OSC Training | BN200

Developing Guardians of North Carolina's Data

NORTH CAROLINA OFFICE OF THE STATE CONTROLLER

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North Carolina Office of the State Controller

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INTRODUCTION

Overview

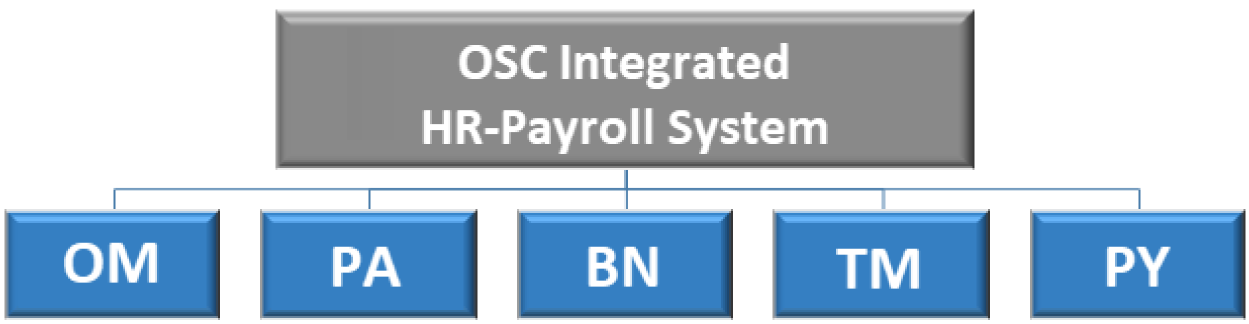
Welcome to the Integrated HR-Payroll System Benefits Display Overview training course. This course is for those individuals working at State agencies, departments, and BEST Shared Services who have been granted authorization to display benefits information for individual employees.

Post-requisites

This is the post-requisite you want to take as a follow-up to the information learned in this course. It is a reporting class using the Integrated HR-Payroll System Production client as the training field.

- BOBJ410 - Business Objects Reporting

Integrated HR-Payroll System Training Curriculum



The Integrated HR-Payroll System training program comprises several courses and different modules. Based on your HR role, you will attend courses in the Benefits module.

Strategy for Training

TELL ME (Concepts)

Instructor will discuss the process, responsibilities, and describe the transactions – LISTEN

SHOW ME (Demonstrations)

Instructor will demonstrate job-related tasks performed in the Integrated HR-Payroll System – HANDS OFF.

LET ME (Exercises)

Student will complete the exercises which allows for hands-on practice in class – HANDS ON

SUPPORT ME (Availability)

Instructor will be available to answer questions while the students complete the exercises

Course Map

The lessons covered in this class include:

- Lesson 1: Benefits Process Overview
- Lesson 2: Benefits Infotypes
- Lesson 3: Benefits Letters and Reporting
- Lesson 4: Course Review

The Benefits Display Overview Student Guide can be used as a reference when you return to the workplace. For example, you can use the exercises for practicing in the Integrated HR-Payroll System training environment.

Course Objectives

Upon completion of this course, you should be able to:

- Describe the benefits enrollment and plan administration processes
- List the tasks performed by Agency HR and BEST Shared Services for benefits administration
- Search for an employee and view available benefit infotypes on the employee's record using transaction code PA20
- Display benefits confirmation forms and letters

Reference Materials

- Student Guide
- Job Aids
- Other Resources
    - Training HELP website
    - Online help - from the SAP portal
    - Work instructions - Business Process Procedures (BPPs)

SUMMARY

This course is intended to give HR professionals an understanding of the Integrated HR-Payroll System Benefits module. This course will provide you with demonstration and practice for creating and modifying positions.

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LESSON 1: BENEFITS PROCESS OVERVIEW

Lesson Overview

Upon completion of this lesson, you should be able to:

- Describe the roles and responsibilities of eBenefits and BEST Shared Services.
- Identify the policies that will be enforced by the system.
- Describe the roles and responsibilities of key personnel.
- Explain the benefits business processes.
    - Annual Enrollment for NCFlex and SHP (State Health Plan)
    - New Hire Enrollment
    - Qualifying Life Events
    - Leave of Absences (LOA)
    - Benefits Termination
    - Retirement Plans
    - Savings Plans Enrollment
- Explain how the Integrated HR-Payroll System determines which benefits to offer an employee

Scope of the eBenefits System

The eBenefits system offers Benefits Administrators and employees a streamlined benefit enrollment and management process.

- The eBenefits system's Benefits Administration module manages activities associated with employees' benefits.
- Three benefit plans are maintained in eBenefits
    - Health Plans (Medical, Dental, Vision, Cancer, Critical Illness, Disability)
    - Insurance Plans (Term Life, Voluntary AD&D, Core AD&D)
    - Spending Accounts (HCFSA, DDCFSA)

Integrated HR-Payroll System

The Integrated HR-Payroll System houses the health plan, insurance plans, FSA plans and savings plans (Retirement and 401K, 403(b) and 457 plans) for payroll functions.

The Integrated HR-Payroll System manages the benefits deduction process ensuring adherence of policy.

Policy Enforced by the eBenefits System

State Health Plan

- State Health Plan Policy determines both the effective date and termination date of plan coverage.
- Daily files are sent to and from eBenefits and OSC.

NOTE: Daily files are sent from eBenefits to Blue Cross and Blue Shield.

NCFlex Plans

- Effective date of coverage is the 1st of the month following the qualifying event.
- Life Insurance premiums for the employee are based on the age of the employee on January 1st. Premiums for the spouse (if covered under the plan) are based on the age of the employee on January 1st. Premiums for children are covered under a flat rate.
- Critical Illness premiums for the employee are based on the age of the employee on January 1st. Premiums for the spouse (if covered under the plan) are based on the age of the employee on January 1st. All children are covered under the same rate.
- FSA contributions are calculated on a yearly limit. Employees must re-enroll in their FSA(s) each year during Open Enrollment.
- NCFlex Plans will terminate at the end of the month in which an employee separates from employment, if there is enough money to take the deductions.
- Interface files are sent to vendors weekly from eBenefits, providing enrollment data.

Roles and Responsibilities

Employees

Employees are responsible for:

- Enrolling themselves in the various health, insurance, savings, and Flexible Spending Account (FSA) plans within 30 days of the QLE.
- Providing and/or uploading Qualifying Life Event (QLE) documentation into eBenefits
- MUST use eBenefits to complete their enrollment(s) if available.

  NOTE: Employees with online access issues should contact the eBenefits Customer Service Center at 855-859-0966 to complete their enrollment.

  NOTE: The ESS web portal provides Employee online access to review benefit information and maintain personal information in the Integrated HR-Payroll System.

Agency Health Benefits Representative (HBR)

Agency HBR is responsible for:

- Communicating benefits process, updates and changes to Employees
- Announcing NC SHP and NCFlex Open enrollment process to Employees
- Conducting benefits information sessions
- Maintaining and managing supplemental benefits (agency-specific)
- Sending LOA/Termination letters
- Monitoring Employee benefits data regarding:
  - New Hire
  - Open Enrollment
  - Leave of Absences
  - Benefits Termination
  - Savings/Retirement Plan
- Requesting exceptions from SHP and OSHR (NCFlex)

eBenefits System

The eBenefits representatives have full access to create, change, and maintain benefits plans and employee benefits elections.

eBenefits is responsible for:

- Administering enrollments for State Health Plan and NCFlex
- Maintain/manage court orders
- Handle complex benefits issues
- Process approved SHP and OSHR exceptions

BEST Shared Services

BEST Shared Services monitors and migrates benefit data into the Integrated HR-Payroll System from the eBenefits System.

- Manage benefits deductions and reporting for accurate payroll processing
- Manage eBenefits data discrepancies
- Manage benefits regarding Leave of Absences (LOAs) and terminations
- Coordinate resolutions for escalated benefits issues with Employees, HBRs, Vendors and eBenefits
- Work with BEST Payroll and vendors to reconcile erroneous benefits records and deductions
- Develop and communicate new processes to Agency HBRs

Roles & Responsibilities for Events

New Hire Enrollment

Hiring Person

- The process begins in Agency HR using Workflow.

Agency HR

- Agency HR must contact the employee within 30 days of the new hire date regarding the employee's benefits eligibility. Regardless as to when the new hire action was entered, the employee only has 30 days from the hire date to enroll in benefits.
- HR provides employees with NCIDs and instructions to log in to the Integrated HR-Payroll System & ESS.
- HR provides employees with instructions to log into the eBenefits system.

  NOTE: My Data -> My Benefits -> eBenefits

Newly Hired Employee

- The employee can enroll in the eBenefits system the day following the New Hire action entry into the Integrated HR-Payroll System.
- Employees needing assistance completing the enrollment process must contact eBenefits via telephone at 855-859-0966.

NOTE: Timely entering of the New Hire action is important. There is a 30-day window of opportunity in which employees are eligible to enroll in benefits programs from the date they are hired regardless of when the action is entered in the system.

NOTE: The employee must also complete their Smoking Attestation within the 30-day enrollment window.

- Smoker's Attestation will provide a discounted premium if the employee indicates they are a non-tobacco user, or they agree to enroll in the Smoking Cessation Program.

  NOTE: Employees who indicate they are a tobacco user are not eligible for the credit and will have an increased premium.

- PCP selection will not provide a discounted premium but can reduce the cost for a copay.

A new employee or previous state employee must be hired or rehired in the Integrated HR-Payroll System before any benefits action can be performed. Once hired or rehired, employees' benefits eligibility information is transferred to the eBenefits system nightly, which allows the employees to complete their enrollment process the next day.

Examples of Reason for Action:

- Hire
- Rehire

There is a 30-day time frame for employee enrollment. For example, if an employee is hired 7/17/19, he/she has until 8/16/19 to enroll in benefits. If the hiring action is not entered until 8/1/19, the employee still has until 8/16/19 to enroll.

SHP/NCFlex Open Enrollment Process

The SHP and NCFlex Open Enrollment period usually occurs in the Fall (changes effective January 1). All employees eligible for SHP/NCFlex benefits are required to enroll through eBenefits if they want coverage.

INFORMATION	*Refer to the Benefits section of the State Health Plan website for more information about Open Enrollment.* *https://shp.nctreasurer.com/Pages/default.aspx*

Employee

- Enrolls in plans in the eBenefits System
- Prints confirmation form

  OR
- Employees who need assistance completing the enrollment process contact eBenefits via telephone number 855-859-0966.
- Provides and maintains documentation for QLEs.

INFORMATION	*Employees must contact BEST if they are trying to make a change to their benefits, but they are unable to.*

Wellness Activities		
Primary care provider	Employee selects a Primary Care Provider for themselves and each covered dependent (if applicable) to receive a reduced copay	Contact: eBenefits System 1-855-859-0966
Smoking cessation program	Employee attests that they are a non-smoker or commit to a smoking cessation program	

eBenefits System

The eBenefits system is the system of record for enrollments. An electronic enrollment/change data file is sent to vendors and the Integrated HR-Payroll System for payroll processing.

Agency HR will need to communicate with employees who do not have ESS access to make sure they complete the phone-in enrollment changes.

NOTE: eBenefits phone number: 855-859-0966

BEST Shared Services

- Runs daily, weekly, and monthly reports to ensure accuracy of enrollment data for payroll processing

Qualifying Life Events (QLEs)

eBenefits is a self-service system, therefore employees can create Qualifying Life Events in the eBenefits system. QLEs allow benefit changes outside of open enrollment periods. Thus, when an employee creates a QLE in the eBenefits System, they can make appropriate changes within a specified time frame. These benefit election changes must take place within 30 days of the QLE.

Examples of QLEs include:

- Marriage
- Divorce
- New birth

NOTE: Newborns are added effective the date of birth. Premiums are not prorated for the partial month of coverage.

INFORMATION	*Via a ticket, BEST can arrange for a newborn to be added to the State Health Plan effective the first of the month following the date of birth.*

Additional Resources
Refer to the eBenefits section of the State Health Plan website and Qualifying Life Events section of the NCFlex website for more information about Qualifying Life Events.

Employees must upload supporting documentation into the eBenefits system. Agency HR may verify and maintain documentation at the Agency if it is provided by the employee. Dependent or QLE supporting documentation does not need to be provided to BEST Shared Services.

Examples of supporting documentation:

- Dependent verification (birth certificates, tax forms, adoption papers, etc.)
- Status Change or Life Event documentation (certificate of coverage for other insurance plans, marriage or divorce decrees, etc.)

Note: When adding a spouse to the SHP, a marriage certificate is required; however, if married for more than 1 year, employees will also need to provide a second form of documentation (i.e. tax forms, household bill indicating both names)

QLE Process

Agency HBR

- Educates employee regarding the QLE requirements and process
  - Employees must upload supporting documentation in to the eBenefits system
- Reviews and/or requests supporting documentation for validity (dependent verification and/or QLE documentation)

- Maintains any QLE supporting documentation provided by the employee
- Assists the employee with the QLE enrollment if necessary

Employee

- Creates QLE event in eBenefits
- Enters the QLE enrollment change online in the eBenefits system within the applicable time frame
- Upload supporting documentation into eBenefits system (dependent verification and/or QLE documentation) within the applicable time frame

BEST Shared Services

- Provides the Agency HBR with a list of approved QLEs on a weekly basis to ensure supporting documentation is obtained
    - If documentation cannot be obtained or if documentation is invalid, the Agency HBR should notify BEST via a ticket.
    - Work with eBenefits to reverse any QLE enrollments based on Agency notification of unsubstantiated documentation.
    - BEST will approve all QLE and dependent verification from the uploaded supporting documentation in eBenefits
- Runs comparison reports to authenticate enrollment data and ensure accurate payroll processing
- Assists employee or Agency HBR as needed

eBenefits

- Provides QLE change data back to the HR-Payroll system for payroll processing and to the applicable Insurance vendor
- Provides customer service support regarding QLE for enrollment assistance or questions

State Health Plan/NCFlex/BEST Shared Services

- Conducts random dependent/QLE eligibility audits

ADDITIONAL QLE INFORMATION/REMINDERS

- QLEs will be reviewed and approved by BEST Shared Services
- BEST can provide the Agency with a list of QLEs for employees missing documentation. See the sample report below.

