee Average Hours* function to view average hours information for individual employees.

You can use the average hours information to help determine whether an employee is considered full time or part time.

You can also press a function key to call the standard *Display Benefit Enrollments* program and view details for benefit information.

To use the display listing of average hours:

- 1 From the Infinium HR main menu select *Benefit Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Display Employee Average Hours* [DEAH]. The system displays the employee selection page similar to the page shown below.
-

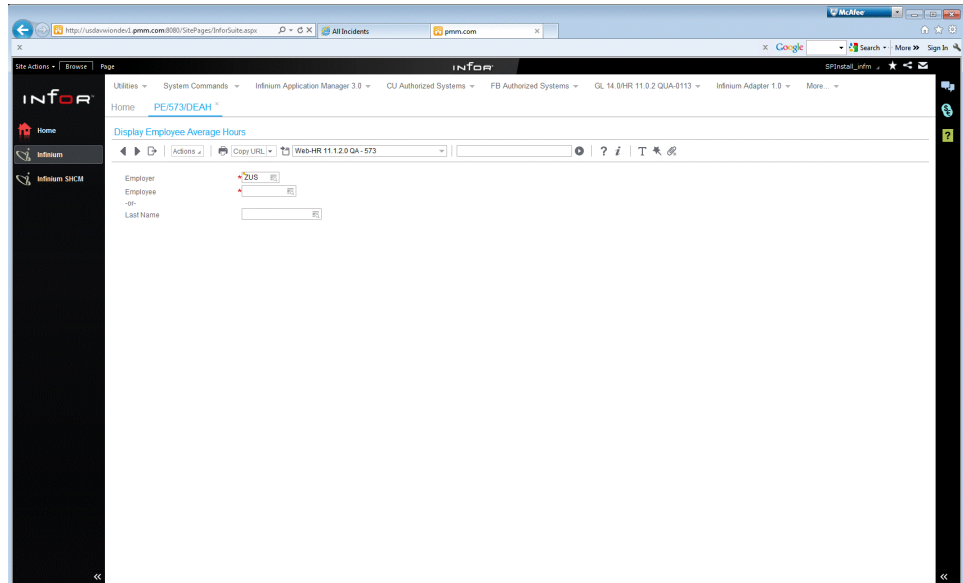


Figure 17-4: Display Employee Average Hours selection page

- 4 Use the information below to complete the fields on this page.

Employer

Specify the employer whose data you are viewing.

Employee

Specify an employee number.

Last Name

Specify the employee's last name or any beginning letters of the name so that you can view and select from a list of employees.

- 5 Press Enter. The system displays the employee detail calculation page similar to the page shown below.

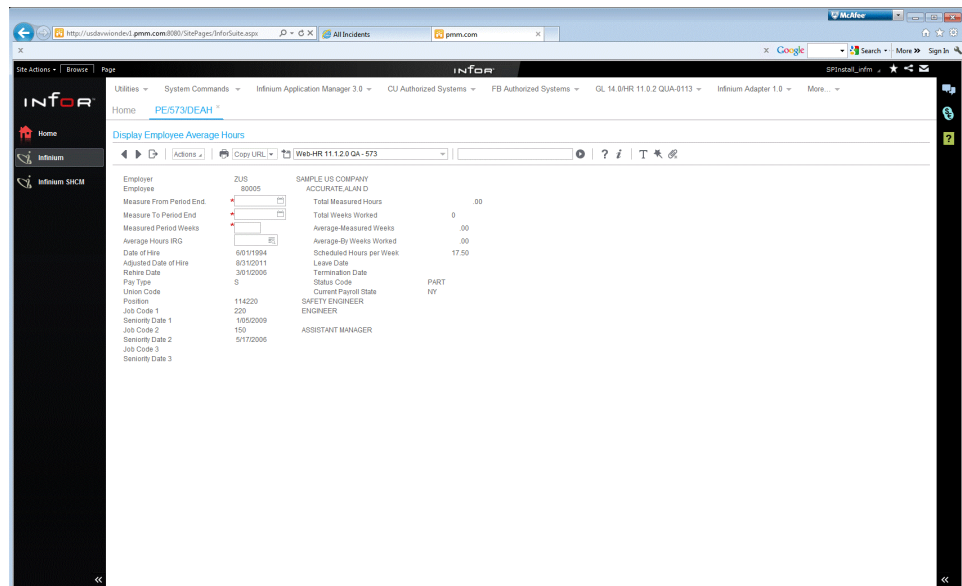


Figure 17-5: Display Employee Average Hours detail calculation page

- 6 Use the information below to complete the fields on this page.

Measure From Period End

Specify the first period ending date of the measurement period.

The system retrieves employee hours from payroll history where the period ending date for the check is on or after the *Measure From Period End* date and on or before the *Measure To Period End* date.

Measure To Period End

Specify the final period ending date of the measurement period.

The system retrieves employee hours from payroll history where the period ending date for the check is on or after the *Measure From Period End* date and on or before the *Measure To Period End* date.

Measured Period Weeks

Specify the standard number of weeks covered by the measured date range.

Average Hours IRG

Specify the income reporting group that identifies the income types with hours that are valid for calculating the average weekly hours.

Leave this field blank to retrieve hours from all income types.

Note: The system always excludes hours that are classified as "residual", that is, incomes that are marked with **R** in the *Residual Hours* field.

- 7 Press Enter. The system calculates employee average hours for the measured pay period range.
- 8 Press F7 to display employee benefit information. The system displays the Display Employee Enrollments page. Refer to the "Displaying Employee Enrollment History" section in the "Enrolling Employees in Benefit Plans" chapter for detailed information about the fields on this page.

Employee Topic List

The *Employee Average Hours* option is a standard option within function *Employee Topic List*.

When you select an employee and select this option, the calculation page of the *Display Employee Average Hours* function is displayed.

Refer to the "Using the Employee Topic List" section in the "Displaying Employee Information" chapter in the *Human Resources Guide to Processing* for more information on using the *Employee Topic List* function.

Users with the value ***CTL** for *Topic List Group* field on the Restrictions page of their user security record automatically see this option.

You must manually add this option to the applicable user-defined Topic List Groups or user-specific Topic List authorizations

Refer to the "Working with User Security Options" section in the "Using System Operations Functions" chapter in the *Human Resources Guide to Management Function*, for more information on adding a new option to a specific user or a user-defined Topic List Group.

Adding Misc. Benefit Functions to the Menu

The functions supporting the Misc. Benefit Functions processing are:

Menu option/Function	Job control
<i>Misc. Benefit Functions</i>	ACAOPER
<i>List Average Hours-Standard</i>	ACALST1
<i>List Average Hours-New Hires</i>	ACALST2
<i>Display Employee Average Hours</i>	ACADSP1

If these functions are not already on your menus, complete these steps to add them to the Infinium PE system and version menus.

- 1 Sign on to AM2000. Use the **AM2000** user ID.
 - 2 Select *Systems and Versions* from the Infinium Application Manager main menu. The system displays the first System Version Maintenance page.
 - 3 Type **5** in the *Opt* field next to PE and press Enter. The system displays the System Definition Maintenance page.
 - 4 To add these menu options to the PE System menu, press F11.
 - 5 To add these menu options to a PE version menu, press F7 to display a list of versions and type **8** in the *Opt* field next to the required version. The system displays the Menu Control Maintenance page.
 - 6 Type **5** in the *Opt* field next to the menu line for *Benefits Administration* and press Enter.
 - 7 On the top line, type **ACAOPER** in the Job Name column and press Enter. This adds the *Misc. Benefit Functions* menu option to the end of the *Benefits Administration* menu.
 - 8 Type **5** in the *Opt* field next to the menu line for ** Misc. Benefit Functions* and press Enter.
 - 9 On the top line, type **ACALST1** in the Job Name column and press Enter.
-

This adds the *List Average Hours-Standard* function to the * *Misc. Benefit Functions* menu. Repeat this step for each of the remaining job controls listed above.

Notes

Chapter 18 Tracking and Filing Affordable Care Act Related Data

18

This chapter discusses tracking and filing Affordable Care Act (ACA)-related information, such as coverage offer and safe harbor codes, for 1094-C and 1095-C reporting beginning in 2016 for the 2015 tax year and beyond.

Note: This information is based on publications issued by the IRS and is subject to change. For additional information on tracking information for the Affordable Care Act, see Infor knowledge base (KB) article 1617848 on the [Infor Support Portal](#).

The chapter consists of the following topics:

Topic	Page
Tracking ACA Data	18-2
Filing ACA Data	18-53
Updating the ACA software ID	18-102
Adding Misc. Benefit Functions to the Infinium PE menu	18-105
Adding Printer Controls	18-107

Tracking ACA Data

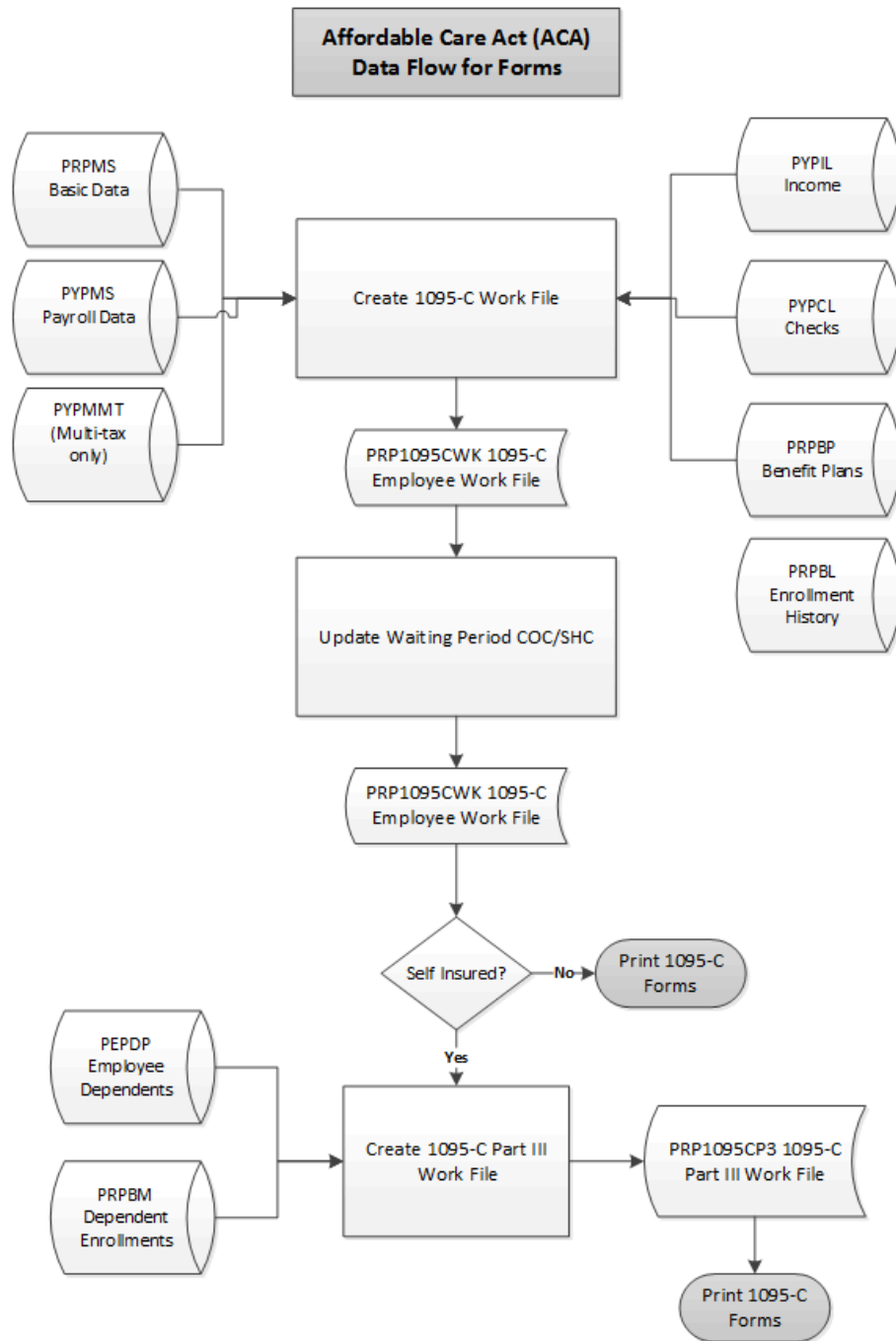


Figure 18-1: ACA Information for data

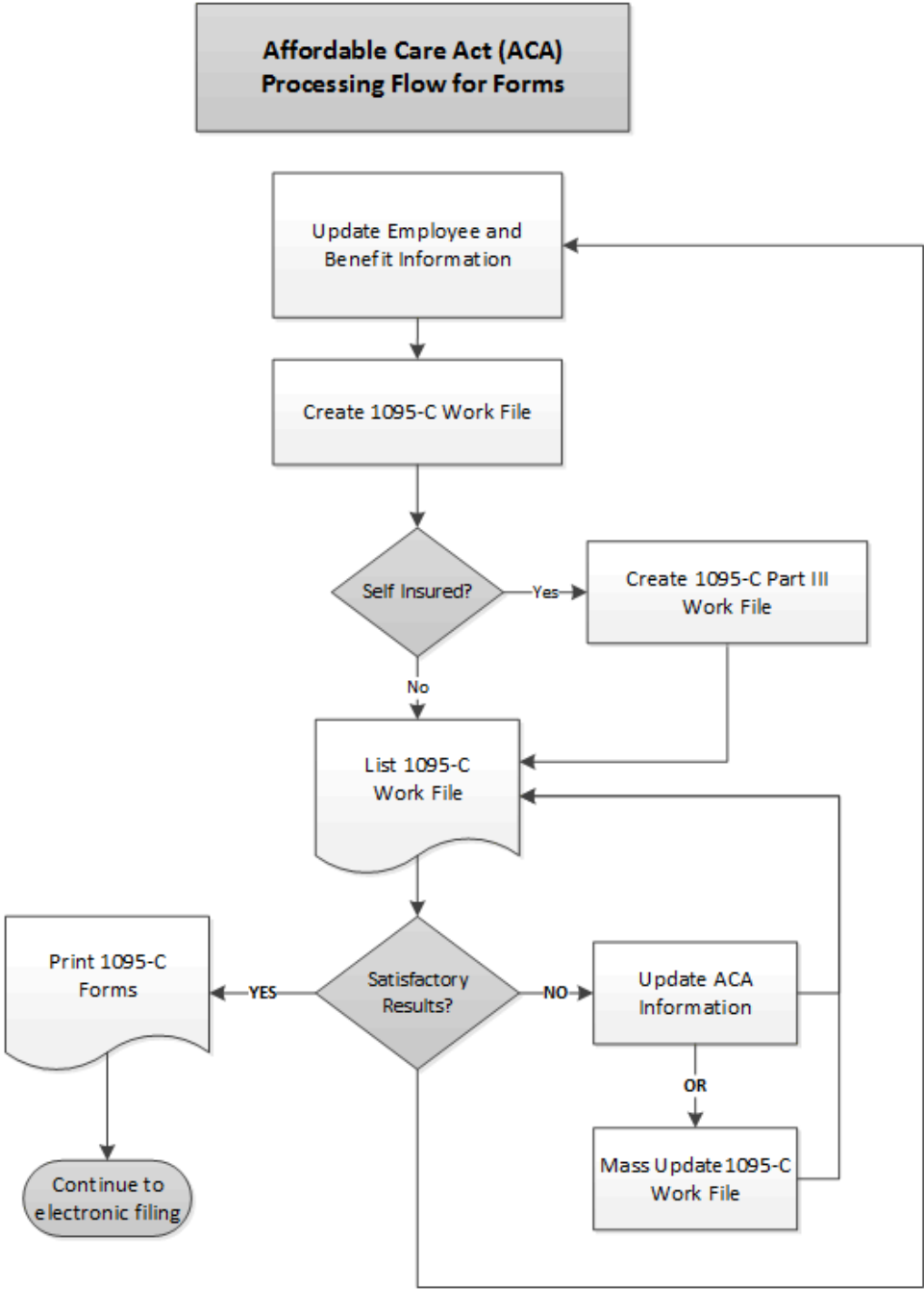


Figure 18-2: ACA Information for processing forms

ACA Tracking Functions

Function	Description
<i>Create 1095-C Work File</i>	<ul style="list-style-type: none"> ■ Adds/replaces records for the 1095-C Employee Work File, PRP1095CWK, for the selected calendar year and months ■ Retrieves data from payroll files (PYPCL, PYPIL) to populate the <i>Full/Part Time</i>, <i>Avg. Weekly Hrs</i>, and <i>Total Monthly Hrs</i> fields in the file ■ Retrieves data from benefit enrollment files (PRPBP, PRPBL) to populate <i>Coverage Offer</i>, <i>Safe Harbor Code</i>, <i>Plan Year</i>, <i>Benefit ID</i>, <i>Benefit Plan</i>, and <i>Monthly Cost</i> fields ■ Can be run for one month or for a range of months ■ Can be run for one employee or all employees within an employer ■ You can run the function as many times as necessary
<i>Update Waiting Period COC/SHC</i>	<p>Populates the applicable records in the 1095-C Employee Work File, PRP1095CWK, with <i>Waiting Period</i> codes for the Coverage Offer Code (COC) and Safe Harbor Code (SHC), based on pending employee benefit enrollments.</p>
<i>Create 1095-C Part III Work File</i>	<p>Reads data for employees who have records in the 1095-C Work File, PRP1095CWK, and adds dependent data to the 1095-C Part III Work File, PRP1095CP3. The system reads data from the dependent/beneficiary enrollment file PRPBM and the employee dependent file PEPDP to create this file.</p>

Function	Description
<i>List 1095-C Work File</i>	<ul style="list-style-type: none"> ■ Generates a listing of records in the work file, PRP1095CWK ■ Generates totals and percentage values that can be used to assist with completing the 1094-C form ■ You can run the function for a single employee or groups of employees, to verify the work file record information after it is created and to identify groups of employees whose information needs to be corrected ■ You can run the function as many times as necessary
<i>Update ACA Information</i>	<ul style="list-style-type: none"> ■ Allows you to create records manually in the 1095-C work file and/or override the <i>Coverage Offer Code</i> and <i>Safe Harbor Code</i> fields for a single employee, PRP1095CWK ■ For self-insured employers, allows you to manually update information for covered individuals after you run <i>Create 1095-C Part III Work File</i> ■ The function is accessible from <i>Enter New Hire</i>, <i>Update Basic Data</i>, and <i>Employee Topic List</i>
<i>Mass Update 1095-C Work File</i>	<ul style="list-style-type: none"> ■ Allows you to update the coverage offer code, safe harbor code, or employee share of the lowest cost monthly premium for self-only minimum value coverage for a single employee or groups of employees in the 1095-C work file, PRP1095CWK ■ You can run the function as many times as necessary
<i>Print 1095-C Forms</i>	<ul style="list-style-type: none"> ■ Prints 1095-C work file data on 1095-C form stock and generates an accompanying listing, PRP1095CWK ■ The listing is similar to the 1095-C review list ■ You can run the function as many times as necessary

ACA Tracking Steps

To track Affordable Care Act (ACA)-related information for your employees, you can create a 1095-C work file of coverage offer codes that are set up in the benefit plan controls and copied to employee benefit enrollment records when you use the *Mass Update Enrollments* function. You use the *Create 1095-C Work File* function to create the work file, and if you are self-insured, you then use the *Create 1095-C Part III Work File* function to create the covered individual work file. You can review 1095-C data and update the work files, as required, throughout the year. You use the *List 1095-C Work File* function to generate a report of the 1095-C data, and you can use multiple methods to update the 1095-C data as described below. You can then print 1095-C forms for your employees at the end of the year. You use the *Print 1095-C Forms* function to print the 1095-C forms.

To track ACA-related information, you must perform these tasks:

- 1 Set up code types for coverage offer and safe harbor codes:
 - **COC** Coverage Offer Code
 - **SHC** Safe Harbor Code

You must create code values for these code types before entering them on benefit plan controls or employee records. Refer to the *Instructions for Forms 1094-C and 1095-C* published by the IRS for the valid coverage offer and safe harbor codes.

For information on setting up code types, see the “Setting up and Maintaining Employer Code Value” chapter in the *Infinium HR Guide to Controls*.

- 2 Assign the coverage offer and safe harbor codes to employees.

You enter a default coverage offer code value for your medical (Type 3 plan) benefit plans in the *Cov. Offer Code* field in the *Update Benefit Plans* function. See the “Establishing Benefit Plans” chapter in this guide for detailed information.

When you use the *Mass Update Enrollments* function to enroll employees in the benefit plan, the coverage offer code is copied to the employees’ benefit enrollment records. You can view the coverage offer in the *Cov. Offer Code* field in the *Update Employee Enrollment* function. You can also view the *Cov. Offer Code* field on the Benefit Enrollment History page, which you access by pressing F8 from the Update Employee Enrollments page.

You can manually assign the codes to employees during the new hire process by using the *Enter New Hire* function, and you can assign and maintain the codes by using the *Update Basic Data* function:

- You access the ACA Information page by pressing F9 on page 3 of the *Enter New Hires* function. See the “Assigning Codes to Employees” section in this chapter for detailed information.
 - You access the ACA Information page by pressing F9 on page 2 of the *Update Basic Data* function. See the “Assigning Codes to Employees” in this chapter for detailed information.
- 3 Create the 1095-C work file. See the “Creating a 1095-C Work File” section in this chapter for detailed information.
 - 4 Update the waiting period codes for the applicable records in the 1095-C Employee Work File, PRP1095CWK, for the Coverage Offer Code (COC) and Safe Harbor Code (SHC), based on pending employee benefit enrollments. See the “Updating the waiting period for COC and SHC codes” section in this chapter for detailed information.
 - 5 Create the 1095-C Part III work file. See the “Creating the 1095-C Part III work file” section in this chapter for detailed information.
 - 6 List the 1095-C work file to verify employee 1095-C data. See the “Listing the 1095-C Work File” section in this chapter for detailed information.
 - 7 Mass update the 1095-C work file, as necessary. See the “Mass Updating the 1095-C Work File” section in this chapter for detailed information.
 - 8 Print 1095-C forms. See the “Printing 1095-C Forms” section in this chapter for detailed information.

Assigning Codes to Employees

You can use the *Enter New Hires* function or the *Update Basic Data* function to assign ACA codes to employees. You can also use the PR - Employee ACA Information option from the *Employee Topic List* function to assign the codes.

To assign coverage offer and safe harbor codes to an employee:

- 1 From the Infinium Human Resources main menu select *Employee Data*.
- 2 Select *Enter New Hires* or *Update Basic Data*.
- 3 Complete the information for the new hire as required and continue to Enter New Hire page 3. If you are updating a basic data record, continue to Update Employee Basic Data page 2.

4 Press F9 to display the ACA Information selection page shown below.

6/15/16 13:52:39		ACA Information				PRGACA20	PRDACA20			
Employer . . . :	ZUS	SAMPLE US COMPANY								
Employee . . . :	80005	ACCURATE, ALAN D								
Hire Date . . . :	6/01/1994	Adjusted DOH . . :	8/31/2011							
Rehire Date . . :	3/01/2006									
2=Change		4=Delete		5=Display		Include				
Opt	Year	Month	Tax Co.	COC	SHC	FT/PT	Lowest Cost	Ovr	In XML	Status
_	2016	12		1A	2C	0	120.00	Yes	No	In Workfile
_	2016	11		1A	2C	0	120.00	No	No	In Workfile
_	2016	10		1A	2C	0	120.00	No	No	In Workfile
_	2016	09		1A	2C	0	120.00	No	No	In Workfile
_	2016	08		1A	2C	0	120.00	No	No	In Workfile
_	2016	07		1A	2C	0	120.00	No	No	In Workfile
_	2016	06		1A	2C	0	120.00	No	No	In Workfile
_	2016	05		1B	2C	0	120.00	No	No	In Workfile
_	2016	04		1B	2C	0	120.00	No	No	In Workfile
_	2016	03		1B	2C	0	120.00	No	No	In Workfile
_	2016	02		1B	2C	0	120.00	No	No	In Workfile
_	2016	01		1B	2C	0	120.00	No	No	In Workfile
MORE...										
F3=Exit		F6=Create		F10=QuikAccess		F12=Cancel				

Figure 18-3: ACA Information selection page

You can select an ACA Information record to update, display, or delete. You can also create a new ACA Information record:

- To create a new record, press F6.
- To update a record, type **2** in the *Opt* field next to the record to update and press Enter.
- To delete a record, type **4** in the *Opt* field next to the record to delete and press Enter.
- To display a record, type **5** in the *Opt* field next to the record to display and press Enter.

Creating a new record

If you are creating a new record, the ACA Information – create page is displayed as shown below.


```

6/15/22 13:01:12          ACA Information          PRGACA30  PRDACA30

Employer . . . . : ZUS   SAMPLE US COMPANY
Employee . . . . :      80005 ACCURATE,ALAN D
Hire Date . . . . : 6/01/1999
Rehire Date . . . : 10/03/2011

Calendar Year . .  _____
From Month . . . . _____
To Month . . . .  ____ (Leave blank to create a record for only one month)

Coverage Offer .  _____ +
Safe Harbor Code _____ +
Zip Code . . . .  _____
Full/Part Time. .  0 (0=Part Time 1=Full Time)

F3=Exit and Save  F4=Prompt  F10=QuikAccess  F12=Cancel

```

Figure 18-4: ACA Information - create page

Use the information below to complete the fields on this page.

Calendar Year

This is the calendar year for the record you are creating. You can enter a value in this field only when you create the record.

From Month

Specify the starting month for the record you are creating. You can enter a value in this field only when you create the record.

To Month

Specify the ending month for the record you are creating. One record is created containing the same coverage offer and safe harbor code for each month in the year, starting with the *From Month* and ending with the *To Month* that you specify. You can enter a value in this field only when you create the record.

For example, if the employee is hired in May, you can enter **01** for the *From Month*, **04** for the *To Month*, and **1H** for the *Coverage Offer* code (no offer of coverage), and **2A** for the *Safe Harbor Code* (employee not employed during the month). You can then create another record containing **05** for the *From Month* and **12** for the *To Month* containing the appropriate *Coverage Offer* and *Safe Harbor Code*.

Leave the *To Month* field blank to create only one record for the *From Month* field.

Tax Company

For multi-tax employers, specify the tax company where the ACA information is reported. Tax companies that share common paymaster processing must use the employer default tax company.

For non-multi-tax employers, leave blank.

You can enter a value in this field only when you create the record.

Coverage Offer

Specify the coverage offer code that applies to this employee and month.

You must first set up code values for code type COC by using the *Update Employer Codes* function.

Safe Harbor Code

Specify the safe harbor code that applies to this employee and month.

You must first set up code values for code type SHC by using the *Update Employer Codes* function.

Zip Code

Type the ZIP code you used to determine eligibility if the employee was offered an individual coverage HRA. If the *Coverage Offer Code* is **1L**, **1M**, **1N**, or **1T**, this will be the employee's primary residence ZIP code. If the employee's *Coverage Offer Code* is **1O**, **1P**, **1Q**, or **1U**, this is the ZIP code of the employee's primary work location.

Note: We automatically update the ZIP code in the 1095-C Work File with the employee's ZIP code from the Employee Basic Data File, PRPMS, if the *Coverage Offer Code* is **1L**, **1M**, **1N**, or **1T**, or the employer ZIP code from the Employer Control File, PRPCO, if the *Coverage Offer Code* is **1O**, **1P**, **1Q**, or **1U** when you run the *Create 1095-C Work File* function. You can make manual changes to the ZIP code on this screen.

This field is required if the *Coverage Offer Code* is **1L**, **1M**, **1N**, **1O**, **1P**, **1Q**, **1T**, or **1U**.

Full/Part Time

This field indicates if the employee averages full-time or part-time hours for the month. This field is updated when you run the *Create 1095-C Work File* function, but you can manually overwrite the value on this page.

Valid values are:

- 0** The employee is part time for this month.
- 1** The employee is full time for this month.

If you add a new record for an employee by using *Enter New Hire* or *Update Basic Data*, this field is automatically updated when you run the *Create 1095-C Work File* function, provided that your selection criteria include this employee. The field is not updated when you run the *Create 1095-C Work File* function if you previously updated this field manually and you select not to replace manual updates when you run *Create 1095-C Work File*.

Updating an existing record

If you are updating an existing record, the ACA Information – update page is displayed as shown below.

6/13/22 17:06:15	ACA Information	PRGACA30	PRDACA30
Employer :	ZUS SAMPLE US COMPANY		
Employee :	80005 ACCURATE,ALAN D		
Hire Date :	6/01/1999		
Rehire Date . . . :	10/03/2011		
		Status :	In Workfile
Calendar Year . . :	2022		
Month :	01		
Coverage Offer . .	<u>1B</u> +	Manual Override :	1 Yes
Safe Harbor Code	_____ +	Incl. in XML File	No
Zip Code	_____		
Full/Part Time . .	<u>0</u> (0=Part Time 1=Full Time)		
Avg. Weekly Hrs :	.00	FT Hours Based On	*Undefined
Total Monthly Hrs	.00	Total Weeks . . . :	0
<u>Employee Required Contr.</u>			
Plan Year :			
Benefit ID :			
Benefit Plan . . . :			
Monthly Cost . . . :	_____.00		
F3=Exit and Save	F4=Prompt	F10=QuikAccess	F11=Covered Individ. F12=Cancel

Figure 18-5: ACA Information - update page

Use the information below to complete the fields on this page.

Coverage Offer

Specify the coverage offer code that applies to this employee and month.

You must first set up code values for code type COC by using the *Update Employer Codes* function.

If you are updating a record that was created by the *Create 1095-C Work File* function, the coverage offer code displayed here is the code that was set up on the benefit plans in which the employee is enrolled. You can override the coverage offer code on this page, or if the employee is not enrolled in benefits (for example, because the employee is part time), you can manually enter the coverage offer code here.

Safe Harbor Code

Specify the safe harbor code that applies to this employee and month.

You must first set up code values for code type SHC by using the *Update Employer Codes* function.

The *Safe Harbor Code* is automatically populated with these values if you ran the *Create 1095-C Work File* function:

- 2A** Employee not employed during the month (does not apply to the actual month the employee was hired or terminated). The *Coverage Offer* code for the month is also populated with **1H** (no offer of coverage).

- 2B** Employee not a full-time employee for the month, based on the value in the *Full Time Hours* field when you run the *Create 1095-C Work File* function, and the employee is not enrolled in minimum essential coverage if it was offered for the month, or the employee was a full-time employee for the month and coverage ended before the end of the month because the employee was terminated before the end of the month.

- 2C** Employee enrolled in coverage offered. If the employee has a benefit enrollment record, the *Mass Update Enrollments* function was run, and there is no declined or waived date on the benefit enrollment.

You can also use this field to manually update the safe harbor codes.

Zip Code

Type the ZIP code you used to determine eligibility if the employee was offered an individual coverage HRA. If the *Coverage Offer Code* is **1L**, **1M**,

1N, or **1T**, this will be the employee's primary residence ZIP code. If the employee's *Coverage Offer Code* is **1O**, **1P**, **1Q**, or **1U**, this is the ZIP code of the employee's primary work location.

Note: We automatically update the ZIP code in the 1095-C Work File with the employee's ZIP code from the Employee Basic Data File, PRPMS, if the *Coverage Offer Code* is **1L**, **1M**, **1N**, or **1T**, or the employer ZIP code from the Employer Control File, PRPCO, if the *Coverage Offer Code* is **1O**, **1P**, **1Q**, or **1U** when you run the *Create 1095-C Work File* function. You can make manual changes to the ZIP code on this screen.

This field is required if the *Coverage Offer Code* is **1L**, **1M**, **1N**, **1O**, **1P**, **1Q**, **1T**, or **1U**.

The ZIP code is updated with the following values if you ran the *Create 1095-C Work File* function:

- If the *Coverage Offer Code* is **1L**, **1M**, **1N**, or **1T**, the ZIP code is updated with the employee's residence ZIP code from Basic Data, PRPMS.
- If the *Coverage Offer Code* is **1O**, **1P**, **1Q**, or **1U**, the ZIP code is updated with the employee's primary work location ZIP code from the Employer Control File, PRPCO, or the Tax Company Control File, PYPTO, for multi-tax employers.

Full/Part Time

This field indicates if the employee averages full-time or part-time hours for the month. This field is updated when you run the *Create 1095-C Work File* function, but you can manually overwrite the value on this page.

Valid values are:

- 0** The employee is part time for this month.
- 1** The employee is full time for this month.

If you add a new record for an employee by using *Enter New Hire* or *Update Basic Data*, this field is automatically updated when you run the *Create 1095-C Work File* function, provided that your selection criteria include this employee. The field is not updated when you run the *Create 1095-C Work File* function if you previously updated this field manually and you select not to replace manual updates when you run *Create 1095-C Work File*.

Monthly Cost

This field displays the monthly cost of the employee-required contribution. This field is populated when you run the *Create 1095-C Work File* or *Mass Update 1095-C Work File* functions.

If you add a new record for an employee using *Enter New Hire* or *Update Basic Data*, this field will be updated the next time you run the *Create 1095-C Work File* or *Mass Update 1095-C Work File* function if your selection criteria include this employee.

If you are in update mode, you can manually override the *Employee Required Contribution*. If you type a new value in the *Employee Required Contribution*, the Benefit Plan Year, ID, and Benefit Plan will be removed.

Updating monthly coverage indicators for covered individuals

- To update monthly coverage indicators for covered individuals, press F11 on the ACA Information – update page. The 1095-C Part III Covered Individuals page is displayed as shown below.

```

6/15/16 14:14:23 1095-C Part III Covered Individuals PRGACA40 PRDACA40

Employer . . . : ZUS
Calendar Year . . : 2016
Employee . . . : 80005 ACCURATE,ALAN D

Place any character next to the month to indicate coverage during that month
Relat Seq Covered Individual Name D.O.B S.S.N Ovr.
SELF 999 ACCURATE,ALAN D 6/12/1965 026-22-2548 No
ALL  JAN  FEB  MAR  APR  MAY  JUN  JUL  AUG  SEP  OCT  NOV  DEC 
-----

F3=Exit F10=QuikAccess F12=Cancel

```

Figure 18-6: 1095-C Part III Covered Individuals page

On the 1095-C Part III - Covered Individuals page you can update monthly coverage indicators for covered individuals in the 1095-C Part III work file, PRP1095CP3.

- Type any character next to each month to indicate that the dependent or employee was covered for at least one day during the month. This data is initially created when you run the *Create 1095-C Part III Work File* function. An X is entered in these fields based on the effective and cancellation dates. You can override the value for each month.
- Press F3 to exit and save the record.

Creating a 1095-C Work File

Use the *Create 1095-C Work File* function to create a work file of coverage offer codes set up in the benefit plan controls and copied to employee benefit enrollment records when you use the *Mass Update Enrollments* function. Other information updated in the work file includes:

- Employee share of the lowest cost monthly premium, for self only, minimum value coverage.
- The benefit ID, plan, and plan year used to obtain the monthly amount above.
- Average or scheduled hours worked during the month.
- Full time/Part time indicator.

The *Cov Offer Code* field in the employee's enrollment record is updated with this value when you run the *Create 1095-C Work File* function:

Code	Description
1H	No offer of coverage, only if the <i>Safe Harbor Code</i> value is 2A (employee not employed during the month) or 2B (in the case of an employee whose coverage ended before the last day of the month because the employee was terminated before the end of the month). See explanation for code 2B below.

The *Safe Harbor Code* is updated with these values when you run the *Create 1095-C Work File* function:

Code	Description
2A	Employee not employed during the month (does not apply to the actual month the employee was hired or terminated); the <i>Cov Offer Code</i> value for the month is 1H (no offer of coverage)
2B	Employee not a full-time employee for the month, based on the value in the <i>Full Time Hours</i> field when you run the <i>Create 1095-C Work File</i> function, and the employee is not enrolled in minimum essential coverage if it was offered for the month, or the employee was a full-time employee for the month and coverage ended before the end of the month because the employee was terminated before the end of the month.
2C	Employee enrolled in coverage offered, if the employee has a benefit enrollment record, the <i>Mass Update Enrollments</i> function was run, and there is an effective/enrollment date on the benefit enrollment history record

The ZIP code is updated with the following values when you run the *Create 1095-C Work File* function:

- If the *Coverage Offer Code* is **1L**, **1M**, **1N**, or **1T**, the ZIP code is updated with the employee's residence ZIP code from Basic Data, PRPMS.
- If the *Coverage Offer Code* is **1O**, **1P**, **1Q**, or **1U**, the ZIP code is updated with the employee's primary work location ZIP code from the Employer Control File, PRPCO, or the Tax Company Control File, PYPTO, for multi-tax employers.

To create the 1095-C work file:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
- 2 Select *Misc. Benefit Functions*.
- 3 Select *Create 1095-C Work File [C1095C]*. The system displays the Create 1095-C Work File page shown below.

```

12/17/15   16:11:50           Create 1095-C Work File   PRGAC50   PRDAC50
-----
Employer . . . . . ____ +
Tax Company . . . . . ____ +
Employee . . . . . _____ +   Last Name . . . . . _____ +
Calendar Year . . . . . ____
Starting Month . . . . . __
Ending Month . . . . . __
Replace Manual Updates? 0 (0=No 1=Yes)

Full Time Weekly Hours . 30.00
Average Hours IRG . . . . . ____ +
Number of Weeks . . . . . ____
Full Time Hours Based On 1 (1=Actual Average 2=Scheduled)
Calculate Average Hours. 1 (1=Measured Period Weeks 2=Actual Weeks Worked)
Hire Date Based On . . . . . 1 (1->4)

Lowest Cost Employee Only Plan
Benefit Plan Year . . . . . ____ +
Benefit ID . . . . . ____ +
Benefit Plan . . . . . ____ +

F3=Exit   F10=QuikAccess

```

Figure 18-7: Create 1095-C Work File page

- 4 Use the information below to complete the fields on this page.

Employer

Specify an employer.

Tax Company

Specify the tax company for multi-tax employers. Leave blank to include all tax companies.

If an employee is paid in a common-paymaster tax company, one summarized record is created in the work file for all of the common paymaster tax companies in which the employee is paid. The tax company that is placed in the work file is the employer's default tax company.

Employee

Specify an employee number to create the work file for one employee. Leave blank to create the work file for all employees.

Last Name

If you do not know the employee number, you can specify the employee's last name and prompt to select the correct employee number.

Calendar Year

Specify the calendar year.

The work file is updated with the coverage offer codes from the Benefit Enrollment History file, PRPBL, based on the following criteria:

- If there is a benefit enrollment history record with an eligibility date before the requested *Calendar Year*, the coverage offer code on the benefit enrollment history record is placed in the work file for all of the months in the calendar year, starting with the *Starting Month* and ending with the *Ending Month*.
- If there is a benefit enrollment history record with an eligibility date on or after the requested *Calendar Year*, the coverage offer code on the benefit enrollment history record is updated to the work file starting with the first *Starting Month* after the eligibility month, up to the requested *Ending Month*.
- If the coverage offer code is changed on a benefit plan control during the year, the coverage offer code is updated to the benefit enrollment history file the next time the *Mass Update Enrollments* function is run. When you run the *Create 1095-C Work File* function, the new coverage offer code is updated to the work file, starting with the month the change is made to the coverage offer code, starting with the *Starting Month* and ending with the *Ending Month*.

Starting Month

Specify the starting month for which you want to create work file records within the calendar year.

Ending Month

Specify the ending month for which you want to create work file records within the calendar year.

Replace Manual Updates?

Specify yes to overlay manual changes that are made to the coverage offer and safe harbor codes from the *Enter New Hire* or *Update Basic Data* function. Otherwise, specify no.

Full Time Weekly Hours

Specify the number of average weekly hours to use to determine if an employee is full time or part time during a particular month in the calendar year. The default value is 30.00 hours.

Average Hours IRG

Specify the income reporting group to use to calculate average weekly hours, if you are using actual hours worked to calculate the average hours. You must first create code values for code type IRG by using the *Update Employer Codes* function.

Number of Weeks

Specify the number of weeks in the month to use to calculate average weekly hours. Leave blank if you are using actual weeks worked to calculate the average hours worked, you are using scheduled hours instead of average hours worked, or you are creating the work file for more than one month.

Full Time Hours Based On

Indicate which hours are used to determine if an employee is full time or part time for each month in the requested period. Valid values are:

- 1 Actual average weekly hours from payroll history only
- 2 Scheduled weekly hours from employee basic data only

Note: The system uses the period ending date in payroll history to determine hours and weeks worked.

Calculate Average Hours

Indicate which number of weeks is used to calculate the employee average hours. Valid values are:

- 1 Measured period weeks entered on this page
-

2 Actual weeks worked recorded in payroll history for the selected dates

When you specify **2**, the *Number of Weeks* value is ignored and the actual weeks worked value during each month in the requested time period is used when calculating an employee's average weekly hours.

The value in this field is ignored if you are using scheduled hours instead of average hours.

Hire Date Based On

Specify the date to use as the applicable hire date. Valid values are:

- 1** Use the original hire date only.
- 2** Use the adjusted hire date, if entered. Otherwise, use the original hire date.
- 3** Use the rehire date, if entered, and then the adjusted hire date, if entered. Otherwise, use the original hire date.
- 4** Use the rehire date, if entered. Otherwise, use the original hire date.

A value of **5** (use the rehire date only) is used in the *List 1095-C Work File* function. If the rehire date is blank, the employee is omitted from the report. This is not a valid option for the *Create 1095-C Work File* function because it would not include employees who did not have a rehire date.

Employees who have a hire date after the end of the calendar year that you specify on this page are not written to the work file, based on the value you specify in the *Hire Date Based On* field.

Benefit Plan Year

Specify the benefit plan year for the benefit plan that contains the employee-required contribution. Leave blank if you do not use benefit year processing.

The employee premium is converted to a monthly amount if the premium frequency on the benefit plan is not **M** (monthly premium).

Benefit ID

Specify the benefit ID for the benefit plan that contains the employee-required contribution.

Benefit Plan

Specify the benefit plan that contains the employee-required contribution.

The employee premium is converted to a monthly amount if the premium frequency on the benefit plan is not **M** (monthly premium).

- 5 Press Enter.

Updating the waiting period for COC and SHC codes

Use the *Update Waiting Period COC/SHC* function to populate applicable records in the 1095-C Employee Work File, PRP1095CWK, with Waiting Period codes for the Coverage Offer Code (COC) and Safe Harbor Code (SHC), based on pending employee benefit enrollments.

You can run the *Update Waiting Period COC/SHC* function in trial mode or final mode.

The system selects employees where:

- The SHC code is **2A** for any month in the year prior to the ending month.
- The COC and SHC codes are blank for at least one month within the starting month and ending month range.

The system then looks for pending benefit enrollments. When pending enrollments are found, the system determines the applicable waiting period months by checking the eligibility date on the pending enrollment. If the employee has blanks in the COC or SHC for selected months considered to be part of the waiting period, the system updates those months with the specified default COC and SHC codes.