A	B	C	D	E	F
EE_ID	FIRST_NM	MIDDLE_NM	LAST_NM	SPONSOR_BENEFIT_OFFER_NM	EVENT_TYPE
123456	John	Wayne	Doe	2016 SHP Medical	LOSS_OF_COVERAGE
123456	John	Wayne	Doe	NCFlex Voluntary Accidental Death and Dismemberment	LOSS_OF_COVERAGE
123456	John	Wayne	Doe	2016 NCFlex Vision	LOSS_OF_COVERAGE
123456	John	Wayne	Doe	NCFlex Core Accidental Death and Dismemberment	LOSS_OF_COVERAGE
123456	John	Wayne	Doe	2016 NCFlex Group Term Life	LOSS_OF_COVERAGE
78910	David	Stuart	Beckham	2016 SHP Medical	BIRTH

- If documentation cannot be obtained or the documentation does not validate the QLE, BEST will decline the task. The employee will need to reenter the QLE and upload supporting documentation, within the 30 days of the QLE.
- BEST can provide a similar report monthly, identifying plans with dependents so dependent eligibility documentation can be obtained also.

Leave of Absences

HR Data Maintainer

- Agency HR enters Action into the HR-Payroll system.

Agency HBR

- Generates Continuation of Benefits during LOA Notice (ZBNS008)

INFORMATION	*Employees exhausting leave will remain in pay status and benefit deductions will continue as normal.*

LOA Without Pay (LOA/LWOP)

LOA without Pay is when an employee is not exhausting leave. The LOAs listed below are considered LOA without Pay regarding processing of benefits.

- Short Term Disability
- Worker's Compensation
- Extended Illness
- Military Leave (Non-State Assignments)
- LOA (Other) - Example: Personal Reasons
- Family Illness Leave

EMPLOYEES in LEAVE OF ABSENSE LEAVE WITHOUT PAY

BEST Shared Services

- Terminates the employee's NCFlex plan in the integrated HR-Payroll System at the end of the month that the premiums were last paid.
- Monitors and maintains the eligibility of the State Health Plan coverage.
- Processes the Deductions not taken (DNTK) report each month to pull up employees in system that do not have enough money to pay premiums. Those individuals are uploaded to a leave of absence table and the information is sent to eBenefits.

eBenefits

- ebenefits sets up a direct bill plan that goes to BEST and iTEDIUM
- Sends list of terminated plans to the agency and vendors.

There are two types of direct bill plans: partially paid and fully paid employees. Partially paid employees owe only employee/dependent portion of the premium. An example would be an employee on FMLA STD with greater than five years of service. Fully paid employees owe employee/dependent and employer portion of premium. An example would be an employee with less than five years of service on extended illness on STD.

State Health Plan	NCFlex

• For continued coverage on a direct bill play, monthly premium payments need to be sent to iTEDIUM.
  ◦ Health insurance premiums are due to iTEDIUM by the **<u>1st</u>** of the month
iTEDIUM grants a 30-day grace period. Example premiums for October coverage is due October 1st, but the employee has until October 30th to pay the premium.
• If the payment is not received by the end of the grace period, the State Health Plan coverage will be terminated for nonpayment.
• EEs receiving STD benefit payments will be set up on a direct bill plan and premiums will need to be paid to iTEDIUM.
	• BEST notifies eBenefits of all employees who have gone into a LOA/LWOP status. The employee's status is then changed to LOA/LWOP and eBenefits Terms all the NCFlex plans and sends those employees back to BEST.
	• Employees can choose to continue their NCFlex benefits by making payments directly to the vendor(s).
	  ◦ Deductions will not be taken from STD pay or Workers' Comp with supplement. These EE will need to pay the NCFlex vendors directly.

Full Cost Rule (SHP only)

The same rules as a termination are applied for LOAs. If the employee's last working day or last day in paid status is between the 1st – 15th, then the employee is responsible for that month's full premiums. If the employee's last workday (paid day) is between the 16th and the end of the month, the employee is responsible for full premiums starting next month.

Example #1

The employee's LOA/Extended Illness unpaid LOA action is effective October 10, 2019 (last day in pay status is 10/09/2019), the employee is responsible for the full premium cost in October for November coverage. Coverage will end on October 31, 2019 if the employee does not send premium payments to iTEDIUM.

Example #2

The employee's LOA/Extended Illness unpaid LOA action is effective October 28, 2019 (last day in pay status is 10/27/2019), the employee is responsible for the full premium cost (Employee/Dependent and Employer) in November for December coverage. Coverage will end on November 30, 2019 if the employee does not send premium payments to iTEDIUM.

NOTE:

- NCFlex payments must be sent directly to the vendors.
- For FML, Workers' Comp, STD with > 5 years of retirement credit and Military RAD State Call up – There is no longer a $0 premium health plan to which employees can be dropped. That means these employees will be set up with a direct bill plan payment for their employee and dependent premiums. These premiums need to be sent to iTEDIUM to prevent termination of coverage. Dependents can be dropped from the plan by submitting a ticket to BEST, within 30 days of going into a LWOP status.
- Please remember to change the LOA action from FML to Extended Illness once FML has been exhausted. This includes employees who are ***waiting*** for STD approval. This would result in the employee being required to pay the FULL cost premium (employee/employer) if in LWOP status. Employees would be changed from a partially paid plan to a fully paid plan.
- Please remember to change the LOA action from STD Regular to Extended Illness once the 12-month STD period has ended if they have NOT been approved for Extended Short Term. This would result in the employee being required to pay the FULL cost premium (employee/employer) if in LWOP status.
- Retroactive health coverage for employees who are approved for Extended STD or Long-Term Disability will NOT be granted by SHP. The employee would need to obtain COBRA coverage to avoid a gap in coverage. Therefore, please encourage your employees to submit an application for Extended STD or LTD as soon as possible.

Return from LOA

Employee

- Contact their HR regarding their return to work effective date.

Agency HR

- Completes Reinstatement Action in the Integrated HR-Payroll System. The next day the employee can complete benefit elections in the eBenefits System.

NOTE: The employee can re-enroll only in the same Benefits elections s/he held prior to the LOA. Employee must restart the Health Care Flexible Spending Account.

Exception: If the employee's LOA was greater than 31 days, the employee can re-enroll in the Group Term Life Plan for the amount they had prior to the LOA or up to 200K without having to submit and EOI (Evidence of Insurability) and Spouse coverage of up to $50K with no EOI.

Employees whose LOA is less than 31 days can re-enroll only in the Group Term Life Plan they had prior to the LOA (no EOI is required).

Separation from Employment - Benefits Termination eBenefits

Agency HR

- Enters the termination action into the Integrated HR-Payroll System.

BEST Shared Services

- Sends termination record to eBenefits who will then term the plan(s)

eBenefits

- Sends file for termination of the plans to Integrated HR-Payroll System and appropriate vendors.

Agency HBR

- Generates and mails a Benefits Termination letter (ZBNS013).

Terminated Employee

- Receives Benefits Termination letter sent by Agency HBR.

Health Plan Termination (Integrated HR-Payroll System reference guide for State Employees)

If an employee terminates (last workday) from the 1st – 15th of the month:

- The employee's coverage ends the last day of the current month.

If an employee terminates (last workday) from the 16 – end of month:

- The employee's coverage ends the last day of the following month.

Example #1

An employee is separated 11/10/19 (last workday is 11/09/19), the employee's coverage ends 11/30/19.

Example #2

An employee is separated 11/24/2019 (last workday is 11/27/2019), the employee's coverage ends 12/31/2019.

Separation from Employment - Reduction in Force (RIF)

The termination letter for RIF employees will include additional information regarding the options to continue their health insurance.

12 MONTHS COVERAGE

Agency HR

- Agency HR enters the RIF termination action into the Integrated HR-Payroll System.

BEST Shared Services

- BEST Shared Services runs a nightly process to update eBenefits on the RIF status.
- Sets Employee up under RIF Category in the eBenefits System.
- Enrolls Employee into RIF SHP coverage in the eBenefits System which will be the same as the Employee's active coverage.

eBenefits System

- Submits RIF information to appropriate vendors
- Sends RIF SHP Coverage into the Integrated HR-Payroll System. (IT0167)

Agency HBR

- Agency HBR generates and mails a Benefits Termination letter (transaction ZBNS013).
- Should contact BEST Shared Services if Employee desires a different level of coverage than that which they were assigned

Terminated RIF Employee

- Should receive the Benefit Termination Letter
- Should contact BEST Shared Services if they desire a different level of coverage than that which they were assigned

NOTE: If RIF EE's last workday is on the 1st of the month:

  - The employee's coverage ends the last day of the prior month.

For Example:

RIF Employee's last workday is 11/01/2017; coverage ends 10/31/2017. The 12 month of RIF SHP coverage will run 11/01/2017 - 10/31/2018.

If RIF Employee's last workday is the 2nd – 31st of month: The Employee's coverage ends at the end of current month.

For Example:

RIF Employee's last workday is 11/15/2017; coverage ends 11/30/2017. The 12 month of RIF SHP coverage will run 12/01/2017 - 11/30/2018.

FOREVER RIF COVERAGE

eBenefits System

- Sends letter to Employees notifying them of Forever RIF insurance options
- Submits RIF information to iTEDIUM
- Places Employee into a Forever RIF category in eBenefits

BEST Shared Services

- Delimits RIF SHP coverage wage type for employer portion of SHP premium in the Integrated HR-Payroll System. (IT0014)

Terminated RIF Employee

- Can continue SHP on a fully contributory status (forever RIF)
- Must complete election of coverage within 90 days after the termination of RIF coverage

Retroactive Terminations in the State Health Plan

Under the Affordable Care Act (ACA), restrictions have been put in place that limit retroactive terminations of coverage. Specifically, SHP will not terminate coverage due to untimely actions processed by Agency HBRs. This includes LOA and Separation Actions.

Employees must be given at least a 30-day notice before coverage can be canceled. The SHP can terminate the member's coverage only on a current basis. That means the Agency will be responsible for any health plan premiums charged due to untimely processing of actions that prevent a retro termination of coverage.

Be sure to complete the following tasks in a Termination situation:

- Process Actions in a timely manner.
- Provide Employees with the following letters:
    - LOA Continuation Notice Letter
    - Benefits Termination Letter

Mandatory State Retirement Plans

Retirement Plans

- Enrollment in Mandatory State Retirement Plans is created automatically. (TSERS, LEORS, CJRS)
- BEST Shared Services monitors the system to ensure that each employee is enrolled in the correct plan.
- Optional Retirement Program (ORP) Retirement (NC School of Science and Math coordinate enrollment with BEST Shared Services)
    - Employees have 60 days from their hire date to complete retirement plan selection.

NOTE: NC School of Science & Math will notify BEST Shared Services when a faculty member enrolls in the Optional Retirement Program (ORP). BEST Shared Services completes the retirement enrollment in the system. Eligible agencies have reporting capabilities to monitor employee enrollment.

Supplemental Savings Plan Enrollment

Supplemental saving plans include:

- 401(k)
- 401(k) Roth Savings plans
- 457 Deferred Compensation plans
- 457 Roth Savings plan
- 403(b) plans (Salary Reduction Agreement form)
    - Prudential is the vendor of the savings plan will know if the employee is eligible for the plan.
- 401(k) New hires can enroll:
    - By telephone directly with the vendor
    - Online (online enrollment requires User ID & Password created by the employee)
    - Sending a paper form to the vendor

- 457 Deferred compensation plans automatically send a PIN number to all newly eligible employees:
  - By telephone directly with the vendor
  - Online (online enrollment requires User ID & Password created by the employee)
  - Sending a paper form to the vendor

How the Integrated HR-Payroll System Determines Participation Eligibility

It is important to understand that the Integrated HR-Payroll System uses a combination of organizational assignment data, such as Personnel area (agency), and Program Groupings to determine in which benefits plans an employee is eligible to participate. Program Groupings is technical jargon for a set of rules used by the system to sort employees into different groups, depending on which plans you offer to different groups of employees. The Program Groupings used by the Integrated HR-Payroll System are explained in the following pages.

Employee group – The purpose of the Employee group is to define the position's appointment type such as SPA, EPA or supplemental staff as a few examples. It is used to establish rules for calculating leave and managing pay.

Employee subgroup – This field defines whether the employee is subject or not subject to the Fair Labor Standards Act (FLSA) overtime and full-time/part-time status.

Personnel area – The Personnel Area is tied directly to the company code and is used by Payroll to identify the specific agency for whom the employee works. A company code can include one or more Personnel Areas.

Planned work time – This infotype determines the weekly planned working time for a position.

Integrated HR-Payroll System Program Groupings

The Integrated HR-Payroll System uses these three program groupings to determine which benefits plans are offered to an employee:

- Benefit Area
- 1st Program Group
- 2nd Program Group

Benefit Area

The Benefit Area is the first sub-division of benefit information. The State of North Carolina has defined one benefit pool that contains all state employees. The Integrated HR-Payroll system field code is:

- **NC** for State of North Carolina

1st Program Group

The first program grouping allows you to sort the "Benefit Area" into different groups, depending on which plans are offered to different employees. The Integrated HR-Payroll System has defined four first program groups based on the planned worked hours and employee groups such as SPA, Permanent, Probationary, Time-Limited, etc. The following descriptions summarize the eligibility rules for the State Health Plan, NCFlex plans, and the State Retirement system based on the planned worked hours.

State Health Plan (SHP)

If employees work at least 30 hours per week, they and their dependents are eligible to enroll in a health insurance plan. The state pays for employee coverage in the State Health Insurance program. Employees must pay for family or dependent coverage. If an employee works at least 20 hours but less than 30 hours per week, the employee is still eligible for the SHP but on a full contributory basis.

NCFlex

Employees are eligible to participate in NCFlex if they are a state agency, university or select community college employee working 20 or more hours per week in a permanent, probationary or time-limited position. They may check with their Agency HR concerning their benefit eligibility.

Retirement

An employee with a permanent, probationary, or time-limited appointment, who works at least 30 hours per week for nine months of the year, is automatically a member of the State Retirement System. Participation in the Retirement System of North Carolina is mandatory for every permanent, probationary, or time-limited appointment employee who works at least 30 hours each week.

Field Value	Description	Definition
FULL	Full Benefits eligible	EE works greater than or equal to 30 hours/week
BNR	Benefits - No retirement	EE works greater than or equal to 20 hour/week but less than 30 hours/week
NOB	No benefits	EE works less than 20 hours/week **- OR –** EE is a temporary/contractor working less than 30 hours/week
ACA	ACA	Temp EE works greater than 30 hours/week

2nd Program Group

The 2nd Program Group is used to further sort employees into a more distinct sub-group based on the employee's agency and retirement plan eligibility. The most common group is B014, which denotes the benefits plans available to a regular state employee and includes the Teachers and State Employees Retirement System (TSERS).

Examples:

Personnel Area (Agency)	Retirement Plan	2nd Program Group
AOC	CJRS	B001
DPS (Highway Patrol)	LEORS	B012
DHHS	TSERS	B014

Additional Resources
Refer to the OSC Training website in HELP documents for more information about Benefit Program Groupings. Search for the following Job Aid: • Benefits Program Groupings Reference

Program Groupings - Example 1

The example below lists the benefit offer to an employee who falls in the following program groups:

Benefit offer for **Full** and **B014** Program Groups:

- TSERS
- State Health Plan
- NCFlex
    - Accident Plan
    - Dental
    - Disability
    - Vision
    - Cancer
    - Life
    - Voluntary AD&D
    - Core AD&D
    - HCFSA
    - DDC FSA
    - Critical Illness
    - Tricare
- 401k Savings plan
- 401k Roth plan
- 457 Savings plan
- 457 Roth Savings plan

NOTE: 403(b) Saving plans are an agency-specific benefit. Four agencies offer 403(b) savings plans.

Program Groupings - Example 2

The example below lists the benefit offer to an employee who falls in the following program groups:

Benefit offer for **BNR** and **B014** Program Groups:

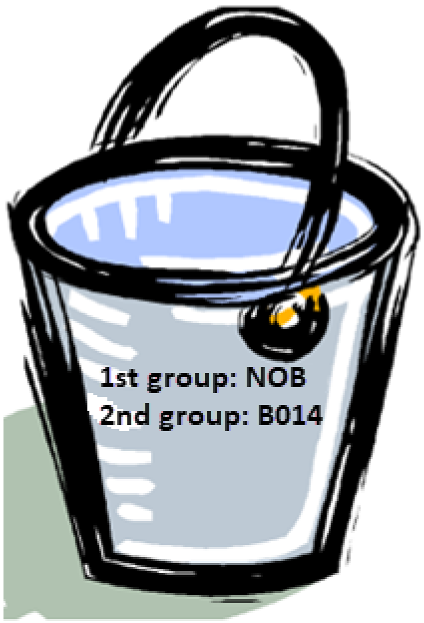
- State Health Plan (Employee pays full cost)
- NCFlex
    - Accident Plan
    - Dental
    - Disability
    - Vision
    - Cancer
    - Life
    - Voluntary AD&D
    - Core AD&D
    - HCFSA
    - DDC FSA
    - Critical Illness
    - Tricare
- 457 Savings plan
- 457 Roth Savings plan

NOTE: Retirement plans are not part of BNR. Employees are responsible for the full cost of premiums for the SHP.

Program Groupings - Examples 3

The example below lists the benefit offer to an employee who falls in the following program groups:

Benefit offer for **NOB** and **B014** Program Groups:



Only the plans listed below are offered:

- 457 Savings plan
- 457 Roth Savings plan

Program Groupings - Examples 4

Benefit offer for **ACA** and **B014** Program Groups:

Only the plans listed below are offered:

- ACA (High Deductible Health Plan)
- 457 Savings plan
- 457 Roth Savings plan

SUMMARY

In this lesson, you learned to:

- Identify the policies that will be enforced by the system
- Describe the roles and responsibilities of key personnel
- Explain the benefits business processes
- Enrollments for NCFlex and SHP (State Health Plan)
    - Open enrollment
    - New Hire enrollment
    - Qualifying Life Events
    - Leave of Absences (LOA)
    - Benefits Termination
    - Retirement Plans
    - Savings Plans Enrollment
- Explain how the Integrated HR-Payroll System determines which benefits to offer an employee

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LESSON 2: BENEFITS INFOTYPES

Lesson Overview

Upon completion of this lesson, you should be able to:

- Identify benefits infotypes and subtypes
- Display individual benefit infotypes for an employee using the PA20, Displaying HR Master Data for Benefits, transaction

The **PA20** transaction, Displaying HR Master Data for Benefits, is another method that you can use to display a specific benefit infotype. In this lesson, we will use the PA20 transaction to familiarize you with the information contained in some key infotypes for benefits.

Benefit Infotypes

- Infotype used for enrollment
  - 0171 General Benefits Data
- Infotypes created by enrollment
  - 0167 Health Plans
  - 0168 Insurance Plans
  - 0169 Savings Plans
  - 0170 FSA Plans
  - 0377 Miscellaneous Plans
- Infotype to store dependent information
  - 0021 Family Members

NOTE: The Miscellaneous Plans infotype (0377) is used for processing State Health Plan prepaid premiums, and other premium adjustments.

An infotype, in simple terms, is a screen that stores employee HR master data information. See the list above that displays the benefits infotypes. In this lesson, we will discuss the following infotypes:

- 0021 Family Members
- 0167 Health Plans
- 0171 General Benefits Data

Benefits Administration will also access these infotypes:

- **Organizational Assignment (IT0001)** -- This infotype is used to manage temporary and rehired retiree benefit eligibility
- **Recurring Payments/Deductions (IT0014)** -- This infotype is used for the collection of premiums for agency-specific benefits.
- **Additional Payments (IT0015)** – Used to define wage elements which are not paid or deducted in every payroll period in contrast to recurring payments and deductions which are paid or deducted within a defined period.
- **Monitoring of Task (IT0019)** – Used to create date-driven tasks that have follow-up activities. Depending on the selected task type, the system proposes a date on which you will be reminded of the stored tasks. This enables you to implement the follow-up activities on schedule. Examples include the expected return date of an LOA, the date vacation will run out for an LOA, the date a foster child was added as a dependent, and the date a foster child's eligibility was proven.
- **Date Specifications (IT0041)** – Stores dates that are required by the State, such as Original Hire Date, Agency Hire Date, Last Day Worked, Notification of RIF, Benefit Eligible Date, and 457 Catch-up date
- **Time Specification/Employment Period (IT0552)** – Stores additional employment or absence periods for the calculation of the employment period. It also stores months of service from legacy system at the time of conversion to the Integrated HR-Payroll System or Non-Beacon to Beacon transfers.

Subtypes

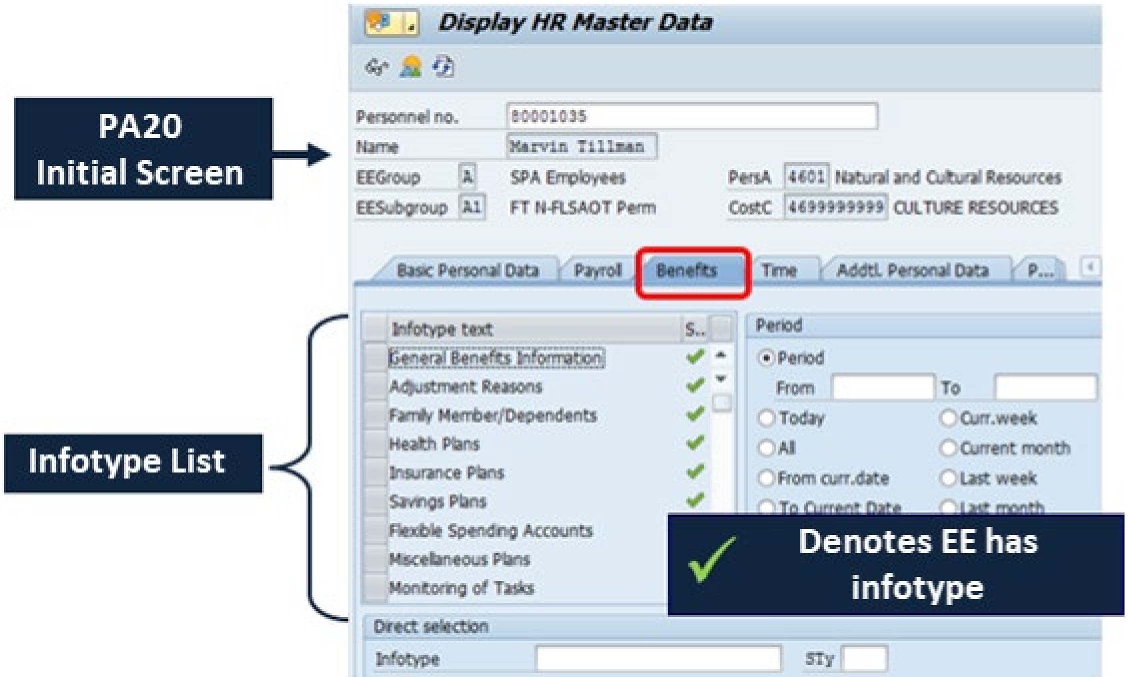
Infotypes can contain subtypes. A subtype is a subdivision or a separate category of information existing within an infotype.

Example:

The subtypes for the Health Plans infotype are:

- ACCT – Accident Plan
- CANC – Cancer Plan
- CRIT – Critical Illness
- DENT – Dental Plans
- MEDI – Medical Plans
- VIS – Vision Plans

Display Master Data (PA20)

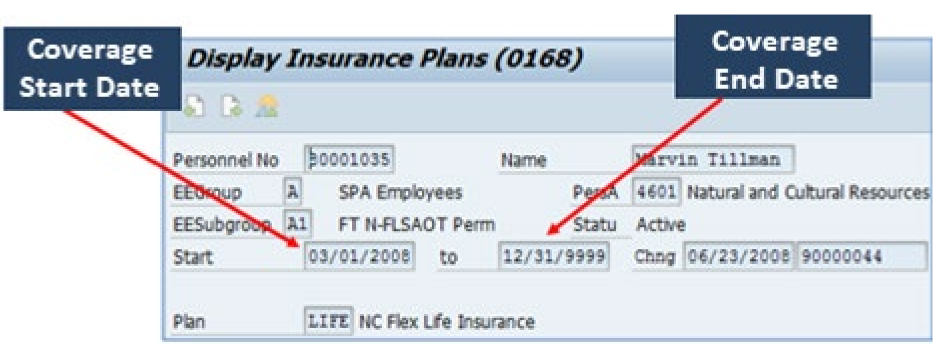


The **PA20** transaction is used to display:

- Individual infotypes within an employee's records
- An overview of the records of a specific infotype
- Specific data on an infotype

The initial screen for the **PA20** transaction lists the infotypes that have been established for an employee. To display a list of benefits infotypes, click the Benefits tab.

Validity Periods

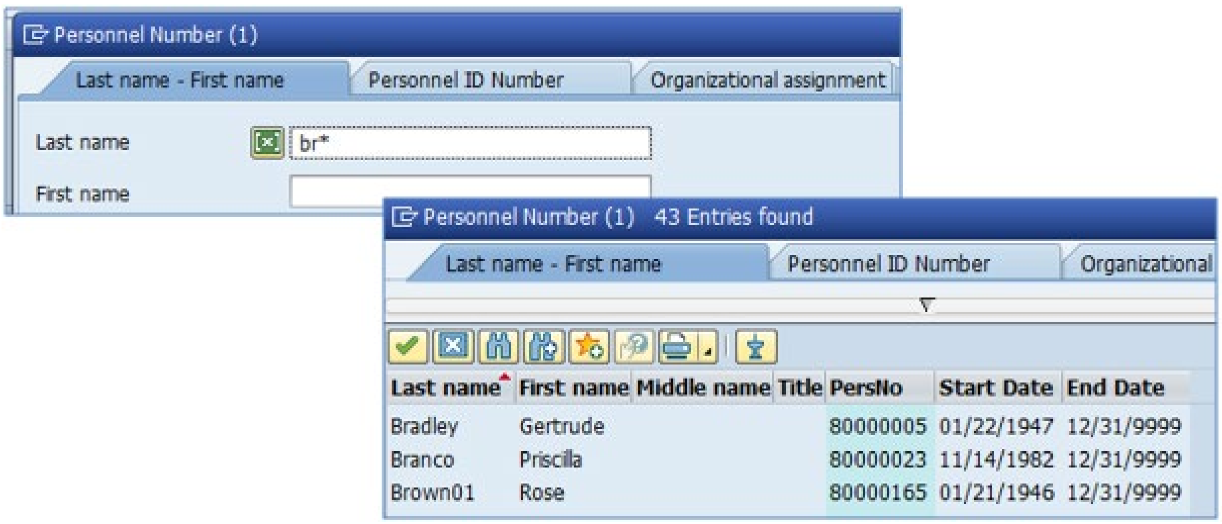


All infotypes have a validity period which consists of a start date and end date.

The validity period defines the effective dates of infotype records. It enables the Integrated HR-Payroll System to capture changes to employee information while retaining history.

When information is current, the "end of time" (12/31/9999) will be displayed in the field as the end date.

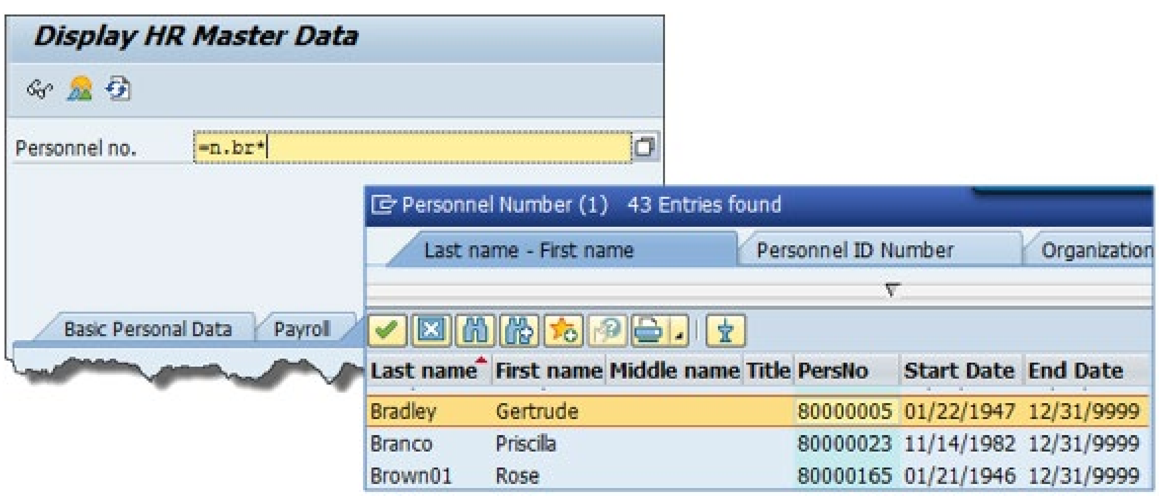
Employee Search by Name



Search by Name - Use '*' wildcard

Use the matchcode at the end of the Personnel No. field. You can then search for the employee by last and first name, personnel number, or org assignment.