To update the waiting period for COC and SHC codes:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Update Waiting Period COC/SHC [UACAW]*. The system displays the Update Waiting Period COC/SHC page shown below.
-

```

12/12/16  19:16:19  Update Waiting Period COC/SHC  PRGAC50  PRDAC50
-----
Employer . . . . . ____ +
Tax Company . . . . . _____ +
Employee . . . . . _____ + Last Name . . . . . _____ +
Calendar Year . . . . . ____
Starting Month . . . . . __
Ending Month . . . . . __
Replace Manual Updates? @ (0=No 1=Yes)
Trial/Final Run . . . . . @ (0=Trial 1=Final)

Populate with defaults :
Default Coverage Offer . ____ +
Default Safe Harbor . . ____ +

This function selects ACA 1095C work file records with blank Coverage Offer
and/or Safe Harbor codes and updates them with the Default Coverage Offer and
Safe Harbor codes, based on the Eligibility Date on pending enrollments.

Press enter to get an employee count, press F16 to submit the job.

F3=Exit  F10=QuikAccess

```

Figure 18-8: Update Waiting Period COC/SHC page

4 Use the information below to complete the fields on this page.

Employer

Specify the employer for whom information is listed.

Tax Company

Specify the tax company for multi-tax employers. Leave blank for employers who do not use multi-tax processing.

If an employee is paid in a common-paymaster tax company, one summarized record is created in the work file for all of the common paymaster tax companies in which the employee was paid. The tax company that is placed in the work file is the employer's default tax company.

Employee

Specify an employee number to update the work file for one employee. Leave blank to update the work file for all employees.

Last Name

Specify the employee's last name to initiate a search for an employee name.

Calendar Year

Specify the calendar year for which to update work file records.

Starting Month

Specify the starting month for which to update work file records within the calendar year.

Ending Month

Specify the ending month for which to update work file records within the calendar year.

Replace Manual Updates?

Specify yes to refresh the coverage offer and safe harbor codes for all records and reset the *Manual Update* field.

Specify no if you do not want to overlay the values in the coverage offer and safe harbor codes, if manual changes were made to the record from the ACA Information page.

Trial/Final Run

Specify yes to run the update in final mode. A report is produced, and the 1095-C work file is updated.

Specify no to run the update in trial mode. A report is produced, but the 1095-C work file is not updated.

Default Coverage Offer

Specify the default coverage offer code to place in the work file for employees who have blanks in the coverage offer and safe harbor codes, based on the eligibility dates of the employee's pending enrollments.

For more information about coverage offer codes, refer to the IRS publication Instructions for Forms 1094-C and 1095-C.

Default Safe Harbor

Specify the default safe harbor code to place in the work file for employees who have blanks in the coverage offer and safe harbor codes, based on the eligibility dates of the employee's pending enrollments.

For more information about safe harbor codes, refer to the IRS publication Instructions for Forms 1094-C and 1095-C.

5 Press Enter.

Creating the 1095-C Part III work file

Use the *Create 1095-C Part III Work File* function to create a work file of covered individuals to be printed on Part III of the 1095-C form. You must specify yes in the *Self Insured?* field in the *Print 1095-C Forms* function to print Part III. Part III is required only if you offer self-insured coverage to your employees.

When you run the *Create 1095-C Part III Work File* function, the system creates data in the 1095-C Part III work file, PRP1095CP3, using the data in the Dependent file, PEPDP, and the Dependent/Beneficiary enrollment file, PRPBM. You can correct this data by pressing F9 or clicking ACA Info from Actions from the Employee ACA Information page that you access from *Update Basic Data*, *Enter New Hire*, or *Employee Topic List*. Part III information is created only for employees who have a record in the 1095-C work file, PRP1095CWK.

If you change any data for a dependent, such as the tax ID or name, you must rerun the *Create 1095-C Part III Work File* function to refresh the data in the Part III work file. You can enter the employee number on the page to re-create the work file for a specific employee for which the dependent information has changed. If you specify no in the *Replace Manual Updates?* field, any manual changes that you make to the monthly coverage indicators will not be overlaid.

To create the 1095-C Part III work file:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Create 1095-C Part III Work File* [C1095P3]. The system displays the Create 1095-C Part III Work File page shown below.
-

```

12/17/15   13:21:05   Create 1095-C Part III Work File   PRGAC50   PRDAC50
-----
Employer . . . . . ZUS +
Employee . . . . . 80005 + Last Name . . . . . _____ +
Calendar Year . . . . . 2015
Replace Manual Updates? 0 (0=No 1=Yes)

F3=Exit F10=QuikAccess

```

Figure 18-9: Create 1095-C Part III Work File page

4 Use the information below to complete the fields on this page.

Employer

Specify an employer.

Employee

Specify an employee number to create the work file for one employee.

Leave blank to create the work file for all employees.

Last Name

Specify the employee's last name or the beginning letters of the name and prompt to display all employees whose names match your request. Select the employee and the employee number is entered.

Calendar Year

Specify the calendar year. The work file is updated with the employee and dependents who are attached to benefit enrollments based on this criteria:

- If the employee or dependent is added to the plan before the requested calendar year, the coverage indicators in the work file, PRP1095CP3, are updated for all of the months in the year.

- If the employee or dependent is added to the plan on or after the requested calendar year, the coverage indicators in the work file, PRP1095CP3, are updated starting with the effective month of the employee/dependent enrollment.
- If there is a cancellation date on the employee or dependent enrollment, the coverage indicators in the work file are set to blank starting with the month following the cancellation month.

Replace Manual Updates?

Specify yes to overlay manual changes that are made to coverage indicators in the 1095-C Part III work file by using the *Enter New Hire*, *Update Basic Data*, or *Employee Topic List* function. Otherwise, specify no.

- 5 Press Enter.

Listing the 1095-C Work File

Use the *List 1095-C Work File* function to list the data in the 1095-C work file, PRP1095CWK. You can choose to print data for full-time employees only (employees who average full-time hours in any month of the year that you select) or for all employees. The report includes this information:

- Coverage offer codes
- Safe harbor codes
- Employee share of lowest cost monthly premium for self-only minimum value coverage and the benefit plan that is used to obtain that information
- Full-time and total employee counts by month (for 1094-C form Part III, boxes (b) and (c))
- Percentage of employees and their dependents offered minimum essential coverage for each month in the year (for 1094-C form box (a))

The List 1095-C Work File report is 198 characters across and 15 CPI (characters per inch). You must create a printer control for printer file PRTP1095C, containing 198 for the page width and 15 for the characters per inch before you run this report the first time.

To list the 1095-C work file:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
-

- 3 Select *List 1095-C Work File* [L1095C]. The system displays the List 1095-C Work File page shown below.

12/17/15	16:31:53	List 1095-C Work File	PRGAC50	PRDAC50
Employer	___ +	Employer Group	_____ +	
Tax Company	_____ +	Aggregated ER Group? . . .	0 (0=No 1=Yes)	
Employee	_____ +	Last Name	_____ +	
Level 1	_____ +	Level 2	_____ +	
Level 3	_____ +	Level 4	_____ +	
Calendar Year	_____	Employee Sort Order . . .	1 (1, 2, 3)	
Coverage Offer Code 1F . .	0 (0, 1)	Print Part III Info? . . .	0 (0=No 1=Yes)	
<u>Employee Selection Criteria:</u>				
Coverage Offer Code . . .	___ +	0 (0=N/A 1=Include 2=Exclude)		
Safe Harbor Code	___ +	0 (0=N/A 1=Include 2=Exclude)		
Benefit Group	_____ +	0 (0=N/A 1=Include 2=Exclude)		
Status Group	___ +	0 (0=N/A 1=Include 2=Exclude)		
Current Payroll State . . .	___ +	0 (0=N/A 1=Include 2=Exclude)		
Union Code	___ +	0 (0=N/A 1=Include 2=Exclude)		
Include Pay Type S	1 (0=No 1=Yes)	Include Pay Type N	1 (0=No 1=Yes)	
Include Pay Type H	1 (0=No 1=Yes)	Included in File	2 (0, 1, 2)	
Employees Hired From . . .	_____	Employees Hired To	_____	
Include Terminated	0 (0=No 1=Yes)	Hire Date Based On	1 (1->5)	
Include Seasonal	0 (0=No 1=Yes)	Full Time/Part Time EEs . .	0 (0, 1, 2)	
F3=Exit F4=Prompt F10=QuikAccess				

Figure 18-10: List 1095-C Work File page

- 4 Use the information below to complete the fields on this page.

Employer

Specify an employer or leave blank to list data in the work file by employer group. Either an employer or employer group is required.

Employer Group

Specify an employer group or leave blank if you specify an employer. Either an employer or employer group is required.

Tax Company

Specify the tax company to limit the data on the report to one tax company. Leave blank if you want to include all tax companies or if the employer you selected is not a multi-tax employer. You must specify an employer if you specify a tax company.

Aggregated ER Group?

Specify how to report employees who work in more than one employer or tax company in one calendar month.

If you specify no, employees who work in more than one employer or tax company in one calendar month are reported in all employers and tax companies in which the employee worked.

If you specify yes, these employees are reported as follows:

- If you specify an employer group and an employee works in more than one employer in the group in one calendar month, the employee is reported in the employer in which the most hours are worked during that calendar month. The employee is not reported in the other employers in the group for that calendar month.
- If you specify an employer, the employer is a multi-tax employer, and an employee works in more than one tax company in one calendar month, the employee is reported in the tax company for which the most hours are worked during that calendar month. The employee is not reported in the other tax companies in the employer for that calendar month.
- If an employee works an equal number of hours in more than one employer within the employer group or in more than one tax company in one calendar month, the employee is reported in the first employer or tax company in which the employee works in that calendar month in alphabetical order.

For more information about aggregated employer groups, see the IRS publication instructions for Forms 1094-C and 1095-C.

Employee

Specify an employee number to limit the report to one employee. Leave blank to include all employees.

Last Name

If you do not know the employee number, you can specify the employee's last name and prompt to select the correct employee number.

Level 1

Specify a level 1 code or leave blank to include all levels.

Level 2

Specify a level 2 code or leave blank to include all levels.

Level 3

Specify a level 3 code or leave blank to include all levels.

Level 4

Specify a level 4 code or leave blank to include all levels.

Calendar Year

Specify the calendar year of the work file records to print.

Employee Sort Order

Specify the sort order for the employees on the report.

- | | |
|----------|--------------------|
| 1 | Employee number |
| 2 | Name |
| 3 | Name within levels |

If you sort by levels, employees are reported under their home levels only, not the levels where the employees work.

Coverage Offer Code 1F

If you use coverage offer code 1F, specify if this code includes an offer of coverage to dependents. The value you type here determines if this coverage offer code is included in the minimum essential coverage monthly percentages on the List 1095-C Work File report.

- | | |
|----------|---|
| 0 | Coverage offer code 1F does not include an offer of coverage to dependents. |
| 1 | Coverage offer code 1F does include an offer of coverage to dependents. |

Print Part III Info?

If the employer is self-insured, specify yes to print a separate report of covered individuals in the 1095-C Part III Work File, PRP1095CP3. Otherwise, specify no. You must first run the *Create 1095-C Part III Work File* function to enter data in the Part III Work File.

Coverage Offer Code

Specify a coverage offer code to select employees based on the coverage offer code. The system does the following:

- If you specify **1** in the *Include/Exclude Coverage Offer Code* field, the system prints only employees who have the coverage offer code that you specify. If you leave the *Coverage Offer Code* field blank, the system prints only those employees with blank coverage offer codes.
- If you specify **2** in the *Include/Exclude Coverage Offer Code* field, the system prints only employees who do not have the coverage offer code you specify. If you leave the *Coverage Offer Code* field blank, the system prints only employees with non-blank coverage offer codes.

Include/Exclude Coverage Offer Code

Specify if you want to include or exclude employees with the coverage offer code that you specify.

- | | |
|----------|--|
| 0 | N/A - Select this value to include employees regardless of the coverage offer codes they have. If you specify a coverage offer code, it is ignored. |
| 1 | Include - Include employees who have the coverage offer code you specify. If you do not specify a coverage offer code, only employees with blank coverage offer codes are printed. |
| 2 | Exclude - Exclude employees who have the coverage offer code you specify. If you do not specify a coverage offer code, only employees with non-blank coverage offer codes are printed. |

Safe Harbor Code

Specify a safe harbor code to select employees based on the safe harbor code. The system does the following:

- If you specify **1** in the *Include/Exclude Safe Harbor Code* field, the system prints only employees who have the safe harbor code that you specify. If you leave the *Safe Harbor Code* field blank, the system prints only those employees with blank safe harbor codes.
- If you specify **2** in the *Include/Exclude Safe Harbor Code* field, the system prints only employees who do not have the safe harbor code you specify. If you leave the *Safe Harbor Code* field blank, the system prints only employees with non-blank safe harbor codes.

Include/Exclude Safe Harbor Code

Specify if you want to include or exclude employees with the safe harbor code that you specify.

- 0** N/A - Select this value to include employees regardless of the safe harbor codes they have. If you specify a safe harbor code, it is ignored.
- 1** Include - Include employees who have the safe harbor code you specify. If you do not specify a safe harbor code, only employees with blank safe harbor codes are printed
- 2** Exclude - Exclude employees who have the safe harbor code you specify. If you do not specify a safe harbor code, only employees with non-blank safe harbor codes are printed.

Benefit Group

Specify a benefit group to select employees based on the benefit group. The system does the following:

- If you specify **1** in the *Include/Exclude Benefit Group* field, the system prints only employees who have the benefit group that you specify. If you leave the *Benefit Group* field blank, the system prints only those employees with a blank benefit group.
- If you specify **2** in the *Include/Exclude Benefit Group* field, the system prints only employees who do not have the benefit group you specify. If you leave the *Benefit Group* field blank, the system prints only employees with a non-blank benefit group.

Include/Exclude Benefit Group

Specify if you want to include or exclude employees with the benefit group that you specify.

- 0** N/A - Select this value to include employees regardless of the benefit group they have. If you specify a benefit group, it is ignored.
 - 1** Include - Include employees who have the benefit group you specify. If you do not specify a benefit group, only employees with a blank benefit group are printed.
 - 2** Exclude - Exclude employees who have the benefit group you specify. If you do not specify a benefit group, only employees with a non-blank benefit group are printed.
-

Status Group

Specify a status group to select employees based on the status group. The system does the following:

- If you specify **1** in the *Include/Exclude Status Group* field, the system prints only employees who have the status code that is part of the status group that you specify.
- If you specify **2** in the *Include/Exclude Status Group* field, the system prints only employees who do not have the status code that is part of the status group that you specify.

Include/Exclude Status Group

Specify if you want to include or exclude employees with a status code that is part of the status group that you specify.

- | | |
|----------|--|
| 0 | N/A - Select this value to include employees regardless of the status codes they have. If you specify a status group, it is ignored. |
| 1 | Include - Include employees who have the status code that is part of the status group you specify |
| 2 | Exclude - Exclude employees who have the status code that is part of the status group you specify. |

Current Payroll State

Specify a current payroll state to select employees based on the current payroll state. The system does the following:

- If you specify **1** in the *Include/Exclude Current Payroll State* field, the system prints only employees who have the current payroll state that you specify.
- If you specify **2** in the *Include/Exclude Current Payroll State* field, the system prints only employees who do not have the current payroll state that you specify.

Include/Exclude Current Payroll State

Specify if you want to include or exclude employees with the current payroll state that you specify.

- | | |
|----------|---|
| 0 | N/A - Select this value to include employees regardless of the current payroll states they have. If you specify a current payroll state, it is ignored. |
|----------|---|
-

- 1** Include - Include employees who have the current payroll state you specify.
- 2** Exclude - Exclude employees who have the current payroll state you specify.

Union Code

Specify a union code to select employees based on the union code. The system does the following:

- If you specify **1** in the *Include/Exclude Union Code* field, the system prints only employees who have the union code that you specify. If you leave the *Union Code* field blank, the system prints only those employees with a blank union code.
- If you specify **2** in the *Include/Exclude Union Code* field, the system prints only employees who do not have the union code you specify. If you leave the *Union Code* field blank, the system prints only employees with a non-blank union code.

Include/Exclude Union Code

Specify if you want to include or exclude employees with the union code that you specify.

- 0** N/A - Select this value to include employees regardless of the union code they have. If you specify a union code, it is ignored.
- 1** Include - Include employees who have the union code you specify. If you do not specify a union code, only employees with a blank union code are printed.
- 2** Exclude - Exclude employees who have the union code you specify. If you do not specify a union code, only employees with a non-blank union code are printed.

Include Pay Type S

Specify yes to include employees with Pay Type S (salaried). Otherwise, specify no.

Include Pay Type N

Specify yes to include employees with Pay Type N (salaried, non-exempt). Otherwise, specify no.

Include Pay Type H

Specify yes to include employees with Pay Type H (hourly). Otherwise, specify no.

Included in File

Specify whether to print employees whom you included in the submission file to be submitted to the government when you ran *Print 1095-C Forms*.

- 0** Print employees not included in the submission file.
- 1** Print only employees included in the submission file.
- 2** Print all employees in the 1095-C work file.

Employees Hired From

Specify the beginning date to use to select employees. The report lists employees where the applicable hire date is on or after the *Employees Hired From* date and on or before the *Employees Hired To* date.

Use the *Hire Date Based On* field to specify which date to use as the applicable hire date: original hire date, adjusted hire date, or rehire date.

Employees Hired To

Specify the ending date to use to select employees. The report lists employees where the applicable hire date is on or after the *Employees Hired From* date and on or before the *Employees Hired To* date.

Use the *Hire Date Based On* field to specify which date to use as the applicable hire date: original hire date, adjusted hire date, or rehire date.

Include Terminated

Specify yes to include terminated employees on the report when their termination date is on or after the start of the calendar year. Employees who terminated before the start of calendar year are always excluded. Otherwise, specify no.

Hire Date Based On

Specify the date to use as the applicable hire date.

- 1** Use the original hire date only.
 - 2** Use the adjusted hire date, if filled. Otherwise, use the original hire date.
-

- 3** Use the rehire date, if filled, and then the adjusted hire date, if filled. Otherwise, use the original hire date.
- 4** Use the rehire date, if filled. Otherwise, use the original hire date.
- 5** Use the rehire date only. If the rehire date is empty, omit the employee from the report.

Include Seasonal

Specify yes to include seasonal employees with a non-blank season code on their personnel master on the report. Otherwise, specify no.

Full Time/Part Time EEs

Specify whether to include only full-time, only part-time, or both full- and part-time employees.

- 0** Include both part-time and full-time employees.
- 1** Include only full-time employees. Full-time employees are defined as employees who averaged full-time weekly hours for any month in the calendar year.
- 2** Include only full-time employees and also employees whose information has been manually added to the work file when you use the *Enter New Hire*, *Update Basic Data*, or *Employee Topic List* function.

- 5** Press Enter.

Mass Updating the 1095-C Work File

Use the *Mass Update 1095-C Work File* function to update the 1095-C work file, PRP1095CWK, with coverage offer codes, safe harbor codes, and the employee share of the lowest cost monthly premium for self-only minimum value coverage. You can use the selection criteria in the *Mass Update 1095-C Work File* function to select the employees to update. Some examples of updates that you can perform are:

- Update all employees in a Full Time benefit group with the lowest cost premium for self-only minimum value coverage that is offered to these employees.
-

- Update new hires with coverage offer code 1H (no offer of coverage) and safe harbor code 2D (employee in a Section 4980H(b) limited non-assessment period).

The *Mass Update 1095-C Work File* function updates only existing records in the work file. It does not add new records. You must run the *Create 1095-C Work File* function before you run the *Mass Update 1095-C Work File* function to add the records to the work file.

The Mass Update 1095-C Work File report is 198 characters across and 15 CPI (characters per inch). You must create a printer control for printer file PRTMU1095C, containing 198 for the page width and 15 for the characters per inch before you run this report for the first time.

To mass update the 1095-C work file:

- From the Infinium Human Resources main menu select *Benefits Administration*.
- Select *Misc. Benefit Functions*.
- Select *Mass Update 1095-C Work File [MU1095C]*. The system displays the Mass Update 1095-C Work File page shown below.

```

12/12/16   18:53:42   Mass Update 1095-C Work File   PRGAC50   PRDAC50
-----
Employer . . . . . ___ +      Employer Group . . . . . ___ +
Tax Company . . . . . ___ +      Employee Sort Order . . . 1 (1, 2, 3)
Employee . . . . . _____ +      Last Name . . . . . _____ +
Level 1 . . . . . ___ +      Level 2 . . . . . ___ +
Level 3 . . . . . ___ +      Level 4 . . . . . ___ +
Calendar Year . . . . . ___      Trial/Final Run . . . . . 0 (0, 1)
Starting Month . . . . . ___      Ending Month . . . . . ___

Benefit Group . . . . . _____ + 0 (0=N/A 1=Include 2=Exclude)
Status Group . . . . . ___ +      0 (0=N/A 1=Include 2=Exclude)
Current Payroll State . . . ___ +    0 (0=N/A 1=Include 2=Exclude)
Union Code . . . . . ___ +      0 (0=N/A 1=Include 2=Exclude)
Include Pay Type S . . . . 1 (0=No 1=Yes) Include Pay Type N . . . . 1 (0=No 1=Yes)
Include Pay Type H . . . . 1 (0=No 1=Yes) Full Time/Part Time EEs 1 (1->7)
Employees Hired From . . . _____ Employees Hired To . . . _____
Include Terminated . . . . 0 (0=No 1=Yes) Inc/Exc New Hires . . . . 0 (0, 1, 2)
Include Seasonal . . . . . 0 (0=No 1=Yes) Hire Date Based On . . . . 1 (1->5)
Include EEs in Ben. ID . . . ___ +
Include EEs in Ben. Plan _____ +      Include/Exclude Declined 0 (0, 1, 2)
Benefit Plan Year . . . . . ___ +      Chg Declined Months Only 0 (0, 1, 2)
F3=Exit F4=Prompt F10=QuikAccess
    
```

Figure 18-11: Mass Update 1095-C Work File page

- Use the information below to complete the fields on this page.