> Example: To search by name for records of employee Bradley, type br* and press Enter for a list of possible entries.



There are a variety of ways you can identify or search for an employee:

1. **Personnel Number**: Enter the Personnel Number into the Personnel no. field.
2. Shortcut:
   A. Use a shortcut (=n.xxxx) in the Personnel No. field to search by last name.

      (Example: =n.hendrix - NO spaces.)

      A list of all employees with that last name displays. Double-click to select the appropriate employee.

      You can search for an employee by using either their full name or partial name. Here are more search examples:

      =n.last name, first name (Example: =n.Jones,Mary)

      =n.last name, first initial (Example: =n.Jones,M)

      =n.first letter of last name* (Example: =n.Jon*)

   B. Use a shortcut (=c..#####) in the Personnel No. field to search by SSN.

      (Example: =c..123456789 - NO spaces.)
3. **Matchcode**: Use the Matchcode at the end of the Personnel No. field to search by last and first name, or by Personnel Number, or by org assignment.

* *

EXERCISE 2.1: Logging on to the Integrated HR-Payroll System

SCENARIO

Use the following steps to log on to the Integrated HR-Payroll system.

Instructions

1. Click on the Favorites on your Internet browser to access the Training portal link.
2. Enter the **User ID** and **password** that is assigned to you by your instructor.
3. Click on the **Log on** button.
4. Click **Yes** to confirm the security message displayed.
5. Click on the **SAP GUI tab**.
6. Click on the **training client** specified by your instructor.
7. **Stop** when you have reached the SAP Easy Access screen.

You must enable your technical settings to be able to display the transaction codes on your screen.

8. Select **Extras > Settings** from the menu at the top of the screen to display the settings dialog box.
9. Click the Display technical names checkbox.
10. Click the **Continue (Enter)** button. The transaction codes will now display in the menu tree.

Now we will create Favorite links for the transactions we will use in class.

11. Right-click on **Favorites**.
12. Select **Insert transaction** from the list. A dialog box is displayed.
13. Enter **PA20** in the text box.
14. Click the **green check**  to close the box and add the transaction to your Favorites list.
15. Repeat steps 11-14 to add the following transactions to your Favorites list.
    - HRBEN0006
    - ZBNS008
    - ZBNS013
16. **Stop** when you have added the four transactions.

Now add a URL to SAP Easy Favorites for the OSC Training HELP web page.

17. Copy the web address as indicated by your instructor for the OSC Training HELP page.
18. Right-click on **Favorites**.
19. Select **Add other objects** from the list. A drop-down list is displayed.
20. Click Web address or file from the list. A pop-up box dialog display.
21. Enter a **title** for your web page in the Text field.
22. Paste the web address you copied in step 17 for the OSC Training HELP page in the Web Address or File field.
23. Click the **Continue**  button at the bottom right-hand corner of the box. The URL has been added to the SAP Favorites folder.
24. Click the URL to access the website you just added.

* *

EXERCISE 2.2: Display Employee Benefits Data for Family Members/Dependents

SCENARIO

Perform this transaction to display employee master data including the Family Members/Dependents infotype.

Information

Transaction:	PA20
Employee:	Marvin Tillman

Instructions

In a moment, your instructor will lead you to access the Family Members/ Dependents infotype using the PA20 transaction. The PA20 transaction allows you to display employee information. In general, all the current information we have about an employee in the system can be viewed from this transaction.

The basic steps for using the **PA20** transaction are:

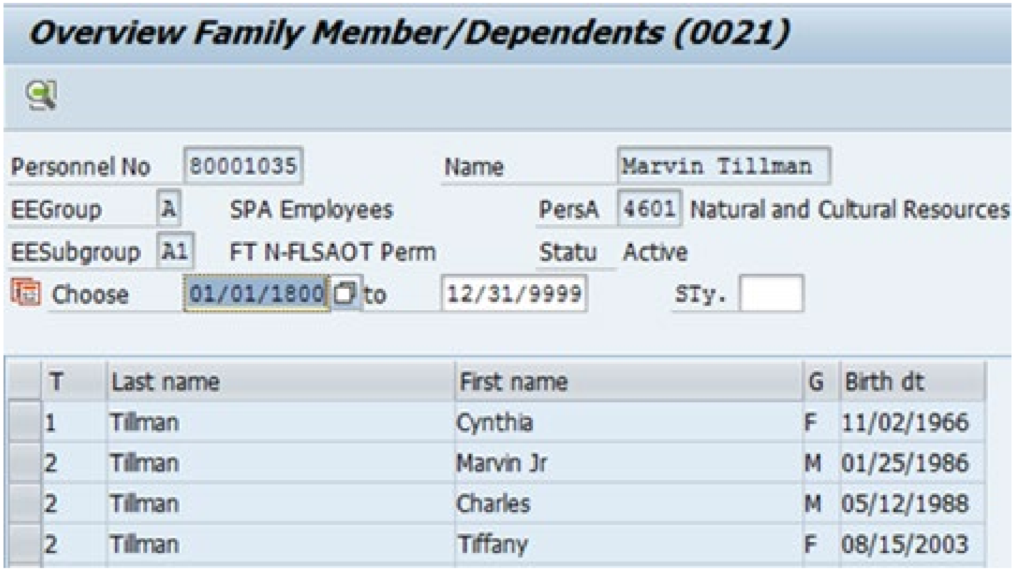
1. From the Easy Access screen, click in the **Command** field and type **PA20**.
2. Click the **Enter** button. The *Display HR Master Data* screen displays.

On the left side of the *Display HR Master Data* screen, you see the Object Manager. You can leave it in place as it is, or you can hide it to allow a larger screen view.

3. On the menu at the top of the screen, click the following path: **Settings > Hide Object Manager**.
4. The Object Manager is no longer visible on the screen. If you want to view the Object Manager again, click the same steps, except this time you will click Show Object Manager.
5. Type or select the employee's personnel number in the **Personnel no**. field.
6. Type **0021**, for Family Member, in the Infotype field. Keep in mind that only those infotypes that have a green check contain data.
7. Click either the **Display** button or **Overview**. The employee's master data for the specified infotype displays. Display shows each dependent record. Overview allows you to select the dependent to view.

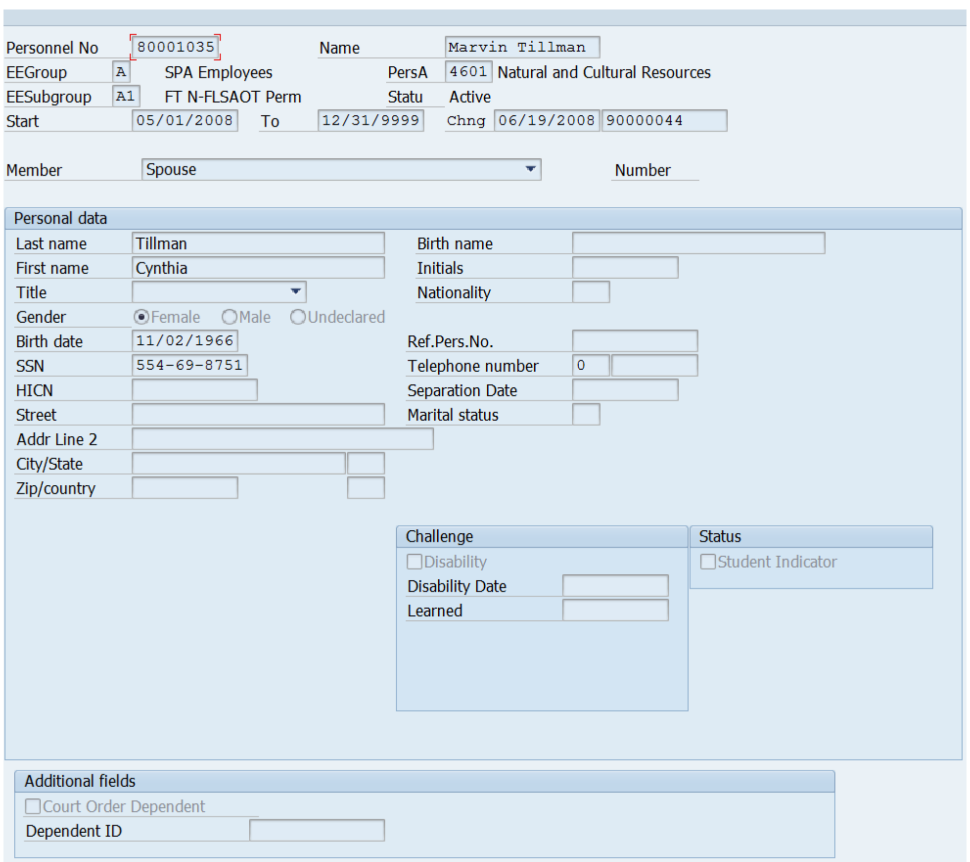
* *

Family Member/Dependents (IT0021)



Click the **Overview** button to display Dependent details.

This screen is the result of clicking the Overview button on the Display HR Master Data screen for the Family Member/Dependent infotype (IT0021).



A Family Member/Dependent record must exist before employees can include family and related persons as dependents and beneficiaries on their benefit plans.

NOTE: Social Security numbers and Dates of Birth are required in the eBenefits system.

The Status and Challenge indicators are relevant to dependent children over 26 years old who are medically disabled.

When these indicators are checked, the system allows the dependent to continue to be eligible for health plans.

The Integrated HR-Payroll System stores information about family members or related persons including:

Subtype	Name
1	Spouse
2	Child

These family members are available as dependents.

* *

EXERCISE 2.3: Display Employee Benefits Data for Family Members/Dependents

SCENARIO

For this exercise, Jean Leach wants you to verify that all her dependents are in the Integrated HR-Payroll System. Access her Master Data record using the PA20 transaction and then use infotype 0021 (Family Member/Dependents) to determine the names of the dependents listed for Jean on her various plans.

Information

Transaction:	PA20
Employee:	Jean Leach
Infotype	IT0021

Instructions

Use the data in the business scenario above to display Jean's master data structure.

Practice using the:

-  **Overview** button on the Display HR Master Data screen
-  **Next record** screen button on the Display Family Member/Dependents screen. (This button is available on the Display Family Members/Dependents screen.)

Questions/Results

1. How many dependents does Jean have?

* *

EXERCISE 2.4: Display Employee Benefits Data Health Plans

SCENARIO

Perform this transaction to display employee master data including the Health Plans infotype.

Information

Transaction:	PA20
Employee:	Marvin Tillman
Infotype	IT0167

Instructions

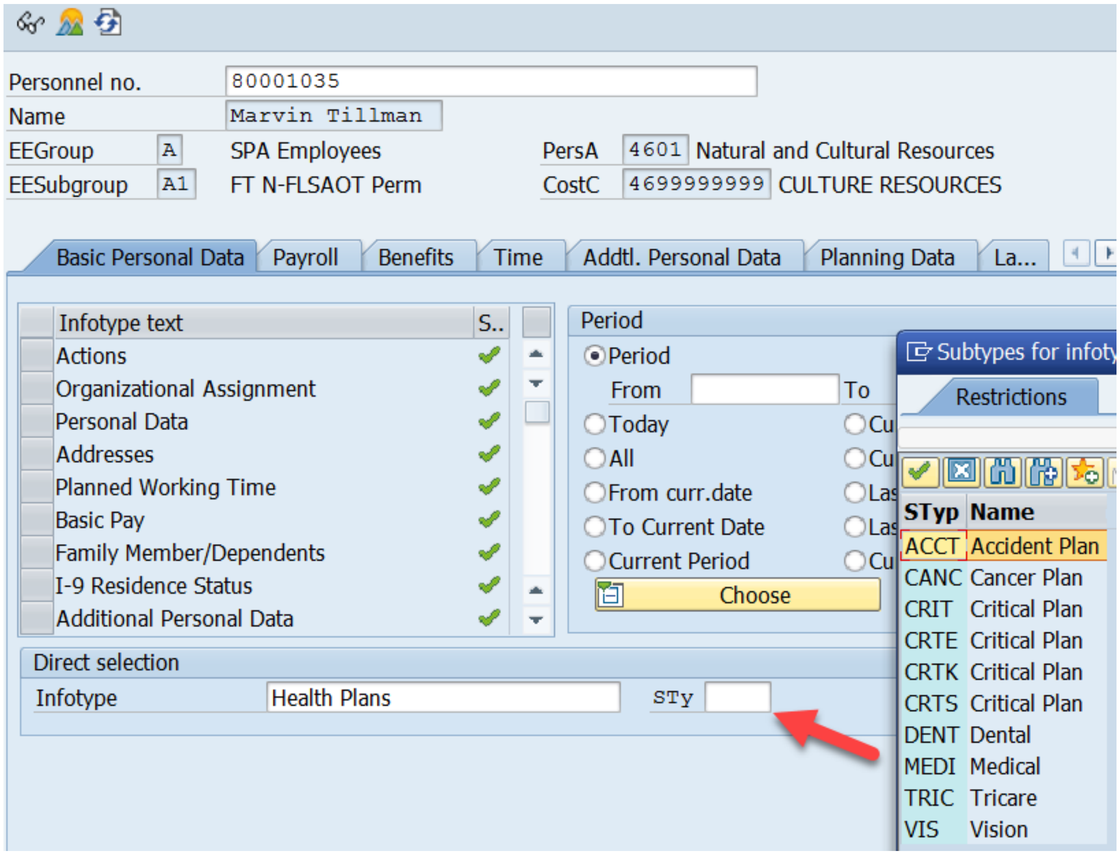
Follow along as your instructor demonstrates how to access transaction code PA20 to display master data, specifically the Health Plan infotype IT0167.

The PA20 transaction allows you to display employee information. In general, all the current information available for an employee in the system can be viewed from this transaction.

Follow along with your instructor and perform the Employee search for Marvin Tillman using his Social Security Number (402-39-3695).

* *

Health Plans Overview (IT0167)



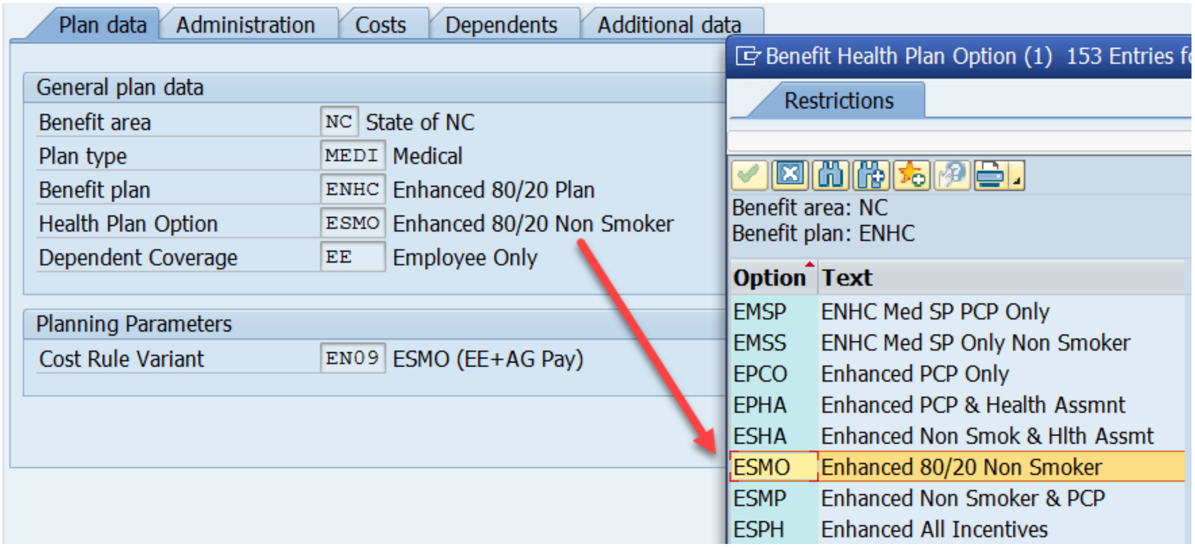
NOTE: Usually changes will not be made to this infotype. It is automatically created and updated by enrollment procedures.

This infotype stores details of the health plans in which the employee is enrolled. For each health plan in which the employee participants, a separate record exits.

The following seven subtypes have been defined:

- **ACCT** – Accident Plan
- **CANC** – Cancer
- **CRIT** – Critical Illness
- **DENT** – Dental
- **MEDI** – Medical
- **TRIC** – Tricare
- **VIS** – Vision

HEALTH PLANS PLAN DATA TAB



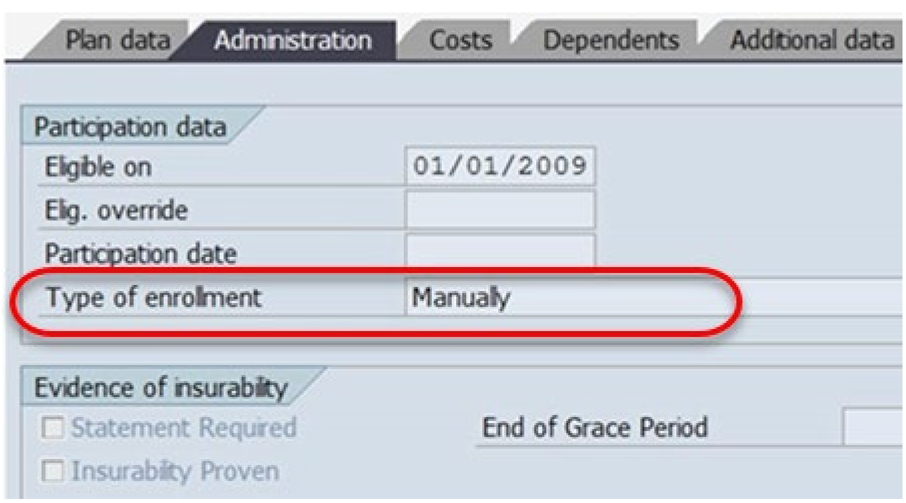
The **Plan data tab** shows how the plan fits into your benefit structure. It stores the cost rule variant for the plan.

NOTE: For the State Health Plan, the Plan Data tab shows the Employees' Wellness Credits under the Health Plan Option.

Once an infotype has been selected, a series of tab pages will become active, showing the different categories of information. The Plan data tab is the default page.

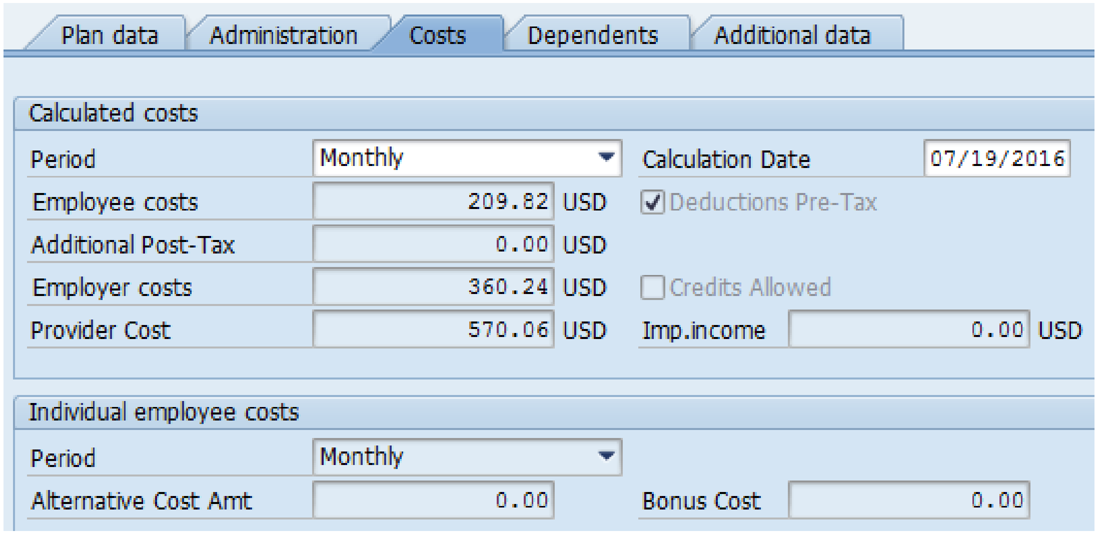
NOTE: The Additional data is not being used by the Integrated HR-Payroll System.

HEALTH PLANS ADMINISTRATION TAB (IT0167)



NOTE: The *Type of Enrollment* field may show "Adjustment Reason" for plans prior to 2016.

HEALTH PLANS COST TAB (IT0167)

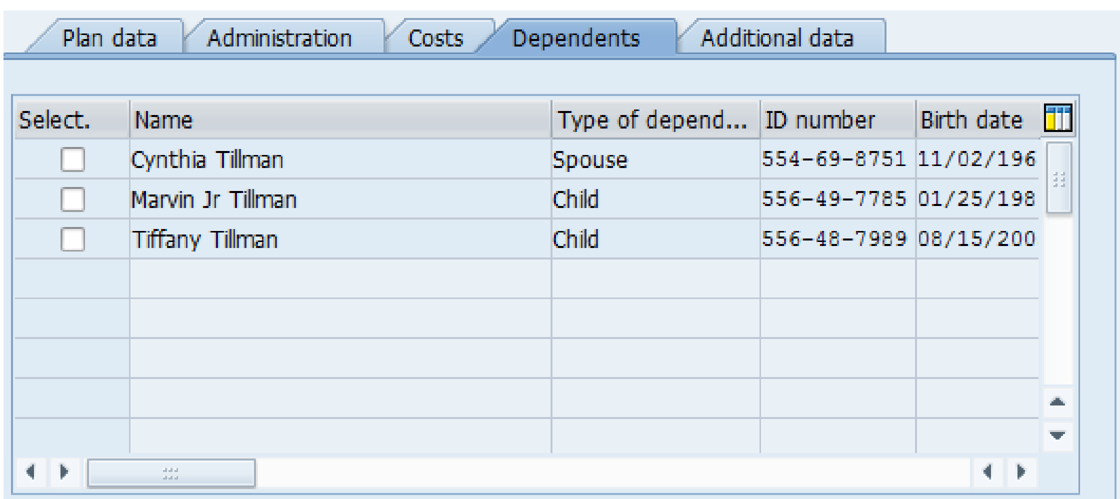


The **Costs tab** shows the automatically generated employer and employee plan costs. (The example above is from Jean Leach's medical plan.)

This slide illustrates an employee on a monthly pay cycle. The deductions shown are the monthly premium amounts.

Calculation date information and the Deductions Pre-Tax checkbox can be found on the right-hand side of the screen.

HEALTH PLANS DEPENDENTS TAB (IT0167)



The **Dependents** tab lists the possible dependents for the plan. The dependents chosen by the employee are marked here in the Select indicator.

> **NOTE**: The eBenefits System requires SSNs and DOBs for all dependents. All Employees should ensure accuracy.
>
> **NOTE**: The Additional data tab is not being used by the Integrated HR-Payroll System.

* *

EXERCISE 2.5: Display Employee Benefits Data for Health Plans

SCENARIO

For this exercise, Jean Leach wants a status check on her health benefit plans. Access her Master Data record using the PA20 transaction. Use IT0167 (Health Plans) to determine which health plans Jean has.

Information

Transaction:	PA20
Employee:	Jean Leach
Infotype	IT0167

Instructions

1. Use the data in the business scenario above to display Jean's master data structure.
2. Answer the questions after locating the master data record.

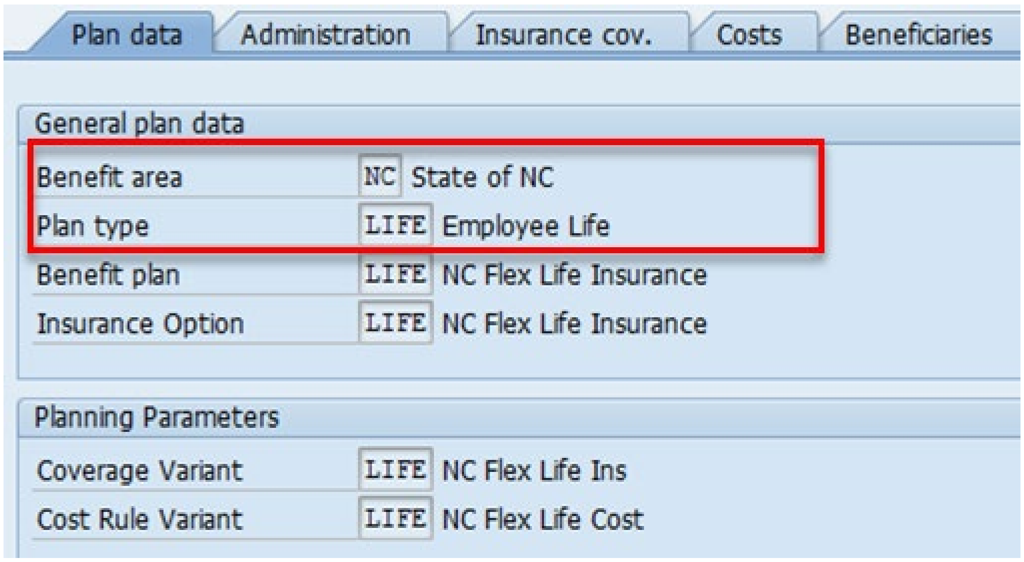
Questions/Results

1. How many active plans does Jean have?
2. How did you determine your results?
3. Does Jean have the Vision plan?
4. True/False: Jean is on a Non-Smoker plan for her State Health Plan?
5. What is Jean's monthly premium?

6. Which tab page did you view to determine your result?

Insurance Plans (IT0168)

PLAN DATA TAB (IT0168)



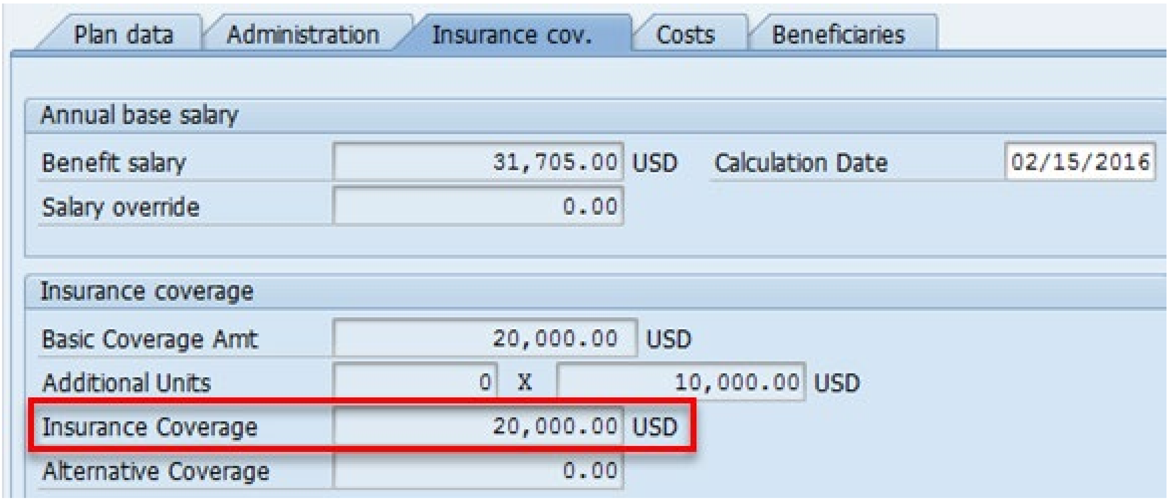
The **Plan data** tab of the Display Insurance Plans infotype displays whether the plan is:

- **AADD** – Core AD&D
- **AD&D** – Flex AD&D
- **LIFE** – Employee Life Insurance
- **LIFK** – Child(ren) Life Insurance
- **LIFS** – Spouse Life Insurance

In the example above a Life plan is displayed.