Employer

Specify an employer or leave blank to mass update data in the work file by employer group. Either an employer or employer group is required.

Employer Group

Specify an employer group or leave blank if you specify an employer. Either an employer or employer group is required.

Tax Company

Specify the tax company to mass update the data on the report for one tax company. Leave blank if you want to include all tax companies or if the employer you selected is not a multi-tax employer. You must specify an employer if you specify a tax company.

Employee Sort Order

Specify the sort order for the employees on the report.

- 1** Employee number
- 2** Name
- 3** Name within levels

If you sort by levels, employees are reported under their home levels only, not the levels where the employees work.

Employee

Specify an employee number to limit the mass update to one employee. Leave blank to include all employees.

Last Name

If you do not know the employee number, you can specify the employee's last name and prompt to select the correct employee number.

Level 1

Specify a level 1 code or leave blank to include all levels.

Level 2

Specify a level 2 code or leave blank to include all levels.

Level 3

Specify a level 3 code or leave blank to include all levels.

Level 4

Specify a level 4 code or leave blank to include all levels.

Calendar Year

Specify the calendar year of the work file records to mass update.

Trial/Final Run

Specify if you want to run the mass update in trial or final mode.

- | | |
|----------|---|
| 0 | Run the mass update in trial mode. A report is produced, but the 1095-C work file is not updated. |
| 1 | Run the mass update in final mode. A report is produced and the 1095-C work file is updated. |

Starting Month

Specify the starting month of the work file records to mass update. Leave blank to mass update all of the months in the calendar year that you select.

Ending Month

Specify the ending month of the work file records to mass update. Leave blank to mass update all of the months in the calendar that year you select.

Benefit Group

Specify a benefit group to select employees based on the benefit group. The system does the following:

- If you specify **1** in the *Include/Exclude Benefit Group* field, the system mass updates only employees who have the benefit group that you specify. If you leave the *Benefit Group* field blank, the system mass updates only those employees with a blank benefit group.
- If you specify **2** in the *Include/Exclude Benefit Group* field, the system mass updates only employees who do not have the benefit group you specify. If you leave the *Benefit Group* field blank, the system mass updates only employees with a non-blank benefit group.

Include/Exclude Benefit Group

Specify if you want to include or exclude employees with the benefit group that you specify.

- 0** N/A - Select this value to include employees regardless of the benefit group they have. If you specify a benefit group, it is ignored.
- 1** Include - Include employees who have the benefit group you specify. If you do not specify a benefit group, only employees with a blank benefit group are mass updated.
- 2** Exclude - Exclude employees who have the benefit group you specify. If you do not specify a benefit group, only employees with a non-blank benefit group are mass updated.

Status Group

Specify a status group to select employees based on the status group. The system does the following:

- If you specify **1** in the *Include/Exclude Status Group* field, the system mass updates only employees who have the status code that is part of the status group that you specify.
- If you specify **2** in the *Include/Exclude Status Group* field, the system mass updates only employees who do not have the status code that is part of the status group that you specify.

Include/Exclude Status Group

Specify if you want to include or exclude employees with a status code that is part of the status group that you specify.

- 0** N/A - Select this value to include employees regardless of the status codes they have. If you specify a status group, it is ignored.
- 1** Include - Include employees who have the status code that is part of the status group you specify.
- 2** Exclude - Exclude employees who have the status code that is part of the status group you specify.

Current Payroll State

Specify a current payroll state to select employees based on the current payroll state. The system does the following:

- If you specify **1** in the *Include/Exclude Current Payroll State* field, the system mass updates only employees who have the current payroll state that you specify.
-

- If you specify **2** in the *Include/Exclude Current Payroll State* field, the system mass updates only employees who do not have the current payroll state that you specify.

Include/Exclude Current Payroll State

Specify if you want to include or exclude employees with the current payroll state that you specify.

- | | |
|----------|---|
| 0 | N/A - Select this value to include employees regardless of the current payroll states they have. If you specify a current payroll state, it is ignored. |
| 1 | Include - Include employees who have the current payroll state you specify. |
| 2 | Exclude - Exclude employees who have the current payroll state you specify. |

Union Code

Specify a union code to select employees based on the union code. The system does the following:

- If you specify **1** in the *Include/Exclude Union Code* field, the system mass updates only employees who have the union code that you specify. If you leave the *Union Code* field blank, the system mass updates only those employees with a blank union code.
- If you specify **2** in the *Include/Exclude Union Code* field, the system mass updates only employees who do not have the union code you specify. If you leave the *Union Code* field blank, the system mass updates only employees with a non-blank union code.

Include/Exclude Union Code

Specify if you want to include or exclude employees with the union code that you specify.

- | | |
|----------|--|
| 0 | N/A - Select this value to include employees regardless of the union code they have. If you specify a union code, it is ignored. |
| 1 | Include - Include employees who have the union code you specify. If you do not specify a union code, only employees with a blank union code are mass updated |

- 2** Exclude - Exclude employees who have the union code you specify. If you do not specify a union code, only employees with a non-blank union code are mass updated.

Include Pay Type S

Specify yes to include employees with Pay Type S (salaried). Otherwise, specify no.

Include Pay Type N

Specify yes to include employees with Pay Type N (salaried, non-exempt). Otherwise, specify no.

Include Pay Type H

Specify yes to include employees with Pay Type H (hourly). Otherwise, specify no.

Full Time/Part Time EEs

Specify whether to include full-time employees only or both full-time and part-time employees.

- 1** Include both full-time and part-time employees.
 - 2** Include employees who were full time in all months in the calendar year.
 - 3** Include employees who were full time in any month in the calendar year. Update all of the months starting with the *Starting Month* and ending with the *Ending Month* that you specified on the submission page.
 - 4** Include employees that were full time in any month in the calendar year. Update only the months the employee was full time, starting with the *Starting Month* and ending with the *Ending Month* that you specified on the submission page.
 - 5** Include employees who were part time in all months in the calendar year.
 - 6** Include employees who were part time in any month in the calendar year. Update all of the months starting with the *Starting Month* and ending with the *Ending Month* that you specified on the submission page.
-

- 7** Include employees who were part time in any month in the calendar year. Update only the months the employee was part time, starting with the *Starting Month* and ending with *the Ending Month* that you specified on the submission page.

Employees Hired From

Specify the beginning date to use to select employees. The report lists employees where the applicable hire date is on or after *the Employees Hired From* date and on or before the *Employees Hired To* date.

Use the *Hire Date Based On* field to specify which date to use as the applicable hire date: original hire date, adjusted hire date, or rehire date.

Employees Hired To

Specify the ending date to use to select employees. The report lists employees where the applicable hire date is on or after the *Employees Hired From* date and on or before the *Employees Hired To* date.

Use the *Hire Date Based On* field to specify which date to use as the applicable hire date: original hire date, adjusted hire date, or rehire date.

Include Terminated

Specify yes to include terminated employees in the update when their termination date is on or after the start of the calendar year. Employees who terminated before the start of calendar year are always excluded. Otherwise, specify no.

Inc/Exc New Hires

If you select a from or to hire date, specify if you want to include or exclude employees who have a hire date within the date range you select.

- 0** Enter **0** if you do not enter a value in *Employees Hired From* or *Employees Hired To*.
- 1** Include the employees who were hired within the hire date range you select.
- 2** Exclude the employees who were hired within the hire date range you select.

For example, if you want to mass update all new hires with safe harbor code 2D employee in a limited non-assessment period, and then you want to update the rest of your employees with a different safe harbor code, you can

enter **1** here to update the safe harbor code to 2D for your new hires, and then enter **2** here the next time you run the function to skip the new hires you previously updated.

Include Seasonal

Specify yes to include seasonal employees with a non-blank season code on their personnel master on the report. Otherwise, specify no.

Hire Date Based On

Specify the date to use as the applicable hire date.

- 1** Use the original hire date only
- 2** Use the adjusted hire date, if filled. Otherwise, use the original hire date
- 3** Use the rehire date, if filled, and then the adjusted hire date, if filled. Otherwise, use the original hire date.
- 4** Use the rehire date, if filled. Otherwise, use the original hire date
- 5** Use the rehire date only. If the rehire date is empty, omit the employee from the report.

Include EEs in Ben. ID

Specify a benefit ID if you want to select employees who have a record in the employee benefits enrollment file, PRPBE, for the benefit ID and plan you specify. The benefit plan is required if you select a benefit ID.

- If you specify **1** in the *Include/Exclude Declined* field, only employees who have a declined date on their enrollment records for the benefit ID and plan you specify are included.
- If you specify **2** in the *Include/Exclude Declined* field, employees who have a declined date on their enrollment records for the benefit ID and plan you specify are excluded.

Leave blank if you are not selecting employees based on benefit enrollment records.

When you select option **0** or **2** for the *Include/Exclude Declined* field, both employees with active enrollments and those with canceled enrollments are selected.

Include EEs in Ben. Plan

Specify a benefit plan if you want to select employees who have a record in the employee benefits enrollment file, PRPBE, for the benefit ID and plan you specify. The benefit plan is required if you select a benefit ID.

- If you specify **1** in the *Include/Exclude Declined* field, only employees who have a declined date on their enrollment records for the benefit ID and plan you specify are included.
- If you specify **2** in the *Include/Exclude Declined* field, employees who have a declined date on their enrollment records for the benefit ID and plan you specify are excluded.

Leave blank if you are not selecting employees based on benefit enrollment records.

When you select option **0** or **2** for the *Include/Exclude Declined* field, both employees with active enrollments and those with canceled enrollments are selected.

Include/Exclude Declined

Specify if you want to include or exclude employees based on whether they have a decline date on their enrollment records for the benefit ID, plan, and plan year you specify.

- | | |
|----------|---|
| 0 | Not applicable - Select this value if you want to include employees regardless of whether they have a decline date. |
| 1 | Include only employees who have a decline date on the record in the employee benefits enrollment file, PRPBE. |
| 2 | Exclude employees who have a decline date on the record in the employee benefits enrollment file, PRPBE. |

When you select option **0** or **2** for the *Include/Exclude Declined* field, both employees with active enrollments and those with canceled enrollments are selected.

Benefit Plan Year

Specify a benefit plan year if you want to select employees who have a record in the employee benefits enrollment file, PRPBE, for this plan year. The plan year is required if you selected a benefit ID and plan, and you use plan year processing.

- If you specify **1** in the *Include/Exclude Declined* field, only employees who have a declined date on their enrollment records for the benefit ID, plan, and plan year you specify are included.
- If you specify **2** in the *Include/Exclude Declined* field, employees who have a declined date on their enrollment records for the benefit ID, plan, and plan year you specify are excluded.

Leave blank if you are not selecting employees based on benefit enrollment records.

When you select option **0** or **2** for the *Include/Exclude Declined* field, both employees with active enrollments and those with canceled enrollments are selected.

Chg Declined Months Only

Specify if you want to change only the declined months between the starting and ending month range or all months.

- 0** Not applicable - Select this value if you are not processing employees based on the decline date.
 - 1** Change only the months on or after the decline date. If the decline date is the first day of the month, the declined month and the months after the declined month are changed. If the decline date is after the first day of the month, only the months after the declined month are changed.
 - 2** Change all months from the starting month through the ending month.
- 5** Press Enter. The system displays the second Mass Update 1095-C Work File page shown below.
-

6/16/16 20:40:57 Mass Update 1095-C Work File PRGAC50 PRDAC50	
Employer ZUS	Employer Group
Tax Company +	Employee Sort Order . . 1 (1, 2, 3)
Employee	Last Name
Level 1	Level 2
Level 3	Level 4
Calendar Year 2016	Trial/Final Run 0 (0, 1)
Starting Month 1	Ending Month 12
Updates	
Coverage Offer Code . . ____ +	Safe Harbor Code . . . ____ +
<u>Lowest Cost Employee Only Plan:</u>	Full/Part Time Status . _
Benefit Plan Year . . . ____ +	
Benefit ID ____ +	
Benefit Plan ____ +	
Replace Manual Updates? @ (0=No 1=Yes)	
F3=Exit F4=Prompt F10=QuikAccess F12=Previous	

Figure 18-12: Mass Update 1095-C Work File page

6 Use the information below to complete the fields on this page.

Coverage Offer Code

Specify the coverage offer code that you want to assign to records in the work file or leave field blank to update only the safe harbor code or the lowest cost employee only plan information in the work file.

Type ***BLK** to place blanks in the *Coverage Offer Code* field.

For more information about coverage offer codes, see the IRS publication instructions for Forms 1094-C and 1095-C.

Safe Harbor Code

Specify the safe harbor code that you want to assign to records in the work file or leave blank to update only the coverage offer code or the lowest cost employee only plan information in the work file.

Type ***BLK** to place blanks in the *Safe Harbor Code* field.

For more information about safe harbor codes, see the IRS publication instructions for Forms 1094-C and 1095-C.

Full/Part Time Status

Specify whether to change the full-time/part-time status. Valid values are:

- blank Do not change the full time/part time status.
- 0** Change the full-time/part-time status to **0** (part time), or not a full-time employee for ACA reporting purposes for the months you are updating.
- 1** Change the full-time/part-time status to **1** (full time) for the months you are updating.

For example, if you have new hires that are in a limited non-assessment period, you can change the *Coverage Offer Code* to **1H** (no offer of coverage), the *Safe Harbor Code* to **2D** (employee in a limited non-assessment period), and the full-time/part-time status to **0** (not a full time employee) for the time period the new hires are in a limited non-assessment period.

Benefit Plan Year

Specify the benefit plan year for the benefit plan that contains the employee-required contribution. Leave blank if you do not use plan year processing or you do not want to update the lowest cost premium for self-only minimum value coverage to the work file.

Benefit ID

Specify the Benefit ID for the benefit plan that contains the employee-required contribution. Leave blank if you do not want to update the lowest cost premium for self-only minimum value coverage to the work file.

Benefit Plan

Type the benefit plan that contains the employee-required contribution. Leave blank if you do not want to update the lowest cost premium for self-only minimum value coverage to the work file.

The employee premium is converted to a monthly amount if the premium frequency on the benefit plan is not **M** (monthly).

Replace Manual Updates?

Specify yes to update all selected records even when manual changes were made to coverage offer and safe harbor codes from the ACA Information page, but do not reset the manual update indicator.

Specify no if you do not want to update records where manual updates were made to coverage offer or safe harbor codes from the ACA Information page.

7 Press Enter.

Printing 1095-C Forms

Use the *Print 1095-C Forms* function to print 1095-C forms on 1095-C form stock.

Depending on which 1095-C form type you use, you must create a printer control for the 1095-C form printer file before you use the *Print 1095-C Forms* function for the first time. The settings for each printer control are below.

Form type	Description
Form type 0	Create a printer control for printer file PRT1095C3, containing *AFPDS for the printer device type, 66 for the page length, 132 for the page width, 6 for the lines per inch, 15 for the characters per inch, .250 for the front margin offset down, .083 for the front margin offset across, and 66 for the overflow line number.
Form type 1	Create a printer control for printer file PRT1095C4, containing *AFPDS for the printer device type, 84 for the page length, 128 for the page width, 6 for the lines per inch, 15 for the characters per inch, and 84 for the overflow line number.
Form type 2	Create a printer control for printer file PRT1095C, containing 68 for the page length, 167 for the page width, 8 for the lines per inch, 15 for the characters per inch, and 68 for the overflow line number.

To print the 1095-C forms:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
- 2 Select *Misc. Benefit Functions*.
- 3 Select *Print 1095-C Forms* [P1095C]. The system displays the Print 1095-C Forms page shown below.

12/17/15	16:35:09	Print 1095-C Forms	PRGAC50	PRDAC50
Employer	___ +	Employer Group	_____ +	
Tax Company	_____ +	Aggregated ER Group? . . .	0 (0=No 1=Yes)	
Employee	_____ +	Last Name	_____ +	
Level 1	_____ +	Level 2	_____ +	
Level 3	_____ +	Level 4	_____ +	
Calendar Year	_____	Employee Sort Order . . .	1 (1, 2, 3)	
Employer Country	___ +	Mask Tax ID?	0 (0=No 1=Yes)	
Contact Telephone Number	_____			
Include Terminated	0 (0=No 1=Yes)	Plan Start Month	_____	
Include Seasonal	0 (0=No 1=Yes)	Self Insured?	0 (0=No 1=Yes)	
Full Time/Part Time EEs	0 (0, 1, 2)	Form Type	0 (0, 1, 2)	
Include in File?	0 (0=No 1=Yes)			
F3=Exit F4=Prompt F10=QuikAccess				

Figure 18-13: Print 1095-C Forms page

4 Use the information below to complete the fields on this page.

Employer

Specify an employer or leave blank to print data by employer group. Either an employer or employer group is required.

Employer Group

Specify an employer group or leave blank if you specify an employer. Either an employer or employer group is required.

Tax Company

Specify the tax company to limit the data on the report to one tax company. Leave blank if you want to include all tax companies or if the employer you selected is not a multi-tax employer. You must specify an employer if you specify a tax company.

Aggregated ER Group?

Specify how to report employees who work in more than one employer or tax company in one calendar month.

If you specify no, employees who work in more than one employer or tax company in one calendar month are reported in all employers and tax companies in which the employee worked.

If you specify yes, these employees are reported as follows:

- If you specify an employer group and an employee works in more than one employer in the group in one calendar month, the employee is reported in the employer in which the most hours are worked during that calendar month. The employee is not reported in the other employers in the group for that calendar month.
- If you specify an employer, the employer is a multi-tax employer, and an employee works in more than one tax company in one calendar month, the employee is reported in the tax company for which the most hours are worked during that calendar month. The employee is not reported in the other tax companies in the employer for that calendar month.
- If an employee works an equal number of hours in more than one employer within the employer group or in more than one tax company in one calendar month, the employee is reported in the first employer or tax company in which the employee works in that calendar month in alphabetical order.

For more information about aggregated employer groups, see the IRS publication Instructions for Forms 1094-C and 1095-C.

Employee

Specify an employee number to limit the report to one employee. Leave blank to include all employees.

Last Name

If you do not know the employee number, you can specify the employee's last name and prompt to select the correct employee number.

Level 1

Specify a level 1 code or leave blank to include all levels.

Level 2

Specify a level 2 code or leave blank to include all levels.

Level 3

Specify a level 3 code or leave blank to include all levels.

Level 4

Specify a level 4 code or leave blank to include all levels.

Calendar Year

Specify the calendar year of the work file records to print.

Employee Sort Order

Specify the sort order for the employees on the report.

- 1** Employee number
- 2** Name
- 3** Name within levels

If you sort by levels, employees are reported under their home levels only, not the levels where the employees work.

Employer Country

Specify the country of the employer's address if the employer is not located in the US. Leave blank to print USA in Box 13 of the 1095-C form.

Mask Tax ID?

Specify yes to mask the tax ID on the 1095-C forms. The first seven characters of the tax ID, including the dashes, are replaced by asterisks (*) on the forms. Otherwise, specify no.

Contact Telephone Number

Specify the contact telephone number for the employer.

Include Terminated

Specify yes to include terminated employees on the report when their termination date is on or after the start of the calendar year. Employees who terminated before the start of calendar year are always excluded. Otherwise, specify no.

Plan Start Month

Specify a two-digit plan start month from **01** to **12** indicating the calendar month during which the plan year begins for the health plan in which the employee is offered coverage, or would be offered coverage, if the employee were eligible to participate in the plan.

If more than one plan year could apply, for instance, if the employer changes the plan year during the year, enter the earliest applicable month. If there is no health plan under which coverage is offered to the employee, enter **00**.

This box is optional for the 2017 Form 1095-C, and the employer may leave it blank. It may be mandatory for the 2018 Form 1095-C.

Include Seasonal

Specify yes to include seasonal employees with a non-blank season code on their personnel master on the report. Otherwise, specify no.

Self Insured?

Specify yes if you are a self-insured employer and want to print information on Part III of the 1095-C form (Covered Individuals). If not a self-insured employer, specify no.

You must first run the *Create 1095-C Part III Work File* function to print data on Part III of the 1095-C form.

The covered employee and all of the employee's dependents assigned to the plan are printed on Part III of the 1095-C form. The employee is printed on the last line of Part III.

Full Time/Part Time EEs

Specify whether to include only full-time, only part-time, or both full- and part-time employees.

- 0** Include both part-time and full-time employees.
- 1** Include only full-time employees. Full-time employees are defined as employees who averaged full-time weekly hours for any month in the calendar year.
- 2** Include only full-time employees and also employees whose information has been manually added to the work file when you use the *Enter New Hire*, *Update Basic Data*, or *Employee Topic List* function.

Form Type

Specify the type of 1095-C form to print.

- 0** Full Page Recipient Laser Form (8.5 x 11) N1095C (2020 and beyond) or CSBA1095C (prior to 2020)
- 1** Full Page Recipient Pressure Sealed Form (8.5 x 14) PSN1095C-PV (2020 and beyond) or PSBA1095C (prior to 2020)

2 IRS 1095-C landscape form (11 x 8.5) (1095CIRS)

Notes for form types:

- **Form Types 0 and 1:** If you are a self-insured employer and you have any employees that have more than 18 covered individuals (including the employee), only the first 18 covered individuals will be printed on the form. The employees will also be printed on an exception report, PRTP1095CX.
- **Form Type 2:** If your employer has 250 or fewer employees and you will not be filing electronically, you must use form type 2. The IRS will accept this format only on paper. You can file electronically even if your employer has fewer than 250 employees.