INFORMATION	• Evidence of Insurability (EOI) information is now housed in the eBenefits System. • All Life Insurance Premiums become Post-Tax whenever Child or Spouse Insurance is elected

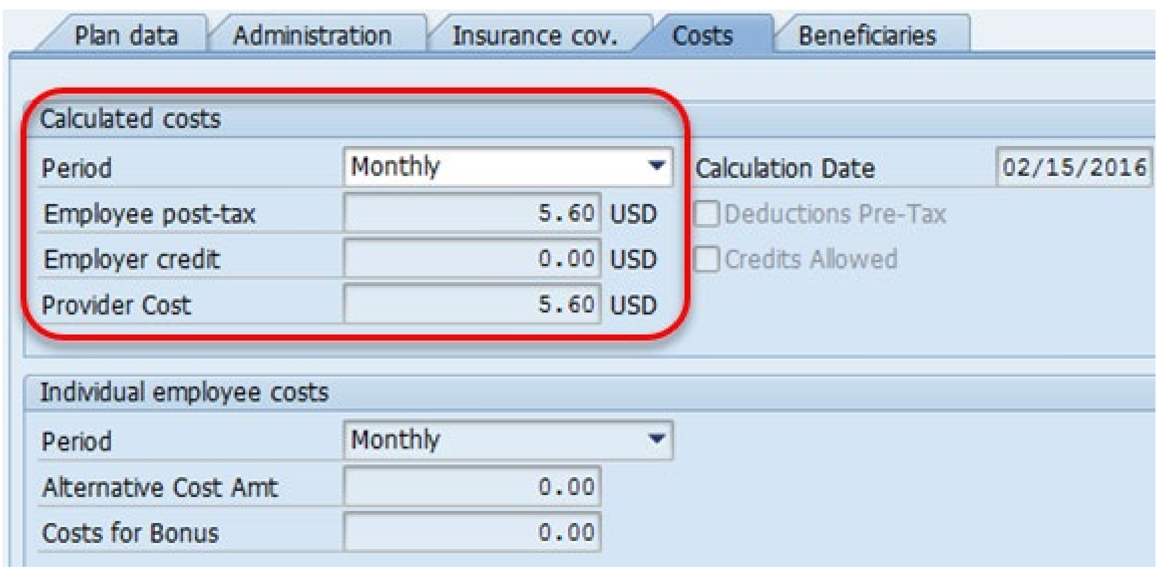
INSURANCE COVERAGE TAB (IT0168)



The **Insurance Cov**. tab displays the coverage amount.

The *Insurance Coverage* field displays the total coverage amount.

COSTS TAB (IT0168)

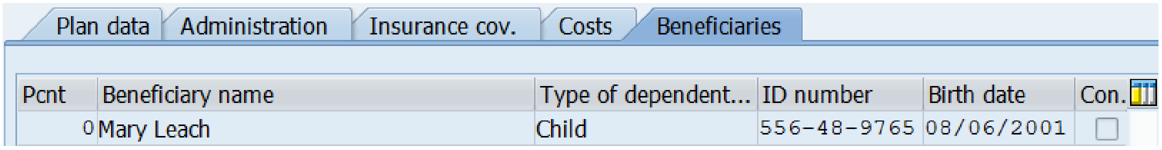


The Costs tab displays the costs paid by the employee and the employer.

NOTE: For a bi-weekly employee, the deduction will be half the cost displayed.

The Admin and Beneficiary tabs are not shown. The types of data displayed are the same as IT0167 (Health Plans).

BENEFICIARIES TAB (IT0168)



Pcnt	Beneficiary name	Type of dependent...	ID number	Birth date	Con.
0	Mary Leach	Child	556-48-9765	08/06/2001	☐

The **Beneficiaries** tab displays:

- Name of the Beneficiary
- Type of Beneficiary

Employees can perform changes in the eBenefits System.

NOTE: Beneficiaries are no longer housed in the Integrated HR-Payroll System.

NOTE: Current beneficiary information is listed only in the eBenefits System and is entered by employees.

* *

EXERCISE 2.6: Display Employee Benefits Data for Insurance Plans

SCENARIO

For this exercise, Jean Leach wants a status check on her insurance plans. Access her Master Data record using the PA20 transaction. Use infotype 0168 (Insurance Plans) to determine which insurance plans Jean has.

Information

Transaction:	PA20
Employee:	Jean Leach
Infotype:	IT0168

Instructions

1. Use the data in the business scenario above to display Jean's master data structure.
2. Use IT0168 (Insurance Plans) with the Overview option to determine her various insurance plans.
3. Answer the questions below after locating the master data record.

Questions/Results

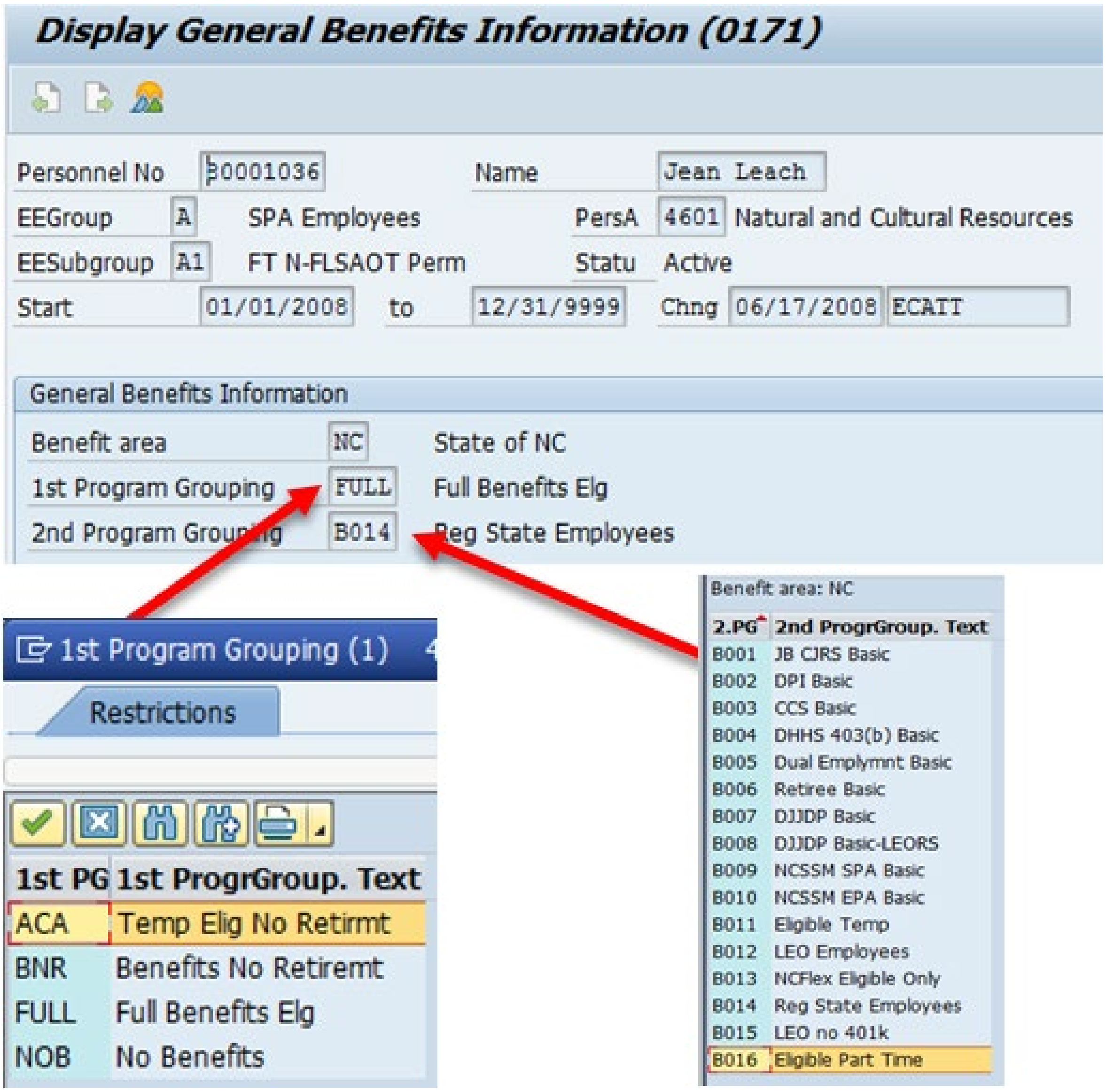
1. How many insurance plans does Jean have?

2. How did you determine your results?

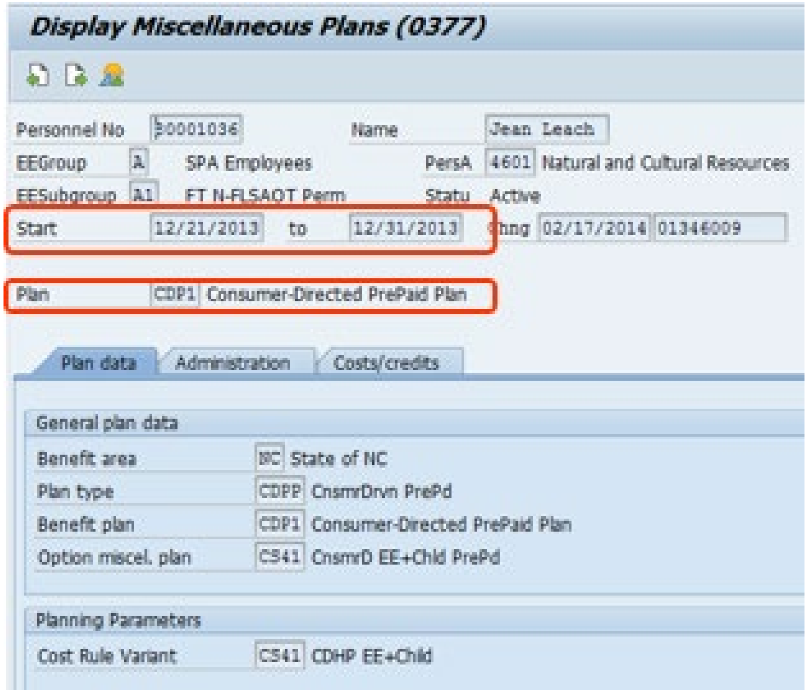
* *

General Benefits Data (IT0171)

This record is essential for benefits processing. An employee must have a General Benefits Information record before enrolling in a benefits plan.



Miscellaneous Plans (IT0377)

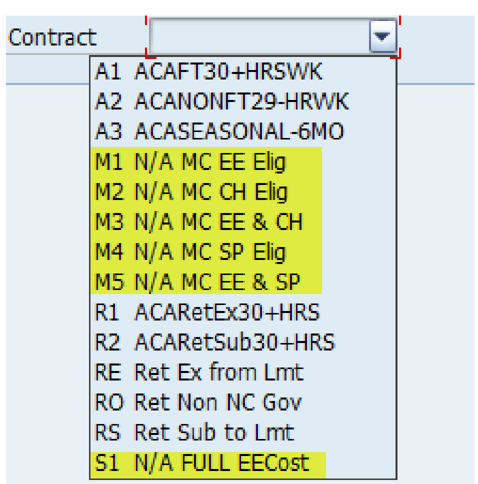


The Miscellaneous Plans Info type is created automatically when an employee enrolls, changes, or cancels the SHP (State Health Plan). It is a mechanism used to collect the prepaid and/or refund premium.

For example: As a new hire, if an employee is hired 6/19/18 and has selected to start the SHP plan on 7/01/18, the miscellaneous plan will collect the prepaid premium in the month of June for the 07/01/18 start date. Subsequent premiums will automatically occur as a payroll deduction.

NOTE: Miscellaneous Plans are dated a little differently for DOT (Bi-Weekly Payroll) Employees

Organizational Assignment (IT0001)



CONTRACT FIELD

To view the Contract field, you can:

1. Select the Organizational Assignment infotype (IT0001).
2. Open the drop-down (match code) to view possible entries.

The Contact Field on IT0001 is only used for Rehired Retirees or ACA employees. Most selections under this field are no longer actively being used.

Temp

- A1 – ACA Full-Time (working 30+ hours / week)
- A2 – ACA Non-Full-Time (working 29- hours / week)
- A3 – ACA Seasonal (to be employed < 6 months)

Rehired Retiree

- R1 – ACA Retired Exempt from Limit (working 30+ hrs./wk.)
- R2 – ACA Retired Subject to Limit (working 29- hrs./wk.)
- RE – Retired Exempt from Limit (working 29- hrs./wk.)
- RO – Retired Non-NC Government
- RS – Retired Subject to Limit (working 29- hrs./wk.)

* *

EXERCISE 2.7: Display Employee Benefits Data for an Employee

SCENARIO

You need to display the employee benefit data for employee Peter Whitley. You will use the following infotypes:

- Infotype 0170 (Flexible Spending Account)
- Infotype 0169 (Savings Plan)

Information

Transaction:	PA20
Employee:	Peter Whitley
Infotype	(See list above)

Instructions – Try this on your own!

1. Use the data in the business scenario above to display benefit data information.
2. Answer the questions below after locating the master data record.

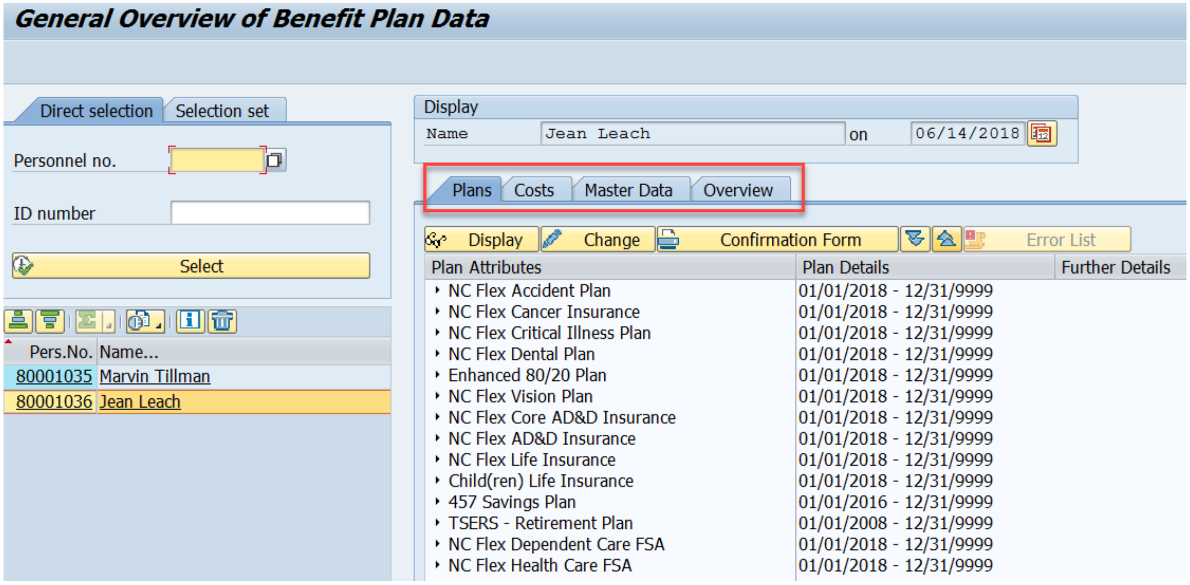
Questions/Results

1. What type of Flexible Spending Account does Peter have?
    a. Results
    b. Infotype
2. What is Peter's monthly contribution towards his Savings Plan?
    a. Results
    b. Infotype

Note: *Up to $500 can roll over into the following plan year's HCFSA*

* *

Participation Overview – HRBEN0006



Use the Participation Overview transaction (HRBEN0006) to display a summary list of all the benefit plans in which an individual employee is enrolled. From the General Overview of Benefit Plan Data screen, you can select (or highlight) a plan and then display the employee information for the plan.

Once an employee has been selected, a series of tab pages become active, showing the different categories of information. The Plans tab is the default page.

Helpful tip: When you double-click on the plan name, the infotype record displays.

Tabs available on the HRBEN006 are:

- **Plans** – Lists all plans for the Employee
- **Cost** – Displays the cost for both the employee and employer
- **Master** - summarizes employee data from these infotypes:
    - Personal Data (IT0002)
    - General Benefits Information (IT0171)
    - Organizational Assignment (IT0001)
    - Family Members/Dependents (IT0021)
- **Overview** - provides a block diagram that shows participation in plans over a period of time.
- **Print Confirmation Statement** button

KNOWLEDGE CHECK

SCENARIO

In this exercise, you need to check the details of Marvin Tillman's benefits record. He is an employee who has had several Qualifying Life Events and has created QLEs in the eBenefits System. He has phoned you and needs you to access his benefits to determine their status.

Information

- Transactions: PA20/HRBEN0006
- Employee: Marvin Tillman

Instructions – Try this on your own!

1. Work together with those at your table as directed by your instructor.
2. Use transaction **PA20**.
3. Select the employee (Marvin Tillman).
4. View the employee's Benefits Data and answer the questions listed below.

Questions/Results

1. How many family members or dependents does Marvin have in the Integrated HR-Payroll System?
2. Where did you go to find your answer?
3. Who are his family members?
4. How much is Marvin contributing for his pre-tax Health Care FSA?
5. Why is his retirement enrollment date different that the rest of his benefits?
6. What special indicators are listed on Marvin Jr.'s Dependent record?

SUMMARY

In this lesson, you learned to:

- Identify benefits infotypes and subtypes
- Display individual benefits infotypes for an employee using the PA20, Displaying HR Master Data for Benefits, transaction
- Scope of SAP Benefits Administration Module

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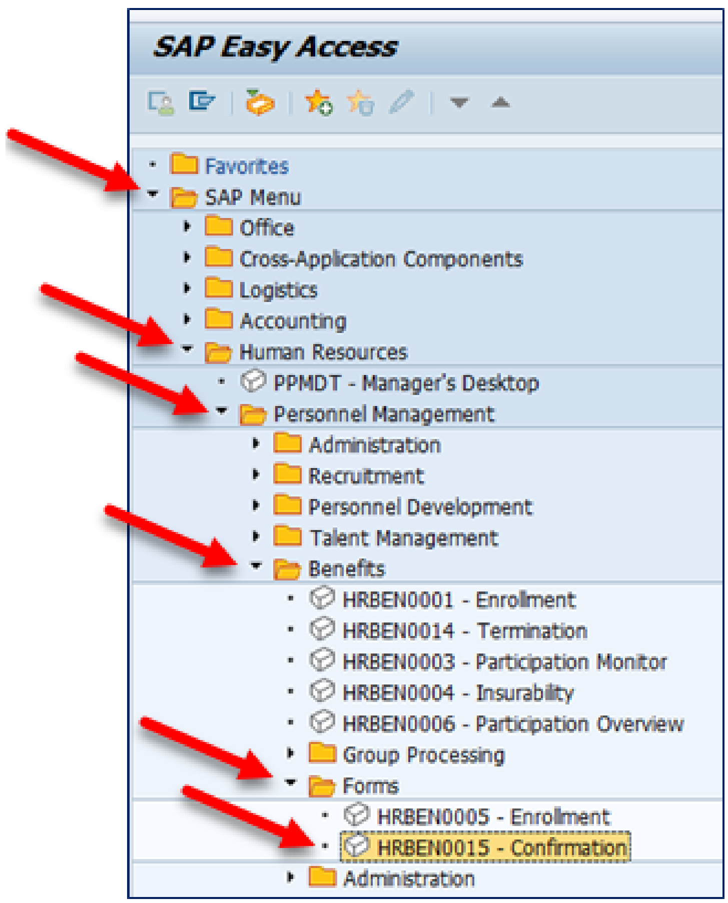
Lesson 3: Benefits Letters and Reporting

Lesson Overview

Upon completion of this lesson, you should be able to:

- Print benefits confirmation forms
- Print benefits letters

Benefits Menu and HR



Benefits is a component of Personnel Management and is found below Personnel Management in the SAP standard menu. In this lesson, you are going to learn how to use the Print Confirmation to print a confirmation form as needed.

To access the Print Confirmation transaction from the SAP Easy Access menu, choose *Human Resources > Personnel Management > Benefits > Forms* or type **HRBEN0015** in the Command field and then click the **Enter** button.

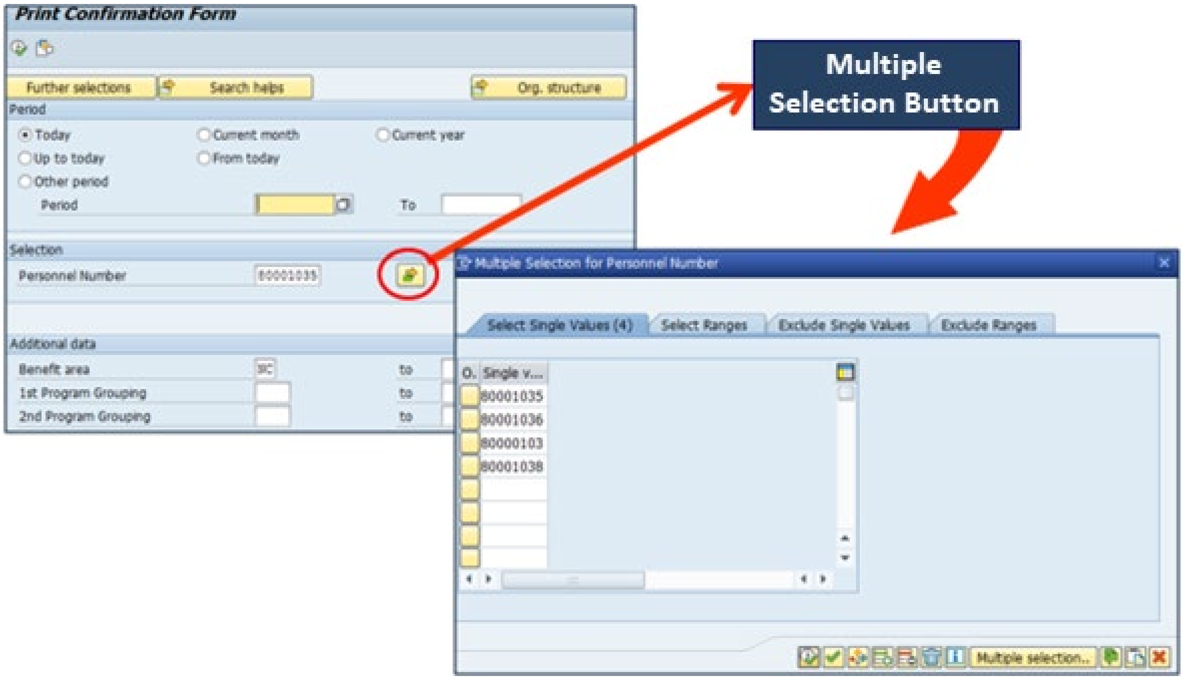
Print Confirmation Form (HRBEN0015)

- Transaction Overview
- Purpose - Use this transaction to print a confirmation form at any time.
- Features
  - You can select multiple employees by using the Multiple Selection button for Personnel Number dialog box.
  - You can preview or display the form.
  - You can specify a date range.

Date Range Selection Options

If you want to…	Then…
Print or display confirmations for current date,	Select the *Today* radio button.
Print or display confirmations from the beginning date to the end date of the current month,	Select the *Current Month* radio button.
Print or display confirmations from 01/01 to 12/31 of the current year,	Select the *Current year* radio button.
Print or display confirmations up to today,	Select the *Up to today* radio button.
Print or display confirmations from today through 12/31/9999.	Select the *From today* radio button.
Enter a date range to print or display confirmations,	Select the *Other period* radio button and enter the Begin date in the period field and the End date in the *To* field.

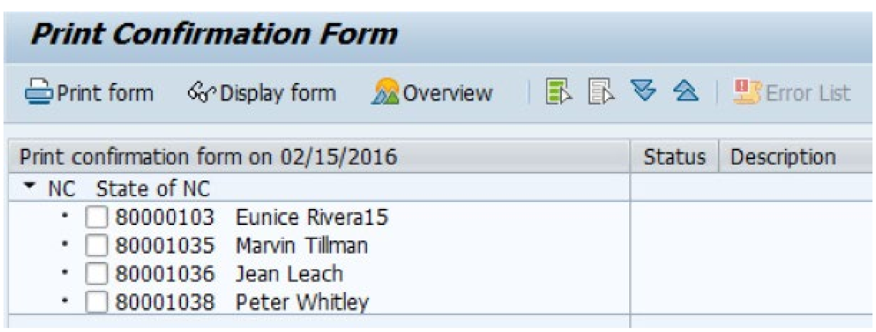
Initial Screen



You can type or search for personnel numbers in the Single Values column. Click the Copy button to transfer your selections to the initial screen.

NOTE: Only the first personnel number will be displayed on the screen.

Once you click the Execute button, the Print Confirmation Form screen displays listing the selected employees as shown in the following screen image:



The plans in which an employee is participating on the selection date are listed in the form. (See the following example.)

STATE OF NORTH CAROLINA
1425 MAIL SERVICE CENTER
RALEIGH, NC 27699-1425

PRINT DATE
11/07/2019

Benefits Confirmation Statement

Jean Leach	**Personnel No.** 80001036	**AS OF DATE:** 11/07/2019
1243 Seth Street	**Personnel Area** Natural and Cultural Resources	
Rowena, NC, 27609	**Payroll Area** NC Monthly	

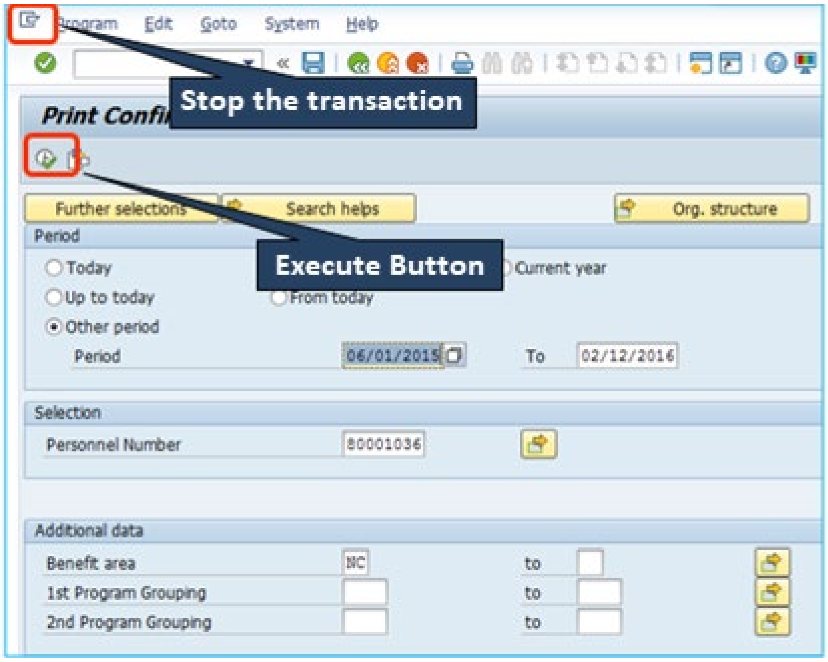
Listed below are your most recent elections and costs. Please review the information carefully to confirm your enrollment in these benefit plans. Changes to your plans can only be made if your eligibility changes due to a qualifying event or you make changes during open enrollment. If you have any questions about the information you see below, please contact the Benefits Support Center at 1-866-NCBEST-4U.