2020 and beyond: If you are a self-insured employer, a separate page is printed in the same spool file containing up to 13 covered individuals, including the employee. Only the first 13 covered individuals will be printed on the form. If there are more than 13 covered individuals, the employee will also be printed on an exception report, PRTP1095CX.

Prior to 2020: If you are a self-insured employer and you have any employees that have more than six covered individuals, including the employee, a separate spool file, PRT1095C2, is produced. These can be printed on the 1095-C Part III Continuation Sheet.

Include in File?

Specify yes to include the forms that are generated by this run in the submission file that you will submit to the government. Otherwise, specify no. We recommend you specify no when you run the forms in test mode. When you are ready to run the forms that you will furnish to your employees, specify yes to include the forms in the submission file.

5 Press Enter.

Filing ACA Data

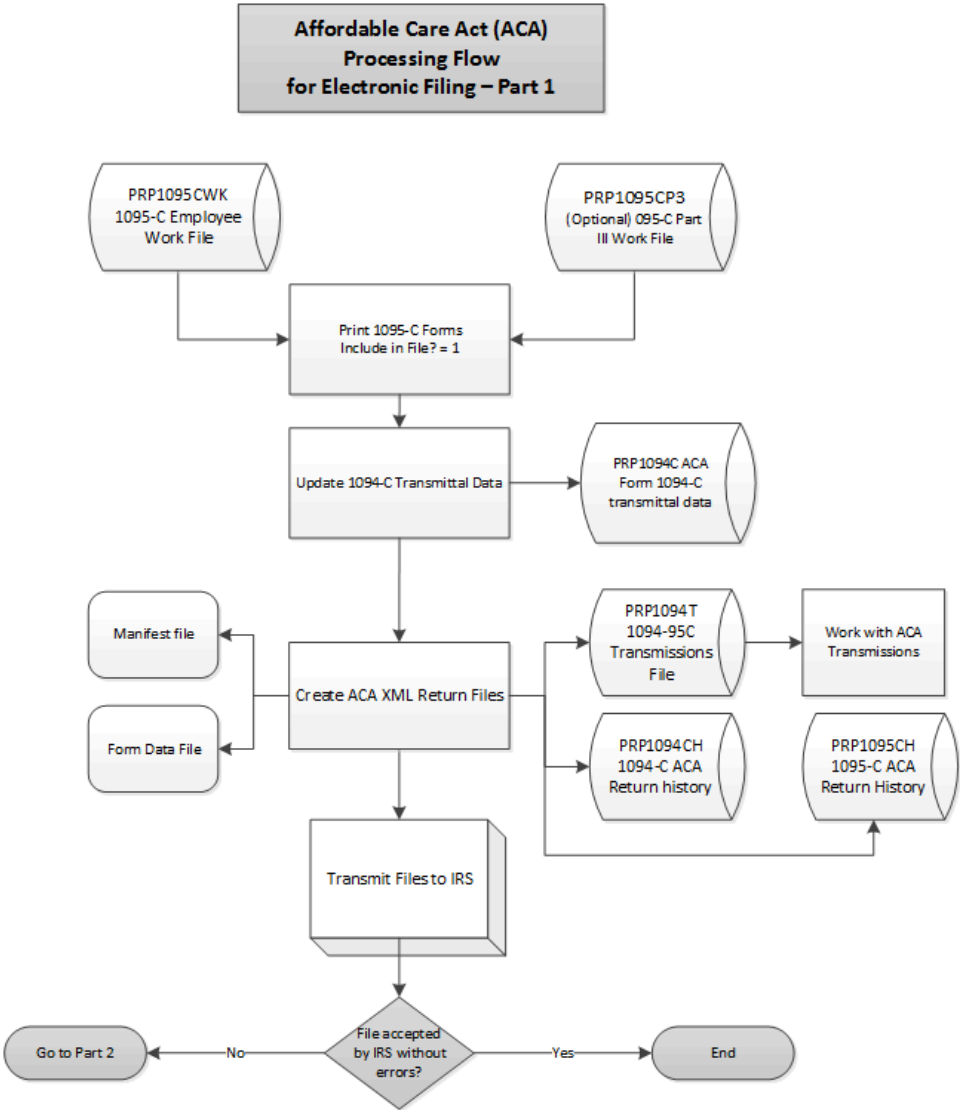


Figure 18-14: ACA information for processing for electronic filing – part 1

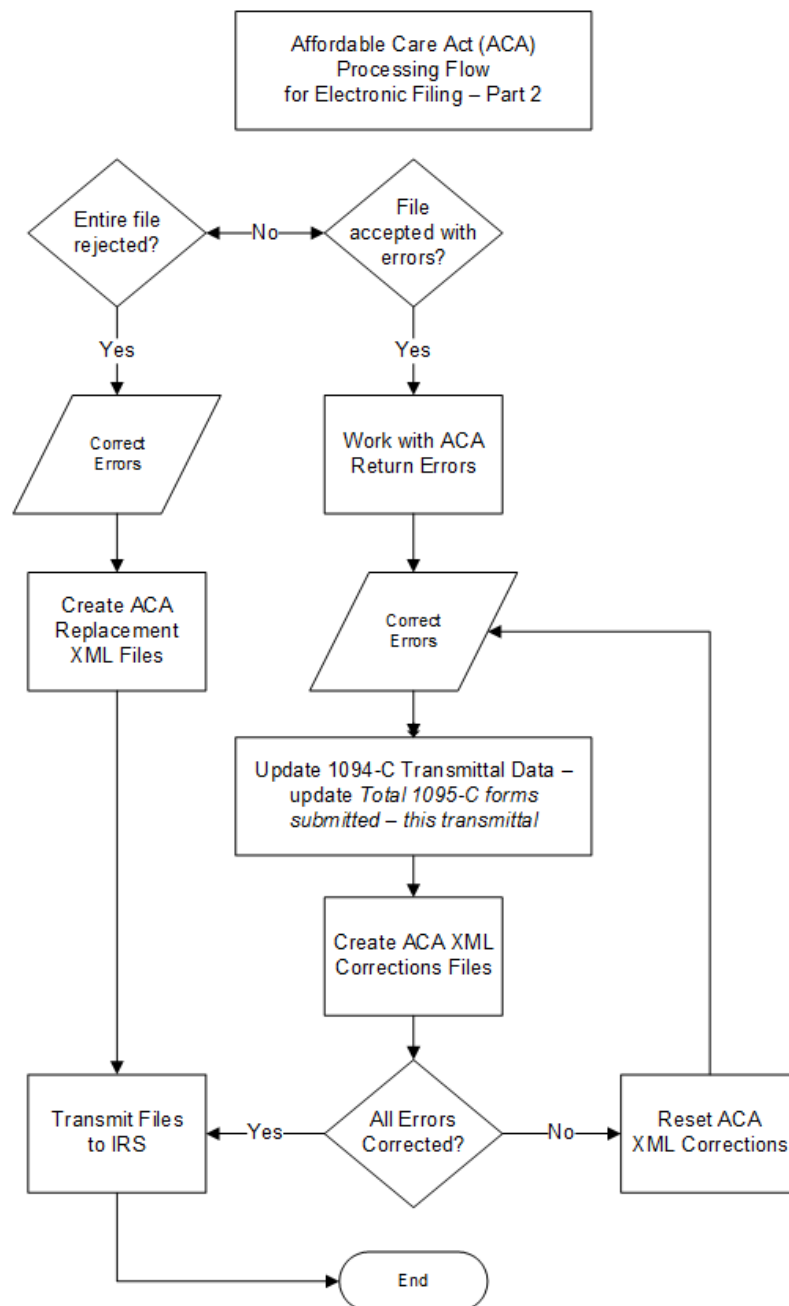


Figure 18-15: ACA information for processing for electronic filing – part 2

ACA Electronic Filing Functions

These functions on the *Misc. Benefit Functions* menu support Affordable Care Act (ACA) 1094-C and 1095-C reporting for the payroll tax year.

Function	Description
<i>Create ACA Communications Test</i>	<p>Use this function to create a test XML file that you can submit to the IRS for a one time communications test. You must set up your data to match the January test scenarios 7-0 and 7-1. For further information on the test scenarios, see the IRS ACA website.</p> <p>The <i>Create ACA Communications Test</i> function is designed to allow you to perform a communications test with the IRS ACA system by using set, fixed, test data. You must pass this communications test before the IRS ACA will certify you to transmit your actual ACA return files. After you are certified for transmission, you can then use the Test or Production indicator in the <i>ACA Return Type</i> field in the <i>Create ACA XML Return Files</i> function to transmit either a test version or production version of your actual ACA Return files.</p>
<i>Update 1094-C Transmittal Data</i>	<p>Use this function to enter the 1094-C information that is used to create the 1094-C header which will accompany the electronic returns to the IRS of the employee 1095-C forms data.</p> <p>Applicable large employers, generally employers with 50 or more full-time employees (including full-time equivalent employees) in the previous year, must file one or more Forms 1094-C.</p>
<i>Create ACA XML Return Files</i>	<p>Use this function to create the data required in XML format to enable you to make an ACA returns transmission to the IRS. An IRS transmission consists of two parts – The Manifest file and the Form Data file. The Manifest file contains information about the transmitter (customer), the transmission and its contents. The Forms Data file can contain one or more submissions. Both of these files must in the prescribed XML format.</p> <p>Note: The first time you run this function, a PEUSXML directory is created in the Integrated File System on the IBM i, and the XML documents are placed in this directory. You must take steps to ensure that the appropriate users have authority to the directory and the XML documents within it. Refer to the “Working with Documents on the Integrated File System” chapter in the <i>Infor Infinium Human Resources/Payroll Technical Guide</i> for more information.</p>

Function	Description
<i>Create ACA Replacement XML Files</i>	<p>Use this function to create replacement files, in XML format, for the electronic filing of ACA information returns to the IRS.</p> <p>You use this function when the original XML return files have been submitted to the IRS but the entire return has been rejected by them. For replacement return files you are required to provide the receipt ID of the original return files.</p>
<i>Work with ACA Transmissions</i>	<p>Use this function to display information about the transmission and to allow the receipt ID for the transmission to be recorded.</p> <p>When the <i>Create ACA XML Return Files</i> function is run, a record is written to the ACA Transmissions file, PRP1094T. This is a record of the employer/employer group, the tax year that was used, the XML file names, the totals of the 1094-C forms (submissions) and 1095-C forms, the dates, and user. The <i>Work with ACA Transmissions</i> function displays a list of existing transmissions in descending year and date order.</p>
<i>Display XML Document</i>	<p>Use this function to display the XML document that you created by using the <i>Create ACA XML Returns File</i> function.</p> <p>The naming format of the XML document that is created for the Form Data file is 1094C_Request_TTTTT_YYYYMMDDTHHMMSSSSSZ.xml, with TTTTT being the transmittal control code (TCC) that you enter on the Create ACA XML Returns File submission screen, YYYYMMDD being the current date in year/month/day format, and HHMMSSSS being the current time (hour, minute, and second).</p> <p>The naming format of the XML document that is created for the Manifest file is in a similar format but starts with Manifest1095C: Manifest1095C_TTTTT_YYYYMMDDTHHMMSSSSSZ.</p> <p>Note: Because this function runs an IBM command, it is available only from the 5250 screen. It is not available from WebTop.</p>
<i>Update ACA Default Data</i>	<p>Use this function to define the path and location of the ACA 1094-C and 1095-C forms XML schema and default parser. This function also shows the name of the default directory used by the ACA.</p>
<i>Display ACA Default Data</i>	<p>Use this function to view the information set up for defaults for ACA XML reporting.</p>

Function	Description
<i>Work with ACA Return Errors</i>	Use this function to select a transmission that has been accepted but with errors and then correct the errors reported for the transmission. When the IRS accepts your transmission but identifies errors with the 1094-C or 1095-C data, you must correct the errors and submit a correction file. To generate a correction file, you must first identify the records in the previous transmission that are in error, correct the data that is in error and then indicate that the error is corrected.
<i>Create ACA XML Corrections File</i>	Use this function to create an XML file containing records you flagged as corrected when using the <i>Work with ACA Return Errors</i> function. You must first correct the data for the employer and/or employees by using the <i>Update 1094-C Transmittal Data</i> , <i>Update Basic Data</i> , or <i>Update ACA Information</i> function display that you can access from the <i>Update Basic Data</i> or <i>Employee Topic List</i> function.
<i>Reset ACA XML Corrections</i>	Use this function to reset correction records to an In Progress state so that you can rerun the <i>Create ACA XML Corrections File</i> function, if needed. The <i>Reset ACA XML Corrections</i> function resets the <i>Transmission ID</i> , <i>Submission ID</i> , and <i>Record ID</i> fields in the appropriate 1094-C and 1095-C work file records back to the original values and sets the corrected flag in these work files from C to E to allow the XML corrections file to be re-created. Note: It is not possible to reset an earlier transmission. The transmission ID must be from the last XML corrections file that was created.
<i>List ACA XML Corrections</i>	Use this function to print a listing of corrections you entered using the <i>Work With ACA Return Errors</i> function.
<i>Validate XML Document</i>	Use this function to validate the ACA XML Returns File. We recommend you use this function before you submit the file to the IRS. Note that this function validates only the structure of the document to verify it is well formed. It does not validate the employer or employee data within the document. The validation of employer and employee data in the document is performed as part of the transmission of the XML document to the IRS. Note: Because this function runs an IBM command, it is available only from the 5250 screen. It is not available from WebTop.

Creating an ACA communications test

Create ACA Communications Test

Use the *Create ACA Communications Test* function to perform a communications test with the IRS ACA system with set, fixed, test data. You must pass this communications test before the IRS ACA certifies you to transmit your ACA return files. After you are certified to transmit files, you use the **Test** or **Production** indicator to transmit either a test version or production version of your ACA return files.

You must set up your data to match test scenarios 7-0 and 7-1. For further information on the test scenarios, go to the IRS AIR website and click **Affordable Care Act Information Returns Assurance Testing System (AATS)** and click **AATS Scenarios for January Business Rule Functionality**.

To create an ACA communications test:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Create ACA Communications Test* [CRTAIRTST]. The system displays the Create ACA Communications Test page shown below.
-

```
1/10/20  20:20:57  Create ACA Communications Test  PRGAC50  PRDAC50
-----
Employer . . . . . ___ +      Employer Group . . . . . ___ +
Tax Year . . . . . ___ +      Contact Telephone Number _____
Tax Company . . . . . _____  Plan Start Month . . . . . ___
Transmitter Control Code _____  Prior Reporting Year? . 0 (0=No 1=Yes)
Software ID . . . . . _____ +  State Program . . . . . _____
ACA Return Type . . . . . _ (P=Production T=Test)

F3=Exit  F4=Prompt  F10=QuikAccess  F12=Cancel
```

Figure 18-16: Create ACA Communications Test page

4 Use the information below to complete the fields on this page.

Employer

Specify an employer. Leave blank if you specify an *Employer Group*.

Employer Group

Specify an employer group. Leave blank if you specify an *Employer*.

Tax Year

Specify the tax year.

Contact Telephone Number

Specify the contact telephone number if the contact telephone number for the 1095-C forms is different from the contact telephone number for the 1094-C form. Do not enter dashes. If left blank here, the contact telephone number specified when you use the *Update 1094-C Transmittal Data* function is used. If the contact telephone number on the 1095-C forms is different from the contact telephone number on the 1094-C form, specify the contact telephone number for the 1095-C forms here.

Tax Company

Specify the tax company to limit the data on the file to one tax company. Leave blank if the selected employer is not a multi-tax employer. You must specify an *Employer* if you specify a *Tax Company*.

Plan Start Month

Specify the plan start month that you entered on the Print 1095-C Forms submission page.

Transmitter Control Code

Specify the transmitter control code provided by the IRS for the ACA Information Returns program.

Prior Reporting Year?

Specify no if the XML files are being created for the current reporting year, or specify yes for the prior reporting year.

If you specify that the files are being created for a prior reporting year, a value of 1 (yes) is written in the PriorYearInd tag in the Manifest XML file.

For example, if you create a file on February 15, 2024 for reporting year 2023, you are creating a file with information for the current reporting year. However, if you create a replacement or correction file on February 15, 2024 for reporting year 2022, you are creating a file with data for a prior reporting year.

Software ID

Specify the software ID provided by Infor. The software ID indicates that the software is tested and authorized by the IRS for use in the ACA Information Returns program.

For tax year 2023, the Infor software ID is 23A0016980.

State Program

Specify a valid state ACA program in this field. If a value is entered in this field, the custom state program is called, and a state-specific ACA file is created.

The system contains a sample program, PRGAIR10XX, for use as a model custom program.

Leave this field blank to create the federal ACA file.

ACA Return Type

Specify **P** for production or **T** for test to indicate the type ACA return that you are making.

- 5 Press Enter.

Updating 1094-C transmittal data

Use the *Update 1094-C Transmittal Data* function to view or modify information for the 1094-C transmittal record.

These records are used to generate an XML document when you file your 1094-C data electronically.

To update 1094-C transmittal data:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Update 1094-C Transmittal Data [UPD1094C]*. The system displays the Update 1094-C Transmittal Data employer and tax year selection page shown below.
-

```
12/17/15 13:37:49 ACA Form 1094-C Transmittal Data PRGMCT10 PRDMCT10

Subset Selections (leave blank for all)

Employer . . . . . ____ +
Tax Year . . . . . ____ +

F3=Exit F4=Prompt F10=QuikAccess F12=Cancel
```

Figure 18-17: ACA Form 1094-C Transmittal Data employer and tax year selection page

- 4 Use the information below to complete the fields on this page.

Employer

Specify an employer or leave blank to view records for all employers.

Tax Year

Specify a year to view records for the specific year within the selected employer or leave blank to view records for all years.

- 5 Press Enter. The system displays the Update 1094-C Transmittal Data record list page shown below.
-

```

12/12/16 20:52:46 ACA Form 1094-C Transmittal Data PRGMCT10 PRDMCT10

Type options, press Enter.
2=Change 4=Delete
Transmittal Employer
Opt Year Emp TaxCo Name EIN 1095Cs 1095Cs
_ 2016 JCP A & H Inc. 850412509 1 1

F3=Exit F6=Create F10=QuikAccess F12=Previous

BOTTOM

```

Figure 18-18: ACA Form 1094-C Transmittal Data record list page

On the ACA Form 1094-C Transmittal Data record list page, you can perform these actions:

- Create a 1094-C Transmittal Data record

Press F6 to display the ACA Form 1094-C Transmittal Data header page shown below.

- Update a 1094-C Transmittal Data record

Type **2** in the *Opt* field next to the record to update and press Enter to display the ACA Form 1094-C Transmittal Data header page shown below.

- Delete a 1094-C Transmittal Data record

Type **4** in the *Opt* field next to record to delete.

- 6 Press Enter. The system displays the Update 1094-C Transmittal Data record list page shown below.

```

12/12/16  20:53:38  ACA Form 1094-C Transmittal Data  PRGMCT20  PRDMCT20
                                                New Record

Employer . . . . . ___ +

Tax Year . . . . . ___ +

Tax Company . . . . . _____ +  (leave blank if employer not multitax)

Last Updated . . . . .          at          by

ACA Return File Name :
Transmission ID . . . :
Creation Date . . . . :

F4=Prompt  F10=QuikAccess  F12=Cancel

```

Figure 18-19: ACA Form 1094-C Transmittal Data header page

After you create a record, you can only view the information on the page. If you need to make changes to the information on this page, you must delete the record and create a new one with the correct information.

This page displays audit information for the date, time, and user who made the last change to the detail information on the pages that follow.

This page also displays the transmission ID and transmission date, if the 1094-C data was extracted into an XML document for transmission to the IRS.

- 7 Use the information below to complete the fields on this page.

Employer

Specify the employer.

Tax Year

Specify the tax year.

Tax Company

Specify the tax company if your employer uses multi-tax processing.

Leave blank if your employer does not use multi-tax processing or does not use it for the specified year.

- Press Enter. The system displays the Update 1094-C Transmittal Data Part I page shown below.

```

12/12/16 20:55:32 ACA Form 1094-C Transmittal Data PRGMCT20 PRDMCT20
Tax Year . . . . . : 2016 New Record
Employer . . . . . : JCP Tax Company . . . . . :
PART I
Employer Name . . THE GENERAL STORE Employer EIN 850412509
Street Address 1 . 53 STATE STREET
Street Address 2 . SUITE 500
City/Town . . . . BOSTON
State/Province . . MA + Zip/Post Code 02109-1234
Country Code . . . + (foreign only) Suffix
Contact Name F/M/L _____
Contact Tel No . . _____
----- Designated Govt Entity - only enter if applicable -----
Govt Entity Name . _____ Employer EIN 000000000
Street Address 1 . _____
Street Address 2 . _____
City/Town . . . . _____
State/Province . . . + Zip/Post Code _____
Country Code . . . + (foreign only) Suffix
Contact Name F/M/L _____
Contact Tel No . . _____

F4=Prompt F10=QuikAccess F12=Previous
    
```

Figure 18-20: ACA Form 1094-C Transmittal Data Part I page

- Use the information below to complete the fields on this page.

Employer Name

Specify an employer.

Employer EIN

Specify the employer identification number (EIN) for this employer.

Enter only the digits. The system inserts a dash in position 3 to generate a number in the format XX-XXXXXXX, when needed.

Sequential numbers, such as 123456789, and numbers that are all the same digits, such as 111111111, are not allowed.

Street Address 1

Specify the first line of the employer address, which should match the employer's address on Form 1095-C.

Street Address 2

Specify the second line of the employer address, which should match the employer's address on Form 1095-C.

City/Town

Specify the city or town of the employer address, which should match the employer's address on Form 1095-C.

State/Province

Specify the state or province of the employer address, which should match the employer's address on Form 1095-C.

Zip/Post Code

Specify the ZIP or postal code of the employer address, which should match the employer's address on Form 1095-C.

Country Code

Specify the foreign country code of the employer if the main address is not in the US. The IRS requires that the foreign country code must be provided as a two-character code as defined in the ISO 3166 standard.

You define the foreign country code as an employer code type CTR.

Contact Name F/M/L

Specify the first, middle, and last name of the person to contact who is responsible for answering any questions.

Suffix

Specify the suffix of name of the person to contact who is responsible for answering any questions. For example: Jr., III

Contact Tel No

Specify the telephone number of the person to contact who is responsible for answering any questions.

Govt Entity Name

When applicable, specify the name of the Designated Governmental Entity filing on behalf of an employer.

Employer EIN

When applicable, specify the employer identification number (EIN) for the Designated Governmental Entity filing on behalf of an employer.

Enter only the digits. The system inserts a dash in position 3 to generate a number in the format XX-XXXXXXX, when needed.

Sequential numbers, such as 123456789, and numbers that are all the same digits, such as 111111111, are not allowed.

Street Address 1

When applicable, specify the first line of the address of the Designated Governmental Entity filing on behalf of an employer.

Street Address 2

When applicable, specify the second line of the address of the Designated Governmental Entity filing on behalf of an employer.

City/Town

When applicable, specify the city or town of the address of the Designated Governmental Entity filing on behalf of an employer.

State/Province

When applicable, specify the state or province of the address of the Designated Governmental Entity filing on behalf of an employer.

Zip/Post Code

When applicable, specify the ZIP or postal code of the address of the Designated Governmental Entity filing on behalf of an employer.

Country Code

Specify the foreign country code of the employer if the main address is not in the US. The IRS requires that the foreign country code must be provided as a two-character code as defined in the ISO 3166 standard.

You define the foreign country code as an employer code type CTR.

Contact Name F/M/L

When applicable, specify the first, middle, and last name of the person to contact who is responsible for answering any questions for the Designated Governmental Entity filing on behalf of an employer.

Suffix

Specify the suffix of name of the person to contact who is responsible for answering any questions. For example: Jr., III

Contact Tel No

When applicable, specify the telephone number of the person to contact who is responsible for answering any questions for the Designated Governmental Entity filing on behalf of an employer.

- 10** Press Enter. The system displays the Update 1094-C Transmittal Data Parts I and II page shown below.

```

12/12/16 20:56:44 ACA Form 1094-C Transmittal Data PRGMCT20 PRDMCT20
Tax Year . . . . . : 2016 New Record
Employer . . . . . : JCP Tax Company . . . . . :

Total 1095-C Forms submitted - this transmittal ____ 0

PART II (Infor Infinium only supports Authoritative Transmittals)
Authoritative Transmittal? . . . . . _ (0=No 1=Yes)
Total 1095-C Forms filed - by ALE member . . . ____ 0
Member of Aggregated Group . . . . . _

(0=No 1=Yes)
A. Qualifying Offer Method . . . . . _ (0=No 1=Yes)
B. Reserved (2016 and later) . . . . . (0=No 1=Yes)
C. Section 4980H Transition Relief . . . . . _ (0=No 1=Yes)
D. 98% Offer Method . . . . . _ (0=No 1=Yes)

Declarations
Jurat signature PIN . . . . . _____
Title of signatory . . . . . _____
Date of signature . . . . . _____

F10=QuikAccess F12=Previous

```

Figure 18-21: ACA Form 1094-C Transmittal Data Parts I and II page

- 11** Use the information below to complete the fields on this page. Also, see the IRS "Instructions for Forms 1094-C and 1095-C" document for more information on what information to enter on this page.

Total 1095-C Forms submitted - this transmittal

Specify the total number of Forms 1095-C that are being submitted with this Form 1094-C transmittal.

Authoritative Transmittal?

Specify yes if this transmittal is the authoritative transmittal for this ALE Member. Otherwise, specify no. Infor Infinium HCM supports the file submission only as an authoritative transmittal.

Total 1095-C Forms filed - by ALE member

When applicable, specify the total number of Forms 1095-C that will be filed by and/or on behalf of the employer.

Member of Aggregated Group

When this is the authoritative transmittal record, specify yes if the employer is a member of an Aggregated ALE Group during any month of the calendar year. If not a member, specify no.

Leave blank when this is not an authoritative transmittal.

A. Qualifying Offer Method

Specify yes if the employer is eligible to use and is using the Qualifying Offer Method to report the information on Form 1095-C for one or more full-time employees. Otherwise, specify no.

B. Qualifying Offer Method Transition Relief/Reserved (2016) and later

Specify yes if the employer is eligible to use and is using the Qualifying Offer Method Transition Relief for the 2015 calendar year to report the information on Form 1095-C for one or more full-time employees. Otherwise, specify no.

This field was removed from the 1095-C form starting with tax year 2016.

C. Section 4980H Transition Relief

Specify yes if the employer is eligible for section 4980H Transition Relief. Otherwise, specify no.

D. 98% Offer Method

Specify yes if the employer is eligible to use and is using the 98% Offer Method. Otherwise, specify no.

Jurat signature PIN

Specify the Jurat signature PIN used for electronic filing. See the IRS website for more information on what to enter here.

Title of signatory

Specify the title of the person signing the transmittal. See the IRS website for more information on what to enter here.

Date of signature

Specify the signature date of the transmittal. See the IRS website for more information on what to enter here.

- 12 Press Enter. The system displays the Update 1094-C Transmittal Data Part III page shown below.

12/12/16 20:57:50 ACA Form 1094-C Transmittal Data PRGMCT20 PRDMCT20		Tax Year : 2016		New Record	
Employer : JCP		Tax Company :			
PART III (0=No,1=Yes)		(0=No,1=Yes)			
	Minimum Essential Coverage Offer	Full Time Employee Count for ALE	Total Employee Count for ALE	Aggr Grp	Sect4980H Relief
All 12 Months->	-	0	0	-	-
Jan	-	0	0	-	-
Feb	-	0	0	-	-
Mar	-	0	0	-	-
Apr	-	0	0	-	-
May	-	0	0	-	-
Jun	-	0	0	-	-
Jul	-	0	0	-	-
Aug	-	0	0	-	-
Sep	-	0	0	-	-
Oct	-	0	0	-	-
Nov	-	0	0	-	-
Dec	-	0	0	-	-

F10=QuikAccess F12=Previous

Figure 18-22: ACA Form 1094-C Transmittal Data Part III page

- 13 Use the information below to complete the fields on this page. Also, see the IRS "Instructions for Forms 1094-C and 1095-C" document for more information on what information to enter on this page.

Minimum Essential Coverage Offer

Specify yes if the employer offered minimum essential coverage to at least 95% of its full-time employees and their dependents for all 12 months and for each month of the calendar year. If not offered to at least 95% of full-time employees and their dependents, specify no. If not applicable, leave blank.

Full Time Employee Count for ALE

Specify the number of full-time employees, but do not include any employees in a Limited Non-Assessment Period for all 12 months and for each month of the calendar year.

Total Employee Count for ALE

Specify the total number of employees, including full-time employees, non-full-time employees and employees in a Limited Non-Assessment Period, for all 12 months and for each month of the calendar year.

Aggr Grp

Specify yes if the employer was a member of an Aggregated ALE Group for all 12 months and for each month of the calendar year. If the employer was not a member, specify no.

If you specify yes for one or more months, you must also complete Part IV.

Leave blank if not applicable.

Sect4980H Relief

Specify whether the employer is eligible for Section 4980H Transition Relief for all 12 months and for each month of the calendar year.

- Blank** Not applicable
- A** Eligible for the 50 to 99 Relief
- B** Eligible for the 100 or More Relief

- 14 Press Enter. The system displays the first Update 1094-C Transmittal Data Part IV page shown below.
-

```

12/12/16 20:59:21 ACA Form 1094-C Transmittal Data PRGMCT20 PRDMCT20
Tax Year . . . . . : 2016 New Record
Employer . . . . . : JCP Tax Company . . . . . :
PART IV

      Name                EIN
01 _____ 000000000
02 _____ 000000000
03 _____ 000000000
04 _____ 000000000
05 _____ 000000000
06 _____ 000000000
07 _____ 000000000
08 _____ 000000000
09 _____ 000000000
10 _____ 000000000
11 _____ 000000000
12 _____ 000000000
13 _____ 000000000
14 _____ 000000000
15 _____ 000000000

F3=Exit/Update F10=QuikAccess F12=Previous

```

Figure 18-23: ACA Form 1094-C Transmittal Data Part IV page 1

- 15** Use the information below to complete the fields on this page. Also, see the IRS "Instructions for Forms 1094-C and 1095-C" document for more information on what information to enter on this page.

Name

When applicable, specify the names of the other ALE Group members.

EIN

When applicable, specify the EINs of the other ALE Group members.

- 16** Press Enter. The system displays the second Update 1094-C Transmittal Data Part IV page shown below.


```
12/12/16 21:00:35 ACA Form 1094-C Transmittal Data PRGMCT20 PRDMCT20
Tax Year . . . . . : 2016 New Record
Employer . . . . . : JCP Tax Company . . . . . :
PART IV

      Name                EIN
16 _____ 000000000
17 _____ 000000000
18 _____ 000000000
19 _____ 000000000
20 _____ 000000000
21 _____ 000000000
22 _____ 000000000
23 _____ 000000000
24 _____ 000000000
25 _____ 000000000
26 _____ 000000000
27 _____ 000000000
28 _____ 000000000
29 _____ 000000000
30 _____ 000000000

F3=Exit/Update F10=QuikAccess F12=Previous
```

Figure 18-24: ACA Form 1094-C Transmittal Data Part IV page 2

17 Use the information below to complete the fields on this page. Also, see the IRS "Instructions for Forms 1094-C and 1095-C" document for more information on what information to enter on this page.

Name

When applicable, specify the names of the other ALE Group members.

EIN

When applicable, specify the EINs of the other ALE Group members.

18 Press Enter.

Creating ACA XML return files

Use the *Create ACA XML Return Files* function to create files, in XML format, for the electronic filing of information returns to the Internal Revenue Service to comply with regulations of the Affordable Care Act. These returns contain details of employees' health insurance coverage and other related data as defined in forms 1094-C and 1095-C.

The *Create ACA XML Return Files* function creates two separate XML files: the manifest file and the form data file. The manifest file contains information

about the transmitter, the transmission, and its contents. The forms data file can contain one or more submissions. A submission comprises one 1094-C form and one or more 1095-C forms.

The XML files are created in the PEUSXML folder on the IFS.

To create ACA XML return files:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
- 2 Select *Misc. Benefit Functions*.
- 3 Select *Create ACA XML Return Files [CRTAIRXML]*. The system displays the Create ACA XML Return Files page shown below.

1/10/20	20:15:04	Create ACA XML Return Files	PRGAC50	PRDAC50
Employer	___ +	Employer Group	___ +	
Tax Year	___ +	Contact Telephone Number	_____	
Tax Company	_____	Plan Start Month	___	
Transmitter Control Code	_____	Prior Reporting Year?	0 (0=No 1=Yes)	
Software ID	_____ +	State Program	_____	
ACA Return Type	___ (P=Production T=Test)			
F3=Exit F4=Prompt F10=QuikAccess F12=Cancel				

Figure 18-25: Create ACA XML Return Files page

- 4 Use the information below to complete the fields on this page.

Employer

Specify an employer. Leave blank if you specify an *Employer Group*.

Employer Group

Specify an employer group. Leave blank if you specify an *Employer*.

Tax Year

Specify the tax year.

Contact Telephone Number

Specify the contact telephone number if the contact telephone number for the 1095-C forms is different from the contact telephone number for the 1094-C form. Do not enter dashes. If left blank here, the contact telephone number specified when you use the *Update 1094-C Transmittal Data* function is used. If the contact telephone number on the 1095-C forms is different from the contact telephone number on the 1094-C form, specify the contact telephone number for the 1095-C forms here.

Tax Company

Specify the tax company to limit the data on the file to one tax company. Leave blank if the selected employer is not a multi-tax employer. You must specify an *Employer* if you specify a *Tax Company*.

Plan Start Month

Specify the plan start month that you entered on the Print 1095-C Forms submission page.

Transmitter Control Code

Specify the transmitter control code provided by the IRS for the ACA Information Returns program.

Prior Reporting Year?

Specify no if the XML files are being created for the current reporting year, or specify yes for the prior reporting year.

If you specify that the files are being created for a prior reporting year, a value of 1 (yes) is written in the *PriorYearInd* tag in the Manifest XML file.

For example, if you create a file on February 15, 2024 for reporting year 2023, you are creating a file with information for the current reporting year. However, if you create a replacement or correction file on February 15, 2024 for reporting year 2022, you are creating a file with data for a prior reporting year.

Software ID

Specify the software ID provided by Infor. The software ID indicates that the software is tested and authorized by the IRS for use in the ACA Information Returns program.

For tax year 2023, the Infor software ID is 23A0016980.

State Program

Specify a valid state ACA program in this field. If a value is entered in this field, the custom state program is called, and a state-specific ACA file is created.

The system contains a sample program, PRGAIR10XX, for use as a model custom program.

Leave this field blank to create the federal ACA file.

ACA Return Type

Specify **P** for production or **T** for test to indicate the type ACA return that you are making.

- 5 Press Enter.

Creating ACA replacement xml files

Use the *Create ACA Replacement XML Files* function to create replacement files, in XML format, for the electronic filing of ACA information returns to the IRS.

Use the *Create ACA Replacement XML Files* function when the original XML return files have been submitted to the IRS but the entire return has been rejected by them. For replacement return files, you are required to provide the receipt ID of the original return files.

To create ACA replacement XML files:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Create ACA Replacement XML Files* [CRTRPLXML]. The system displays the Create ACA Replacement XML Files page shown below.
-

```

1/10/20   20:23:15   Create ACA Replacement XML Files   PRGAC50   PRDAC50
-----
Employer . . . . . ___ +           Employer Group . . . . . _____ +
Tax Year . . . . . _____ +     Contact Telephone Number _____
Tax Company . . . . . _____ +   Plan Start Month . . . . . ___
Transmitter Control Code _____  Prior Reporting Year? . 0 (0=No 1=Yes)
Software ID . . . . . _____ +   State Program . . . . . _____
ACA Return Type . . . . . _ (P=Production T=Test)
Receipt ID . . . . . _____ +

F3=Exit  F4=Prompt  F10=QuikAccess  F12=Cancel
    
```

Figure 18-26: Create ACA Replacement XML Files page

4 Use the information below to complete the fields on this page.

Employer

Specify an employer. Leave blank if you specify an *Employer Group*.

Employer Group

Specify an employer group. Leave blank if you specify an *Employer*.

Tax Year

Specify the tax year.

Contact Telephone Number

Specify the contact telephone number if the contact telephone number for the 1095-C forms is different from the contact telephone number for the 1094-C form. Do not enter dashes. If left blank here, the contact telephone number specified when you use the *Update 1094-C Transmittal Data* function is used. If the contact telephone number on the 1095-C forms is different from the contact telephone number on the 1094-C form, specify the contact telephone number for the 1095-C forms here.

Tax Company

Specify the tax company to limit the data on the file to one tax company. Leave blank if the selected employer is not a multi-tax employer. You must specify an *Employer* if you specify a *Tax Company*.

Plan Start Month

Specify the plan start month that you entered on the Print 1095-C Forms submission page.

Transmitter Control Code

Specify the transmitter control code provided by the IRS for the ACA Information Returns program.

Prior Reporting Year?

Specify no if the XML files are being created for the current reporting year, or specify yes for the prior reporting year.

If you specify that the files are being created for a prior reporting year, a value of 1 (yes) is written in the PriorYearInd tag in the Manifest XML file.

For example, if you create a file on February 15, 2024 for reporting year 2023, you are creating a file with information for the current reporting year. However, if you create a replacement or correction file on February 15, 2024 for reporting year 2022, you are creating a file with data for a prior reporting year.

Software ID

Specify the software ID provided by Infor. The software ID indicates that the software is tested and authorized by the IRS for use in the ACA Information Returns program.

For tax year 2023, the Infor software ID is 23A0016980.

State Program

Specify a valid state ACA program in this field. If a value is entered in this field, the custom state program is called, and a state-specific ACA file is created.

The system contains a sample program, PRGAIR10XX, for use as a model custom program.

Leave this field blank to create the federal ACA file.

ACA Return Type

Specify **P** for production or **T** for test to indicate the type ACA return that you are making.

Receipt ID

Specify the receipt ID of the transmission for which you want to create a replacement XML return file.

The receipt ID of the transmission is provided in the web browser at the time the ACA return is uploaded and accepted by the IRS.

The receipt ID has the structure 1095C-NN-NNNNNNNN where N is numeric and uniquely identifies the transmission. You would usually record the receipt ID in the *Receipt ID* field on the original ACA transmission record.

- 5 Press Enter.

Working with ACA transmissions

Use the *Work with ACA Transmissions* function display information about ACA transmissions and to record the receipt ID for the transmission.

When you run any of the functions that create ACA XML files, a record is written to the ACA Transmissions file, providing a record of the employer/employer group, the tax year that was used, the XML file names, the totals of the 1094-C submissions and 1095-C forms, the dates, and user.

The *Work with ACA Transmissions* function displays a list of those transmission records in descending year and date order.

To work with ACA transmissions:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Work with ACA Transmissions* [WRKAIRTRAN]. The system displays the Work with ACA Transmissions page shown below.
-

```

6/15/16 13:44:23      Work with ACA Transmissions      PRGMTQ10  PRDMTQ10

Type options, press Enter.
2=Change  4=Delete
Opt Year ER/Grp Date      1095Cs File Name
- 2014  ZYU   5/09/2016    279 1094C_Request_DH509_20160509T173200312Z
  TaxCo      17:32 Type 0 PROD ReceiptID
- 2014  ZM4   5/04/2016     43 1094C_Request_DH820_20160504T161732533Z
  TaxCo TAX03 16:17 Type R PROD ReceiptID 1095C-DH-05031604
- 2014  ZYU   5/04/2016    279 1094C_Request_DH810_20160504T161658283Z
  TaxCo      16:16 Type R PROD ReceiptID 1095C-DH-05031605
- 2014  ZM4   5/03/2016     43 1094C_Request_DH750_20160503T175632997Z
  TaxCo TAX03 17:56 Type 0 PROD ReceiptID 1095C-DH-05031643
- 2014  ZM4   5/03/2016    631 1094C_Request_DH650_20160503T175606227Z
  TaxCo TAX01 17:56 Type 0 PROD ReceiptID 1095C-DH-05031641
- 2014  ZYU   5/02/2016    279 1094C_Request_DH530_20160502T181358187Z
  TaxCo      18:13 Type 0 PROD ReceiptID 1095C-14-DH000001

                                                    BOTTOM

F3=Exit  F5=Fold/Unfold  F10=QuikAccess  F12=Cancel

```

Figure 18-27: Work with ACA Transmissions page

On the Work with ACA Transmissions page, you can perform these actions:

- Change an ACA transmission receipt ID

Type **2** in the *Opt* field next to transmission to change and press Enter to display the Update ACA Returns Transmissions page shown below.

- Delete an ACA transmission record

Type **4** in the *Opt* field next to transmission to delete

- Display ACA transmission details

From the summary view, press F5 or click Fold/Unfold from Actions.

- Hide ACA transmission details

Press F5 or click Fold/Unfold from Actions.

- 4 If you are changing an ACA transmission receipt ID, press Enter. The system displays the Update ACA Returns Transmissions page shown below.


```

12/17/15 14:35:07 Update ACA Returns Transmissions PRGMTQ20 PRDMTQ20

Employer . . . . . : AC1 Amazon Information
Employer Group . . . . :
Tax Year . . . . . : 2014
Tax Company . . . . . :
Creation Date and Time 10/07/2015 8:26
ACA Returns Type . . . : Originals - Test File
ACA Return File Name : 1094C_Request_BB07X_20151007T082631214Z.xml
Size in bytes . . . . : 18325
Transmission ID . . . : 04ce2c01-81a0-19c4-a983-0004ac14a74c:SYS12:BB07X::T
Manifest File Name . . : Manifest1095C_BB07X_20151007T082631667Z.xml
Total Submissions . . : 1
Total 1095-C Forms . . : 3

Receipt ID . . . . . 1095C-AC-11111111

Comments . . . . . _____

Last Updated . . . . . 10/07/2015 at 8:27:41 by JCP

F3=Exit F10=QuikAccess F12=Cancel
    
```

Figure 18-28: Update ACA Returns Transmissions page

- 5 Use the information below to complete the fields on this page.

Receipt ID

Specify the receipt ID of the transmission as provided in the web browser at the time the ACA Return was uploaded and accepted by the IRS. The receipt ID has the structure 1095C-NN-NNNNNNNN where N is numeric. The receipt ID uniquely identifies the transmission. You will be requested to enter this receipt ID when you request an acknowledgment of the ACA Return transmission.

Comments

Specify any comments related to the transmission.

- 6 Press Enter.

Updating ACA XML default data

Use the *Update ACA XML Default Data* function to change the ACA default data used when generating the XML file for 1094-C and 1095-C reporting.

Values that you enter here are used as default values for the creation of the XML files for the 1094-C and 1095-C reporting for the IRS ACA system.

You can also use the *Display ACA XML Default Data* function to view the information set up as default data for the ACA XML reporting.

To update ACA XML default data:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
- 2 Select *Misc. Benefit Functions*.
- 3 Select *Update ACA XML Default Data* [UPDXMLACA]. The system displays the Update ACA XML Default Data page shown below.

```

12/17/15  14:52:26          Update XML Default Data          PRGMX2AC  PRDMX2AC

U.S. ACA Default Information

Default Directory for ACA XML Documents
/PEUSXML

Default Path/Schema for validating ACA XML Documents
/PEUSXML2015V3/MSG/IRS-Form1094-1095CTransmitterUpstreamMessage.xsd

Default Parser Path/Name
/PYCANXMLMISC/MSV-20090415/MSV.JAR

F3=Exit  F10=QuikAccess

```

Figure 18-29: Update ACA XML Default Data page

- 4 Use the information below to complete the fields on this page.

Default Directory for ACA XML Documents

The entry here is the name of the default directory where the ACA XML documents are located on the Integrated File System(IFS). The default directory name is PEUSXML.

Default Path/Schema for validating ACA XML Documents

Type the name of the default schema that must be used to validate U.S. 1094-C and 1095-C XML documents. Enter the schema and path name exactly as named by the IRS.

When you type the schema name here, the system shows the default value in the *Schema Name* field on the Validate ACA XML Returns File page. When the IRS has different schema names for each XML file, you must select one value as the default, but you can override the default name at the time you validate the other file.

At the time of publication of this guide, the schemas for validating the files are:

- 1094-C/1095-C forms XML file:
IRS-Form1094-1095CTransmitterUpstreamMessage.xsd.
- Manifest XML file:
IRS-ACAUserInterfaceHeaderMessage.xsd.

You can type the name with or without a leading forward slash (/). The system requires a leading / to build the system command properly and adds the / if it is missing from the value you type.

Default Parser Path/Name

Type the name of the default validating parser that must be used to validate XML documents.

Consult your IT department for the name and directory path of a validating parser on your system. When you type the name and directory path for the parser here, the system enters the default value in the *Parser name/class* field on the Validate ACA XML Returns File page.

- 5 Press Enter.

Working with ACA return errors

Use the *Work with ACA Return Errors* function to select a transmission that has been accepted but with errors and then add, change, or view the errors reported for the transmission.

When the IRS accepts your transmission but identifies errors with the 1094-C or 1095-C data, you must correct the errors and submit a correction file.

To generate a correction file, you must first identify the records in the previous transmission that were in error, correct the data, and indicate that the error has been corrected.

You use the *Work with ACA Return Errors* function to identify the records that are in error and indicate that the data has been corrected so that when you

run the *Create ACA XML Corrections File* function, the corrected records are included in the corrections file.

To work with ACA return errors:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
- 2 Select *Misc. Benefit Functions*.
- 3 Select *Work with ACA Return Errors [WWARE]*. The system displays the Work with Errors-Select Receipt ID page shown below.

```

12/16/15 17:51:15      Work With Errors-Select Receipt ID PRGACE10  PRDACE10

2=Update  5=Display
Opt Receipt ID      Type Year ER/Grp Tax Co Trans Date
- 1095C-JX-00000002  0  2015 JCX   TAX02 12/15/2015
- 1095C-JX-00000001  0  2015 JCX   TAX01 12/15/2015
- 1095C-JP-00000001  0  2015 JCP           12/16/2015 Errors attached
- 1095C-DH-12000000  C  2015 ZYH           12/16/2015
- 1095C-DH-10000000  0  2015 ZYH           12/16/2015
- 1095C-AC-11111111  0  2014 AC1           10/07/2015 Errors attached

                                                    BOTTOM

F3=Exit  F10=QuikAccess  F12=Cancel

```

Figure 18-30: Work with Errors-Select Receipt ID page

On the Work with Errors-Select Receipt ID page, you can perform these actions:

- Update a transmission
 - Type **2** in the *Opt* field next to transmission to change and press Enter to display the page shown below.
- Display a transmission
 - Type **5** in the *Opt* field next to transmission to display.

- 4 Press Enter. The Work with ACA Return Errors page is displayed.

```

12/12/16 20:41:54      Work With ACA Return Errors      PRGACE20  PRDACE20

Tax Year . . . . . : 2016              Receipt ID . . . . : 1095C-RR-00000001
Transmission Date : 11/28/2016
Transmission ID . . : 1bb7883b-5fd0-19e5-9948-0004ac1ae979:SYS12:BB07X::T
Employer . . . . . : ___ +              Tax Company . . . . : ___ +
Employee Number . . : _____ +      Error Code . . . . . : _____
Correction Status . 2 (0=Uncorrected, 1=Corrected, 2=All)
2=Update 4=Delete 5=Display
Opt ER TaxCo Employee Name      Error Code      Corr Filed
_ JCP          17167 BAKER, JENNIE P      ACE00000000001      Yes No

                                                    BOTTOM

F3=Exit F4=Prompt F6=Create F10=QuikAccess F12=Cancel
    
```

Figure 18-31: Work with ACA Return Errors page

On the Work with ACA Return Errors page, you can perform these actions:

- Create a return error record

Press F6 to display the Create ACA Return Error page shown below.
- Update a return error record

Type 2 in the *Opt* field next to the error record to update and press Enter to display the Update ACA Return Error page similar to the Create ACA Return Error page shown below. You can only update an error record that has not already been included in a corrections transmission. If the record was already included in a corrections transmission, the system shows the record in display mode.
- View a return error record

Type 5 in the *Opt* field next to the error record to view.
- Delete a return error record

Type 4 in the *Opt* field next to the error record to delete.

5 Use the information below to filter the list on this page.

Employer

Specify the employer whose errors to list.

Tax Company

Specify the tax company whose errors to list.

Employee Number

Specify the employee whose errors to list.

Error Code

Specify the code for the errors to list.

Correction Status

Specify whether to list only uncorrected, corrected, or all errors.

- 6 Press Enter to refresh the page.
- 7 If you are creating an ACA return error record, press F6. The Create ACA Return Error page is displayed.

```

12/12/16  20:33:00          Create ACA Return Error          PRGACE30  PRDACE30

Tax Year . . . . . : 2015                Receipt ID . . . . . : 1095C-15-20152015
Transmission Date : 6/30/2016
Transmission ID . . : 6eadac01-80fb-19d9-a983-0004ac14a74c:SYS12:BB07X::T
Employer . . . . . :

Error Record ID . . _____
Error Code . . . . . _____
Error Description .
_____
_____

Data Corrected . . . @ (0=No 1=Yes)
Corrected By . . . . _____
Comments . . . . . _____
XPATH Content . . . _____
_____
_____

F3=Exit  F10=QuikAccess  F12=Cancel

```

Figure 18-32: Create ACA Return Error page

- 8 Use the information below to complete the fields on this page.

Error Record ID

Specify a unique error identifier given to you by the IRS:

- When an error is related to 1094-C submission information, it is assigned a unique submission ID in the format RECEIPTID|SID
- When an error is related to 1095-C employee information, it is assigned a unique record ID in the format RECEIPTID|SID|RID

For example, if a transmission containing one submission with five employees was successfully uploaded to the IRS and the receipt ID that was generated for the transmission was 1095C-01-00001234:

- An error ID for 1094-C data could be 1095C-01-00001234|1
- An error ID for 1095-C employee data could be 1095C-01-00001234|1|4

Refer to the IRS website for more detailed information on errors.

The maximum size of the submission ID (SID) is three digits, and the maximum size of the record ID (RID) is six digits.

Error Code

Specify the error code reported to you by the IRS for this error.

Error Description

Enter a description of the error reported to you by the IRS for this error.

Data Corrected

Specify yes if you corrected this error in the applicable 1094-C transmittal data file or the applicable employee 1095-C work file. If not corrected, specify no. When all errors for an employee have been corrected, the employee can be included in a correction transmission file.

Corrected By

Specify the person who made the correction in the applicable data file, for reference.

Comments

Enter any additional comments.

XPATH Content

Specify the XPATH value reported to you by the IRS for this error.

The XPATH content indicates the specific data element and instance in an enumerated group, if applicable, where the error was found.

For example, if an employer is self-insured and has to report all of the covered individuals for an employee, and an error occurs with the birth date of the second covered individual, the XPATH might look like this:

Form109495CTransmittalUpstream/Form1094CUpstreamDetail/Form1095CUpstreamDetail/CoveredIndividualGrp[2]/BirthDt

9 Press Enter.

Creating an ACA corrections file

Use the *Create ACA XML Corrections File* function to create an XML file of corrections that you entered by using the *Work With ACA Return Errors* function.

Before you create the corrections file, use the *Update 1094-C Transmittal Data* function to enter the number of 1095-C forms you are correcting in the *Total 1095-C Forms submitted - this transmittal* field.

Note: If you are correcting the number of 1095-C forms attached from a previous transmission, you will only be submitting a 1094-C form correction. In this case, enter the correct number of 1095-C forms in the *Total 1095-C Forms submitted - this transmittal* field, even though no 1095-C forms will be transmitted in the correction file.

To create an ACA XML corrections file:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Create ACA XML Corrections File* [CAIRXMLC]. The system displays the Create ACA XML Corrections File page shown below.
-


```
1/10/20  20:25:38  Create ACA XML Corrections File  PRGAC50  PRDAC50
-----
Employer . . . . . ___ +      Employer Group . . . . . ____ +
Tax Year . . . . . ____ +      Contact Telephone Number _____
Tax Company . . . . . ____ +    Plan Start Month . . . . . ___
Transmitter Control Code _____  Prior Reporting Year? . 0 (0=No 1=Yes)
Software ID . . . . . _____ +  State Program . . . . . _____
ACA Return Type . . . . . _ (P=Production T=Test)
Receipt ID . . . . . _____ +

F3=Exit  F4=Prompt  F10=QuikAccess  F12=Cancel
```

Figure 18-33: Create ACA XML Corrections File page

4 Use the information below to complete the fields on this page.

Employer

Specify an employer. Leave blank if you specify an *Employer Group*.

Employer Group

Specify an employer group. Leave blank if you specify an *Employer*.

Tax Year

Specify the tax year.

Contact Telephone Number

Specify the contact telephone number if the contact telephone number for the 1095-C forms is different from the contact telephone number for the 1094-C form. Do not enter dashes. If left blank here, the contact telephone number specified when you use the *Update 1094-C Transmittal Data* function is used. If the contact telephone number on the 1095-C forms is different from the contact telephone number on the 1094-C form, specify the contact telephone number for the 1095-C forms here.

Tax Company

Specify the tax company to limit the data on the file to one tax company. Leave blank if the selected employer is not a multi-tax employer. You must specify an *Employer* if you specify a *Tax Company*.

Plan Start Month

Specify the plan start month that you entered on the Print 1095-C Forms submission page.

Transmitter Control Code

Specify the transmitter control code provided by the IRS for the ACA Information Returns program.

Prior Reporting Year?

Specify no if the XML files are being created for the current reporting year, or specify yes for the prior reporting year.

If you specify that the files are being created for a prior reporting year, a value of 1 (yes) is written in the PriorYearInd tag in the Manifest XML file.

For example, if you create a file on February 15, 2024 for reporting year 2023, you are creating a file with information for the current reporting year. However, if you create a replacement or correction file on February 15, 2024 for reporting year 2022, you are creating a file with data for a prior reporting year.

Software ID

Specify the software ID provided by Infor. The software ID indicates that the software is tested and authorized by the IRS for use in the ACA Information Returns program.

For tax year 2023, the Infor software ID is 23A0016980.

State Program

Specify a valid state ACA program in this field. If a value is entered in this field, the custom state program is called, and a state-specific ACA file is created.

The system contains a sample program, PRGAIR10XX, for use as a model custom program.

Leave this field blank to create the federal ACA file.

ACA Return Type

Specify **P** for production or **T** for test to indicate the type ACA return that you are making.

Receipt ID

Specify the receipt ID of the transmission for which you want to create a corrections XML return file.

The receipt ID of the transmission is provided in the web browser at the time the ACA return is uploaded and accepted by the IRS.

The receipt ID has the structure 1095C-NN-NNNNNNNN where N is numeric and uniquely identifies the transmission. You would usually record the receipt ID in the Receipt ID field on the original ACA transmission record.

If you are creating a corrections XML file and you ran the *Reset ACA XML Corrections* function to reset a transmission so that you can re-create the corrections file, the receipt ID must be the original receipt ID that was entered when you used the *Work with ACA Return Errors* function.

- 5 Press Enter.

Resetting ACA XML corrections

Use the *Reset ACA XML Corrections* function to reset correction records to an In Progress state so you can rerun the *Create ACA XML Corrections File* function if needed. The *Reset ACA XML Corrections* function resets the *Transmission ID*, *Submission ID*, and *Record ID* fields in the appropriate 1094-C and 1095-C work file records back to the original values and sets the corrected flag in these work files from **C** to **E** to allow the XML corrections file to be re-created.

You cannot reset an earlier transmission. The transmission ID must be from the last XML corrections file you created.

To reset ACA XML corrections:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
-

- 3 Select *Reset ACA XML Corrections* [RACA]. The system displays the Reset ACA XML Corrections page shown below.

```
12/16/15  17:19:42  Reset ACA XML Corrections  PRGAC50  PRDAC50
-----
Transmission ID . . . _____ +
F3=Exit  F10=QuikAccess
```

Figure 18-34: Reset ACA XML Corrections page

- 4 Use the information below to complete the field on this page.

Transmission ID

Specify the transmission ID from the last time you ran the *Create ACA XML Corrections File* function. You can get the transmission ID of the file by using the *Work with ACA Transmissions* function.

The *Reset ACA XML Corrections* function sets the correction records back to an In Progress state so that you can rerun the *Create ACA XML Corrections File* function if necessary.

You cannot reset an earlier transmission. The transmission ID must be from the last XML corrections file that you created.

- 5 Press Enter.
-

Displaying the XML document

Use the *Display XML Document* function to view the XML document created when you run the *Create ACA XML Returns File* function.

Note: This function is available only from the IBM i. It is not available from Infor WebTop.

To display the XML document:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
- 2 Select *Misc. Benefit Functions*.
- 3 Select *Display XML Document* [DACAXML]. The system displays the Display XML Document page shown below.

12/16/15 17:32:07	Display XML Document	PRGXLNK	PRDXLNK
<hr/>			
Directory Path /PEUSXML <hr/>			
File/Document Name <hr/>			
<p>Leave the file/document name blank to display all files/documents in the directory shown in the Directory Path field, or you can type a file or document name to display a specific item.</p>			
<hr/>			
F3=Exit F10=QuikAccess			

Figure 18-35: Display XML Document page

- 4 Use the information below to complete the fields on this page.

Directory Path

Type the directory path where the ACA XML file is stored.

The system initially uses a default value for the directory path from the value stored in the ACA XML default data file, PRPXD2.

The system stores ACA XML files in the /PEUSXML directory.

File/Document Name

Type the name of a specific file or leave blank to view a list of files stored in the directory path.

When a name is specified, the system appends the name to the DIRECTORY PATH value to determine the proper item to display.

5 Press Enter. The Display Object Links page below is displayed.

```

                                DISPLAY OBJECT LINKS

DIRECTORY . . . . . : /PEUSXML

TYPE OPTIONS, PRESS ENTER.
  5=DISPLAY   8=DISPLAY ATTRIBUTES  9=DISPLAY AUTHORITY

OPT  OBJECT LINK          TYPE   ATTRIBUTE  TEXT
-   Manifest1095C_ABC0 >  STMF
-   Manifest1095C_ABC0 >  STMF
-   Manifest1095C_ABC0 >  STMF
-   Manifest1095C_AC40 >  STMF
-   Manifest1095C_AC40 >  STMF
-   Manifest1095C_BB07 >  STMF
-   Manifest1095C_BB07 >  STMF
-   Manifest1095C_BB07 >  STMF
-   Manifest1095C_BB07 >  STMF
-   Manifest1095C_BB07 >  STMF
-   Manifest1095C_BB07 >  STMF
-   Manifest1095C_BB07 >  STMF
-   Manifest1095C_BB07 >  STMF
-   Manifest1095C_JCP1 >  STMF

                                                                MORE...

F3=EXIT  F4=PROMPT  F5=REFRESH  F12=CANCEL  F17=POSITION TO
F22=DISPLAY ENTIRE FIELD

```

Figure 18-36: Display Object Links page

On the Display Object Links page, you can perform these actions:

- Display the xml document
 - Type **5** in the *Opt* field next to a document and press Enter.
- Display the xml document attributes
 - Type **8** in the *Opt* field next to a document and press Enter.
- Display the xml document authorities
 - Type **9** in the *Opt* field next to a document and press Enter.

Validating the ACA XML Returns file

Use the *Validate ACA XML Returns File* function to validate an XML document. The following must be available:

- An XML document name and the directory path where the document is stored
- A valid schema
- A validating parser

An XML document can be generated by using the *Create ACA XML Returns File*, *Create ACA Replacement XML Files*, and *Create ACA XML Corrections File* functions. The most current ACA schemas can be downloaded from the ACA Information Returns Program website.

Consult your IT department for the name and directory path of a validating parser on your system. You can use the *Update ACA XML Default Data* function to save the name and directory paths for the schema and parser as future default information.

Note: This function is available only from the IBM i. It is not available from Infor WebTop.

To validate the ACA XML returns file:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Validate ACA XML Returns File [VXML]*. The system displays the Validate ACA XML Returns File page shown below.
-

12/16/15	17:05:24	Validate AIR XML Returns File	PRGXMLP	PRDXMLP
Document Name				
Directory Path /PEUSXML				
Schema Name /PEUSXML2015V3/MSG/IRS-Form1094-1095CTransmitterUpstreamMessage.xsd				
Parser name/class /PYCANXMLMISC/MSV-20090415/MSV.JAR				
Additional Java Properties (java.version 1.6)				
F3=Exit F10=QuikAccess				

Figure 18-37: Validate AIR XML Returns File page

4 Use the information below to complete the fields on this page.

Document Name

Specify the name of the XML document to be validated.

The document name is assigned when you run the *Create ACA XML Returns File* function.

The directory path where documents generated by ACA XML Returns File are stored in the default directory. Use the *Display XML Document* function to verify existing document names.

You can type the name with or without a leading forward slash (/). The system needs a leading / to build the system command properly and adds the / if it is missing from the value you type.

Directory Path

Specify the directory path where the XML document is stored.

The value stored in the XML default data file, PRPXD2, is the default directory path.

The system automatically generates ACA XML return documents to the /PEUSXML directory path.

You can type the name with or without a leading forward slash (/). The system needs a leading / to build the system command properly and adds the / if it is missing from the value you type.

Schema Name

Specify the name of the schema to be used to validate the XML document.

The most current ACA XML schemas can be downloaded from the IRS website.

- To validate the detail file, use the current schema name of **IRS-Form1094-1095CTransmitterUpstreamMessage.xsd** here. You can also use the *Update ACA XML Default Data* function to enter the default schema name for the detail file.
- To validate the manifest file, use the current manifest schema name of **IRS-ACAUserInterfaceHeaderMessage.xsd** here.

These XSD files must exist in the directories within the main directory path you specified for the schema:

Directory Name	Schema Name
MSG	IRS-Form1094-1095CTransmitterUpstreamMessage.xsd
MSG	IRS-ACAUserInterfaceHeaderMessage.xsd
MSG	IRS-WSTimeStampElementMessage.xsd
EXT	IRS-EXT-ACA-AIR-7.0.xsd
COMMON	IRS-CAC.xsd
COMMON	IRS-CBC.xsd
COMMON	IRS-SDT.xsd

Parser name/class

Specify the name of the validating parser to be used to validate the XML document.

Consult your IT department for the name and directory path of a validating parser on your system. Use the *Update ACA XML Default Data* function to save the name and directory path for the parser as future default information.

You can type the name with or without a leading forward slash (/). The system needs a leading / to build the system command properly and adds the / if it is missing from the value you type.

Additional Java Properties

Specify the name of the java version that is installed on your IBM i and should be used when executing the RUNJVA command. When this field is filled with something other than blanks, the value is inserted into the PROPERTIES portion of the RUNJVA command. The system default value is '(java.version 1.6)'.

For example, if the file name is FILE01 and the directory is /DIRECTORY01, the schema is /SCHEMA01.XSD, the parser is /PARSER01.JAR, and the java version is 1.6, the system builds the command as:

```
RUNJVA CLASS('/PARSER01.JAR')  
  
PARM('file:/SCHEMA01.XSD' 'file:/DIRECTORY01/FILE01.xml')  
  
PROP((java.version 1.6))
```

- 5 Press Enter.

Listing ACA XML corrections

Use the List ACA XML Corrections function to print a listing of corrections you entered using the *Work With ACA Return Errors* function.

To list ACA XML corrections:

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *List ACA XML Corrections* [VXML]. The system displays the List ACA XML Corrections page shown below.
-

```
1/10/20  19:08:21      List ACA XML Corrections      PRGAC50  PRDAC50
-----
Employer . . . . . ____ +      Employer Group . . . . . ____ +
Tax Year . . . . . ____ +      Contact Telephone Number _____
Tax Company . . . . . ____ +    Plan Start Month . . . ____
Transmitter Control Code _____  Prior Reporting Year? . 0 (0=No 1=Yes)
Software ID . . . . . _____ +  State Program . . . . . _____
ACA Return Type . . . . . _ (P=Production T=Test)
Receipt ID . . . . . _____ +

F3=Exit  F4=Prompt  F10=QuikAccess  F12=Cancel
```

Figure 18-38: List ACA XML Corrections page

4 Use the information below to complete the fields on this page.

Employer

Specify an employer code or leave this field blank to list the data in the work file by employer group.

Employer Group

Specify an employer group or leave this field blank if you specify an employer.

Tax Year

Specify a valid tax year.

Contact Telephone Number

Specify the contact telephone number if the contact telephone number for the 1095-C forms is different from the contact telephone number for the 1094-C form. Do not enter dashes.

If you leave this field blank, the system uses the *Contact Telephone Number* you enter for the *Update 1094-C Transmittal Data* function. If the contact telephone number on the 1095-C Forms is different from the contact telephone number on the 1094-C form, enter the contact telephone number for the 1095-C forms in this field.

Tax Company

Specify the tax company to limit the data on the file to one tax company.

Leave this field blank if the employer you selected is not a multi-tax employer.

You must enter a value in the *Employer* field if you specify a tax company.

Plan Start Month

Specify the plan start month you entered on the Print 1095-C Forms submission screen.

Transmitter Control Code

Specify the transmitter control code that has been provided to you by the IRS for the ACA Information Returns program.

Prior Reporting Year?

Specify if the XML files are being created for the current reporting year or a prior reporting year. Valid values are:

0 The files are being created for the current reporting year.

1 The files are being created for a prior reporting year.

If you specify that the files are being created for a prior reporting year, a value of 1 (yes) is recorded in the *PriorYearInd* tag in the Manifest XML file.

For example, if you create a file on February 15, 2024 for reporting year 2023, you are creating a file with information for the current reporting year. However, if you create a replacement or correction file on February 15, 2024 for reporting year 2022, you are creating a file with data for a prior reporting year.

Software ID

Specify the software ID provided by Infor. The software ID indicates that the software is tested and authorized by the IRS for use in the ACA Information Returns program.

For tax year 2023, the Infor software ID is 23A0016980.

State Program

Specify a valid state ACA program in this field. If a value is entered in this field, the custom state program is called, and a state-specific ACA file is created.

The system contains a sample program, PRGAIR10XX, for use as a model custom program.

Leave this field blank to create the federal ACA file.

ACA Return Type

Specify whether the type of ACA return is production (**P**) or test (**T**).

Receipt ID

Specify the receipt ID of the transmission for which you want to create a replacement or corrections XML return file.

The receipt ID of the transmission is provided in the web browser at the time the ACA return is uploaded and accepted by the IRS.

The receipt ID has the structure 1095C-NN-NNNNNNNN where N is numeric, and it uniquely identifies the transmission.

You would usually record the receipt ID in the *Receipt ID* field on the original ACA Transmission record. If you have not yet entered the receipt ID, you can press F11 to override the warning message.

If you are creating a Corrections XML file and you ran *Reset ACA XML Corrections* to reset a transmission so that you can re-create the corrections file, the receipt ID must be the original receipt ID that was entered when using *Work with ACA Return Errors*.

- 5 Press Enter.
-

Updating the ACA software ID

Infor must submit new test files to the IRS each year, using the IRS-prescribed test data, in order to validate that the software can create an XML document that meets the ACA reporting requirements for that tax year. After the test files are validated, Infor is issued an ACA software ID that must be used by all employers using the related version of the Infor Software to produce their ACA XML files.

The ACA software ID for the current calendar year is normally shipped as part of the year-end tax releases each calendar year, along with any programming changes that are required to generate an XML document in a format that conforms to the latest IRS changes to the ACA reporting for that calendar year.

Use the *Update ACA Software ID* function to update the software ID that is provided to you by Infor when the ACA software ID is received by Infor after the year-end tax releases are made available.

- 1 From the Infinium Human Resources main menu select *Benefits Administration*.
 - 2 Select *Misc. Benefit Functions*.
 - 3 Select *Update ACA Software ID [ACAID]*. The system displays the Update ACA Software ID tax year selection page shown below.
-

```
6/14/16 17:55:37      Update ACA Software ID      PRGMSID  PRDMSID

Tax Year . . . . . ____

F3=Exit  F10=QuikAccess
```

Figure 18-39: Update ACA Software ID tax year selection page

- 4 Specify a valid tax year. The year must be 2015 or later.
- 5 Press Enter. The system displays the Update ACA Software ID tax year selection page shown below.

```
6/14/16 17:56:44      Update ACA Software ID      PRGMSID  PRDMSID
                                New Record

Tax Year . . . . . : 2016

Software ID . . . . . ____
Release . . . . . ____

F3=Exit  F10=QuikAccess  F12=Previous
```

Figure 18-40: Update ACA Software ID page

- 6** Use the information below to complete the fields on this page.

Software ID

Specify the software ID number that has been provided to you by Infor. The software ID indicates that the software has been tested and authorized by the IRS for use in the ACA Information Returns program.

Release

Type the Infor Infinium HCM release number that applies to this software ID.

- 7** Press Enter.
-

Adding Misc. Benefit Functions to the Infinium PE menu

Menu options are provided to support the Affordable Care Act reporting.

Menu option/Function	Sequence Number	Job control
<i>List Average Hours – Standard</i>	010	ACALST1
<i>List Average Hours – New Hires</i>	020	ACALST2
<i>Display Employee Average Hours</i>	030	ACADSP1
<i>Create 1095-C Work File</i>	040	CRTACAWRKF
<i>Update Waiting Period COC/SHC</i>	050	UPDACAWAIT
<i>Create 1095-C Part III Work File</i>	060	CRT1095CP3
<i>List 1095-C Work File</i>	070	LST1095WKF
<i>Print 1095-C Forms</i>	080	PRT1095WKF
<i>Mass Update 1095-C Work File</i>	090	MUPD1095C
<i>Blank line</i>	100	Blank
<i>Update 1094-C Transmittal Data</i>	110	UPD1094C
<i>Create ACA XML Return Files</i>	120	CRTAIRXML
<i>Create ACA Replacement XML Files</i>	130	CRTRPLXML
<i>Work with ACA Transmissions</i>	140	WRKAIRTRAN
<i>Display XML Document</i>	150	DSPACAXML
<i>Blank line</i>	160	Blank
<i>Work With ACA Return Errors</i>	170	UPDACAERR
<i>List ACA XML Corrections</i>	180	PRTACACORR
<i>Create ACA XML Corrections File</i>	190	CRTACACORR
<i>Reset ACA XML Corrections</i>	200	RESETACA
<i>Blank line</i>	210	blank
<i>Update ACA XML Default Data</i>	220	UPDXMLACA
<i>Display ACA XML Default Data</i>	230	DSPXMLACA

Menu option/Function	Sequence Number	Job control
<i>Validate ACA XML Returns File</i>	240	VALXMLDOC
<i>Create ACA Communications Test</i>	250	CRTAIRTST
<i>Blank line</i>	260	Blank
<i>Update ACA Software ID</i>	270	UPDACASID

To add the functions to the Infinium PE menu:

- 1 Sign on to the Infinium Application Manager menu as user AM2000.
 - 2 Select *Systems and Versions* from the AM menu.
 - 3 Type **5** next to the PE system and press Enter.
 - 4 If you are updating the menu for version 000, press F11 to update the system menu. For any other version, press F7 to display your PE versions. Type **8** next to the version and then press Enter to maintain the version menu. The PE menu is displayed.
 - 5 Type **5** next to *Benefits Administration* and press Enter.
 - 6 Type **5** next to *Misc. Benefit Functions* and press Enter.
 - 7 Type the *Sequence Number* and *Job Control Name* for the first new menu item on the top line and press Enter. The function is added to the menu.
 - 8 Repeat the steps to add the remaining new menu options.
 - 9 Press F3 to exit and save your changes.
-

Adding Printer Controls

Complete the steps below to add these 1095-C printer controls:

- *List 1095-C Work File*
- *Print 1095-C Forms*
- *Mass Update 1095-C Work File*

Note: You must add these printer controls before running these functions because the printer files used by these functions are 15 characters per inch and wider than the standard 132 characters across.

To add the printer controls to the system:

- 1 Sign in as user AM2000.
- 2 Select *Printer Controls* from the Application Manager menu.
- 3 Type **PE** in the *System* field, the PE version in the *Version* field, and **PRTP1095C** in the *Printer File* field. To create a printer control for a specific user profile, type the user profile of the user in the *User Profile* field.
- 4 Press Enter.
- 5 Type the information as shown in the screen capture below and press F3 to exit and save your changes.

The values in the *Printer Device*, *Output Queue*, and *Max Spooled File Output Records* fields may be different depending on your system configuration.

We recommend that you enter a secure output queue in the *Output Queue* field or a secure printer in the *Printer Device* field on each printer control, as these reports contain sensitive employee information.

```

OVERWRITE WITH PRINTER FILE (OVRPRTF)

TYPE CHOICES, PRESS ENTER.

FILE BEING OVERRIDDEN . . . . . > PRTP1095C      NAME, *PRTF
OVERRIDING TO PRINTER FILE . . . . *FILE          NAME, *FILE
LIBRARY . . . . .                               NAME, *LIBL, *CURLIB
DEVICE:
PRINTER . . . . .                               NAME, *SYSVAL, *JOB
PRINTER DEVICE TYPE . . . . . > *SCS             *SCS, *IPDS, *USERASCII...
PAGE SIZE:
PAGE LENGTH . . . . . > 66                       .001-255.000
PAGE WIDTH . . . . . > 198                       .001-378.000
MEASUREMENT METHOD . . . . . *ROWCOL             *ROWCOL, *UOM
LINES PER INCH . . . . . > 6                     3, 4, 6, 7.5, 8, 9, 12
CHARACTERS PER INCH . . . . . > 15              5, 10, 12, 13.3, 15, 16.7...
FRONT MARGIN:
  OFFSET DOWN . . . . .                          0-57.790
  OFFSET ACROSS . . . . .                         0-57.790

```

- 6 Repeat the above steps for printer file PRT1095C for *Print 1095-C Forms*. Type the data as shown in the screen capture below and press F3 to exit and save your changes.

The values in the *Printer Device*, *Output Queue*, and *Max Spooled File Output Records* fields may be different depending on your system configuration.

We recommend that you enter a secure output queue in the *Output Queue* field or a secure printer in the *Printer Device* field on each printer control, as these reports contain sensitive employee information.

```

                                OVERRIDE WITH PRINTER FILE (OVRPRTF)

TYPE CHOICES, PRESS ENTER.

FILE BEING OVERRIDDEN . . . . . > PRT1095C      NAME, *PRTF
OVERRIDING TO PRINTER FILE . . . . *FILE        NAME, *FILE
  LIBRARY . . . . .                      NAME, *LIBL, *CURLIB
DEVICE:
  PRINTER . . . . .                      NAME, *SYSVAL, *JOB
PRINTER DEVICE TYPE . . . . . > *SCS           *SCS, *IPDS, *USERASCII...
PAGE SIZE:
  PAGE LENGTH . . . . . > 68                .001-255.000
  PAGE WIDTH . . . . . > 167                .001-378.000
  MEASUREMENT METHOD . . . . . *ROWCOL        *ROWCOL, *UOM
  LINES PER INCH . . . . . > 8              3, 4, 6, 7.5, 8, 9, 12
  CHARACTERS PER INCH . . . . . > 15        5, 10, 12, 13.3, 15, 16.7...
FRONT MARGIN:
  OFFSET DOWN . . . . .                   0-57.790
  OFFSET ACROSS . . . . .                 0-57.790
.
BACK MARGIN:
  OFFSET DOWN . . . . .                   0-57.790
  OFFSET ACROSS . . . . .                 0-57.790
  OVERFLOW LINE NUMBER . . . . . > 68      1-255
  FOLD RECORDS . . . . .                 *NO, *YES
.
FORM TYPE . . . . . > P1095C              CHARACTER VALUE, *STD
COPIES . . . . . > 1                     1-255

```

- 7 Repeat the above steps for printer file PRT1095C2 for *Print 1095-C Forms*. Type the data as shown in the screen capture below and press F3 to exit and save your changes.

The values in the *Printer Device*, *Output Queue*, and *Max Spooled File Output Records* fields may be different depending on your system configuration.

We recommend that you enter a secure output queue in the *Output Queue* field or a secure printer in the *Printer Device* field on each printer control, as these reports contain sensitive employee information.

```

                                OVERRIDE WITH PRINTER FILE (OVRPRTF)

TYPE CHOICES, PRESS ENTER.

FILE BEING OVERRIDDEN . . . . . > PRT1095C2      NAME, *PRTF
OVERRIDING TO PRINTER FILE . . . . . *FILE        NAME, *FILE
LIBRARY . . . . .                               NAME, *LIBL, *CURLIB
DEVICE:
PRINTER . . . . .                               NAME, *SYSVAL, *JOB
PRINTER DEVICE TYPE . . . . . > *SCS             *SCS, *IPDS, *USERASCII...
PAGE SIZE:
PAGE LENGTH . . . . . > 68                       .001-255.000
PAGE WIDTH . . . . . > 167                       .001-378.000
MEASUREMENT METHOD . . . . . *ROWCOL             *ROWCOL, *UOM
LINES PER INCH . . . . . > 8                     3, 4, 6, 7.5, 8, 9, 12
CHARACTERS PER INCH . . . . . > 15               5, 10, 12, 13.3, 15, 16.7...
FRONT MARGIN:
OFFSET DOWN . . . . .                           0-57.790
OFFSET ACROSS . . . . .                         0-57.790

                                OVERRIDE WITH PRINTER FILE (OVRPRTF)

TYPE CHOICES, PRESS ENTER.

BACK MARGIN:
OFFSET DOWN . . . . .                           0-57.790
OFFSET ACROSS . . . . .                         0-57.790
OVERFLOW LINE NUMBER . . . . . > 68             1-255
FOLD RECORDS . . . . .                          *NO, *YES
UNPRINTABLE CHARACTER ACTION:
REPLACE CHARACTER . . . . .                     *NO, *YES
REPLACEMENT CHARACTER . . . . . *BLANK          40-FE, *BLANK
ALIGN PAGE . . . . .                            *NO, *YES
SOURCE DRAWER . . . . .                         1-255, *E1, *FORMDF
OUTPUT BIN . . . . .                            1-65535, *DEVDF
FONT:
IDENTIFIER . . . . .                            CHARACTER VALUE, *CPI...
POINT SIZE . . . . . *NONE                       0.1-999.9, *NONE
FORM FEED . . . . .                             *DEVDF, *CONT, *CUT, *CONT2...
PRINT QUALITY . . . . . > *STD                   *STD, *DEVDF, *DRAFT, *NLQ...
.
.
FORM TYPE . . . . . > P1095C                     CHARACTER VALUE, *STD
COPIES . . . . . > 1                             1-255

```

- 8 Repeat the above steps for printer file PRT1095C3 for *Print 1095-C Forms*. Type the data as shown in the screen capture below and press F3 to exit and save your changes.

The values in the *Printer Device*, *Output Queue*, and *Max Spooled File Output Records* fields may be different depending on your system configuration.

We recommend that you enter a secure output queue in the *Output Queue* field or a secure printer in the *Printer Device* field on each printer control, as these reports contain sensitive employee information.

```

                                OVERRIDE WITH PRINTER FILE (OVRPRTF)

TYPE CHOICES, PRESS ENTER.

FILE BEING OVERRIDDEN . . . . . > PRT1095C3      NAME, *PRTF
OVERRIDING TO PRINTER FILE . . . . *FILE         NAME, *FILE
LIBRARY . . . . .                          NAME, *LIBL, *CURLIB
DEVICE:
PRINTER . . . . .                            NAME, *SYSVAL, *JOB
PRINTER DEVICE TYPE . . . . . > *AFPDS          *SCS, *IPDS, *USERASCII...
PAGE SIZE:
PAGE LENGTH . . . . . > 66                      .001-255.000
PAGE WIDTH . . . . . > 132                       .001-378.000
MEASUREMENT METHOD . . . . . *ROWCOL             *ROWCOL, *UOM
LINES PER INCH . . . . . > 6                     3, 4, 6, 7.5, 8, 9, 12
CHARACTERS PER INCH . . . . . > 15               5, 10, 12, 13.3, 15, 16.7...
FRONT MARGIN:
  OFFSET DOWN . . . . . > .250                   0-57.790
  OFFSET ACROSS . . . . . > .083                 0-57.790
BACK MARGIN:
  OFFSET DOWN . . . . .                          0-57.790
  OFFSET ACROSS . . . . .                          0-57.790
OVERFLOW LINE NUMBER . . . . . > 66             1-255
FOLD RECORDS . . . . .                          *NO, *YES
UNPRINTABLE CHARACTER ACTION:
  REPLACE CHARACTER . . . . .                    *NO, *YES
  REPLACEMENT CHARACTER . . . . . *BLANK         40-FE, *BLANK
ALIGN PAGE . . . . .                            *NO, *YES
SOURCE DRAWER . . . . .                          1-255, *E1, *FORMDF
OUTPUT BIN . . . . .                             1-65535, *DEV
FONT:
  IDENTIFIER . . . . .                           CHARACTER VALUE, *CPI...
  POINT SIZE . . . . . *NONE                     0.1-999.9, *NONE
FORM FEED . . . . .                              *DEV, *CONT, *CUT, *CONT2...
PRINT QUALITY . . . . . > *STD                   *STD, *DEV, *DRAFT, *NLQ...
.
.
FORM TYPE . . . . . > '1095C_LSR'              CHARACTER VALUE, *STD
COPIES . . . . . > 1                            1-255

```

- Repeat the above steps for printer file PRT1095C4 for *Print 1095-C Forms*. Type the data as shown in the screen capture below and press F3 to exit and save your changes.

The values in the *Printer Device*, *Output Queue*, and *Max Spooled File Output Records* fields may be different depending on your system configuration.

We recommend that you enter a secure output queue in the *Output Queue* field or a secure printer in the *Printer Device* field on each printer control, as these reports contain sensitive employee information.

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                                OVERRIDE WITH PRINTER FILE (OVRPRTF)

TYPE CHOICES, PRESS ENTER.

FILE BEING OVERRIDDEN . . . . . > PRT1095C4      NAME, *PRTF
OVERRIDING TO PRINTER FILE . . . . . *FILE        NAME, *FILE
LIBRARY . . . . .                               NAME, *LIBL, *CURLIB
DEVICE:
PRINTER . . . . .                               NAME, *SYSVAL, *JOB
PRINTER DEVICE TYPE . . . . . > *AFPDS           *SCS, *IPDS, *USERASCII...
PAGE SIZE:
PAGE LENGTH . . . . . > 84                       .001-255.000
PAGE WIDTH . . . . . > 128                       .001-378.000
MEASUREMENT METHOD . . . . . *ROWCOL             *ROWCOL, *UOM
LINES PER INCH . . . . . > 6                     3, 4, 6, 7.5, 8, 9, 12
CHARACTERS PER INCH . . . . . > 15               5, 10, 12, 13.3, 15, 16.7...
FRONT MARGIN:
OFFSET DOWN . . . . . > 0                        0-57.790
OFFSET ACROSS . . . . . > 0                     0-57.790
BACK MARGIN:
OFFSET DOWN . . . . .                          0-57.790
OFFSET ACROSS . . . . .                        0-57.790
OVERFLOW LINE NUMBER . . . . . > 84             1-255
FOLD RECORDS . . . . .                          *NO, *YES
UNPRINTABLE CHARACTER ACTION:
REPLACE CHARACTER . . . . .                     *NO, *YES
REPLACEMENT CHARACTER . . . . . *BLANK          40-FE, *BLANK
ALIGN PAGE . . . . .                           *NO, *YES
SOURCE DRAWER . . . . .                        1-255, *E1, *FORMDF
OUTPUT BIN . . . . .                           1-65535, *DEV
FONT:
IDENTIFIER . . . . .                           CHARACTER VALUE, *CPI...
POINT SIZE . . . . . *NONE                      0.1-999.9, *NONE
FORM FEED . . . . .                            *DEV, *CONT, *CUT, *CONT2...
PRINT QUALITY . . . . . > *STD                  *STD, *DEV, *DRAFT, *NLQ...
.
.
FORM TYPE . . . . . > '1095C_PS'                CHARACTER VALUE, *STD

```

- 10 Repeat the above steps for printer file PRTMU1095C. Type the data as shown in the screen capture below and press F3 to exit and save your changes.

The values in the *Printer Device*, *Output Queue*, and *Max Spooled File Output Records* fields may be different depending on your system configuration.

We recommend that you enter a secure output queue in the *Output Queue* field or a secure printer in the *Printer Device* field on each printer control, as these reports contain sensitive employee information.


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                                OVERRIDE WITH PRINTER FILE (OVRPRTF)

TYPE CHOICES, PRESS ENTER.

FILE BEING OVERRIDDEN . . . . . > PRTMU1095C   NAME, *PRTF
OVERRIDING TO PRINTER FILE . . . . *FILE       NAME, *FILE
  LIBRARY . . . . .                   NAME, *LIBL, *CURLIB
DEVICE:
  PRINTER . . . . .                   NAME, *SYSVAL, *JOB
PRINTER DEVICE TYPE . . . . . > *SCS          *SCS, *IPDS, *USERASCII...
PAGE SIZE:
  PAGE LENGTH . . . . . > 66                .001-255.000
  PAGE WIDTH . . . . . > 198                .001-378.000
  MEASUREMENT METHOD . . . . . *ROWCOL       *ROWCOL, *UOM
LINES PER INCH . . . . . > 6                3, 4, 6, 7.5, 8, 9
CHARACTERS PER INCH . . . . . > 15          5, 10, 12, 13.3, 15, 16.7...

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Notes