HEALTH PLANS

NC Flex Accident Plan	01/01/2019 - 12/31/9999		
Option	NC Flex Accident Plan		
EE Pre-tax	6.94 USD Monthly		
NC Flex Cancer Insurance	01/01/2019 - 12/31/9999		
Option	Cancer High Option		
EE Pre-tax	25.16 USD Monthly		
Dependents in period 01/01/2019 - 12/31/9999			
Mary Leach	Child	Date of Birth	08/06/2001
NC Flex Critical Illness Plan	01/01/2019 - 12/31/9999		
Option	Critical Illness $15k Coverage		
EE Pre-tax	16.50 USD Monthly		
NC Flex Dental Plan	01/01/2019 - 12/31/9999		
Option	Dental High Option		
EE Pre-tax	78.00 USD Monthly		
Dependents in period 01/01/2019 - 12/31/9999			
Mary Leach	Child	Date of Birth	08/06/2001
Enhanced 80/20 Plan	01/01/2019 - 12/31/9999		
Option	Enhanced 80/20 Non Smoker		
Employer Cost	518.64 USD Monthly		
EE Pre-tax	305.00 USD Monthly		
EE COST AFTER CREDITS	305.00 USD Monthly		
Dependents in period 01/01/2019 - 12/31/9999			
Mary Leach	Child	Date of Birth	08/06/2001
NC Flex Vision Plan	01/01/2019 - 12/31/9999		

Disclaimer: While every attempt has been made to ensure the accuracy of this Benefits Confirmation Statement, the legal documents, policies, certificates pertaining to the various benefits prevail in the event of any discrepancy. This Benefits Confirmation Statement does not constitute a legal document. Policies summarized here are not conditions of employment and are subject to change.

Executing a Report



When you have entered all the selection criteria, click the Execute button to generate the report.

Sometimes when you are running a report, or performing other transactions, the system may seem to be taking an extended length of time. You can stop the transaction by clicking the icon at the top left of the screen and selecting Stop Transaction from the menu.

* *

EXERCISE 3.1: Print Confirmation Form

SCENARIO

In this exercise, Jean Leach needs a printed confirmation form detailing her benefit selections for her financial planner. She does not have access to ESS, so she needs you to print the benefits overview for her.

Information

Transaction:	HRBEN0015
Employee:	Jean Leach
PERNR	80001036

Instructions

Use the HRBEN0015 (*Print Confirmation Form*) transaction to display a copy of her plan.

After you have "printed" Jean's confirmation form, return to the *Print Confirmation Form* screen then click the Overview button.

Questions / Results

1. What screen is now displayed?

2. Which of the previous Integrated HR-Payroll System transactions that we have covered also allows you to print a confirmation form?

* *

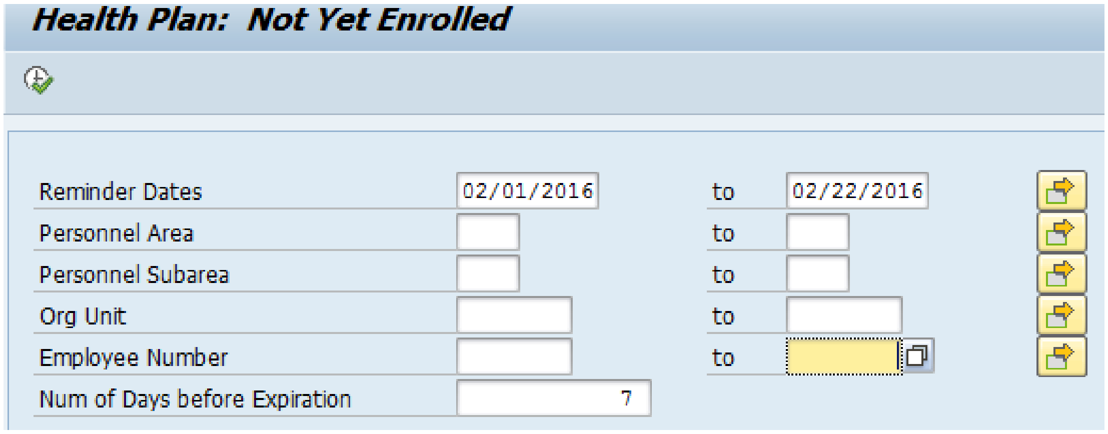
Org Structure Feature

Also, you can mass print forms for an entire org unit by choosing the Org Structure button on the upper right side of the form selection area.

- Click on the Org Structure button. The Choose Organizational Unit pop-up box is displayed.
- Open the tree down to the level you need to print.
- Click the check box in front of the org unit.
- Click the green check mark to “load” the data to print.
- Continue entering the necessary data on the HRBEN0015 screen.
- Click on the Execute icon. The list of persons from the org unit is displayed.
- Select all that need printed forms.

Remember, you can print forms only for those persons for whom you are authorized to view.

Print a Health Plan: Not Yet Enrolled Letter (ZBNS012)



The Health Plan: Not Yet Enrolled Letter can be used to identify employees who have not selected a health plan during the new hire event. The letter is also used to communicate to the employee that they have not selected a health plan during a new hire event. The transaction should be run weekly by Health Benefits Representatives.

Use transaction code **ZBNS012** to print a Health Plan: Not Yet Enrolled Letter.

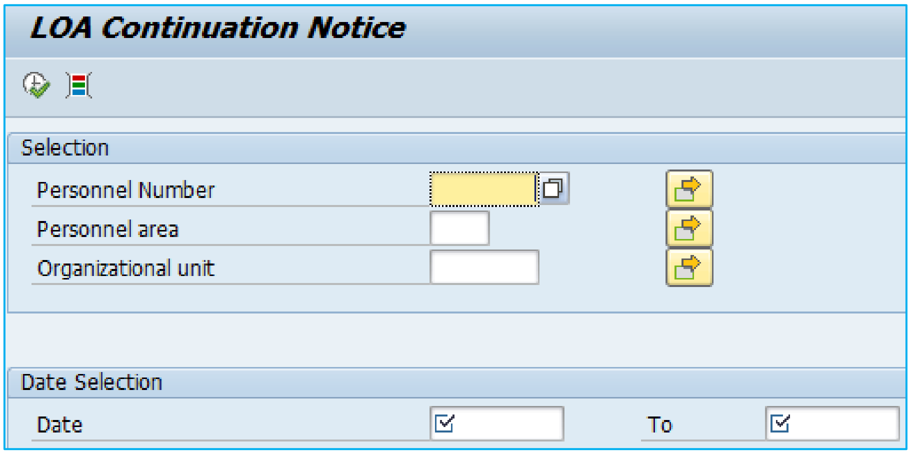
Displayed above is an example of the initial screen utilized before printing a Health Plan: Not Yet Enrolled Letter.

Many variables are available when generating a Health Plan: Not Yet Enrolled Letter:

- Reminder Dates
- Personnel Area
- Personnel Subarea
- Org unit (Organizational unit)
- Employee Number (Personnel Number)
- Number of days before Expiration

It is possible to populate all the above fields with a list or range of numbers, but it is preferable to use the defaulted Reminder Dates and the defaulted Number of Days before Expiration fields.

Print a Leave of Absence (LOA) Notice Letter (ZBNS008)



This transaction is used to provide the LOA letter for all employees on a LOA for the selected period. The transaction should be run weekly by Health Benefits Representatives.

Use transaction code **ZBNS008** to print a Leave of Absence (LOA) notice letter.

Displayed above is an example of the initial screen utilized before printing a Leave of Absence (LOA) notice letter.

It is a simple report screen requiring the input of:

- A Personnel number, a list of Personnel numbers, or a range of Personnel numbers.
- A Start Date and an End Date.
- The dates used in the Date Selection area will identify employees whose LOA Start Date are in the range entered.

Once the transaction is executed, the letter can be displayed and printed. Pictured below is an example of the LOA letter generated.

INFORMATION	*A PDF file of this letter is available at https://www.osc.nc.gov/documents/employee-benefits-leave-absence-letter*

Continuation of Benefits during Leave of Absence Notice

This notice has been sent to you by your Agency.
Please contact your Agency Health Benefits Representative (HBR) with any questions.

Name:	**Personnel No:**	**Date:**
Address:	**Personnel Area:**	
	Payroll Area:	

You have the option to continue your State Health Plan and your NCFlex Insurance Plans during your Leave of Absence (LOA). This notice provides continuation instructions.

If, during your LOA, you are **using approved/accrued leave and your pay continues in full**, your benefits will continue without interruption and you do not need to do anything.

If, during your LOA, you are **not using approved/accrued leave and are without pay (LOA/LWOP),** see *below*. This includes, but is not limited to, LOAs for **Family Medical Leave (FMLA), Family Illness Leave, Extended Illness, and Military**.

IMPORTANT: Employees on LOA receivin**g Short Term Disability** benefits or **Workers' Compensation** benefits are considered to be on LOA without pay (LOA/LWOP) for benefits continuation. This includes LOA-Workers' Compensation with supplement.

CONTINUATION OF BENEFITS FOR EMPLOYEES ON LOA WITHOUT PAY (LOA/LWOP)

1. AGENCY AFTER-TAX SPECIFIC BENEFITS - These insurance plans are contracted through the Agency Insurance Committee and are administered by private insurance agencies/brokers, and are not part of NC State Government benefits (State Health Plan and NCFlex plans). You must contact your local agency benefits or payroll representative to receive information on maintaining or cancelling these benefit plans while on LOA without pay.

2. RETIREMENT PLANS - 401K, 457/Deferred Comp, State Retirement System (TSERS, LEORS, CJRS)
Your contributions to the supplemental retirement savings plans (401k and 457/Deferred Comp) and to the State Retirement System will cease during your unpaid leave. Contributions to your supplemental retirement savings plans will resume upon your return, unless you contact the vendor to stop participation. If you contribute to the State Retirement System, contributions will resume automatically upon your return to work in an applicable position.

3. NCFLEX PLANS
While on LOA without pay, **your NCFlex benefit plans will terminate**. You may continue your NCFlex plans by sending your premium payments directly to the vendors. NCFlex vendors must receive your payments no later than the 10th of each month or your coverage will end. Vendor contact information can be found at the end of this notice.

4. STATE HEALTH PLAN (SHP) – Administered by BCBS
While on LOA without pay, you can choose to continue or discontinue your State Health Plan or drop dependents from the plan and remain on employee only coverage.

Discontinuation of Coverage:
To discontinue your State Health Plan, you will need to submit a ticket to BEST Shared Services (email: best@osc.nc.gov or call: phone # 1-866-622-3784) to request a cancellation of the plan due to LOA without pay status. This must be done within 30 days of reaching LOA without pay status; otherwise you will be billed by iTEDIUM, the Plan's direct billing administrator, for continued coverage and an exception request may be required to retroactively cancel coverage. Your Agency HBR would be required to submit the exception request. However, please understand,

* *

EXERCISE 3.2: Print a Leave of Absence (LOA) Notice Letter

SCENARIO

One of your employees, Lynette Rosamond, is going on Leave of Absence (LOA) and needs the LOA Notice Letter printed so she understands the status of her benefits while on leave and her responsibilities to continue premiums if she so desires.

Information

Transaction:	ZBNS008
Employee:	Lynette Rosamond
PERNR	80000122

Instructions

Follow along with your Instructor as he/she demonstrates how to access the Print a Leave of Absence Letter using the ZBNS008 transaction. The ZBNS008 transaction allows you to preview the letter online or print it locally.

Instructor note: Current LOA action date range can be obtained through *PA20 > IT0000*.

1. Enter **ZBNS008** in the Command field and click Enter.
2. Enter **80000122** in the Personnel number field.
3. Enter the **date range** given by your instructor.
4. Click the **Execute** button.
5. Click the **checkbox** in front of the Employee’s personnel number.
6. Click the **Print** button.
7. Click **Print Preview**. The LOA notice letter is displayed.

* *

Print a Benefits Termination Letter (ZBNS013)

Purpose of Printing a Benefits Termination Letter

This transaction generates a letter that can be provided to terminated employees outlining their continued options for benefits after employment ends. The transaction should be run weekly by the Health Benefits Representatives.

Use transaction code **ZBNS013** to print a Benefits Termination letter.

Many variables are available when generating Benefits Termination letters including:

- Personnel Number
- Employment status
- Personnel area
- Personnel subarea
- Employee group
- Employee subgroup
- Organizational unit
- Start Date and End Date
    - The dates used in the Date Selection area will identify employees whose Benefits Termination date are in the range entered.

Once the report is executed, the letter can be displayed and printed.

RIF Employees: The termination letter for RIF employees will include additional information regarding the options to continue their health insurance.

INFORMATION

A PDF file of this letter is available at https://files.nc.gov/ncosc/documents/BEST/Forms/Employee_Benefits_Term_Letter-final.pdf

See the example below of a letter informing employees that their benefit participation in an enrollment program has been terminated.

Page **1** of **4**

Benefits Termination Notice

This letter has been sent to you by your Agency.

Please contact your Health Benefits Representative (HBR) with any questions.

Name:	**Personnel No:**	**Date:**
Address:	**Personnel Area:**	
	Payroll Area:	

This letter is to notify you that your state-sponsored benefit plans have ended due to Separation of employment. It is for informational purposes only. Continuation of coverage, conversion or portability options may be available based on each plan's specifications. You will need to make satisfactory payment arrangements and complete any necessary forms based on each plan's requirements and deadlines. The eEnroll enrollment system vendor will notify each insurance plan vendor of the date your plan(s) will end. It is not the intent of this letter to replace or supersede any documents you receive from each plan directly. If you have any questions about the information you see below, please contact the Benefits Eligibility and Enrollment Support Center at 1-855-859-0966 or BEST Shared Services at 1-866-NCBEST-4U.

AGENCY AFTER-TAX SPECIFIC BENEFITS

If you are enrolled in any group life, accident, disability, dental or cancer plans offered through your agency, please contact the applicable vendor or your Agency Human Resources or Payroll Representative directly to discuss your continuation options.

STATE HEALTH PLAN

The State Health Plan will send you information outlining your continuation options, mailed to your last known address. You may continue coverage by paying the full cost (both the employer and employee costs) plus a 2% administrative fee by the dates the vendor indicates. You can also contact the State Health Plan with questions at 1-888-234-2416. If your coverage ended due to retirement, you may be eligible to continue your health insurance through the Retirement System. Please contact your agency representative to see if you qualify and to inquire about enrollment instructions.

> Note to RIF employees only: If you are separating from NC State Government employment due to Reduction-In-Force (RIF), your current group health coverage will continue until the end of the month in which the reduction in force occurs (last day in active employment status). However, if you were enrolled in the plan and had 12 months of service at the time of RIF, you will be eligible for RIF coverage paid by your employer for 12 months thereafter or until you obtain other health coverage through another employer, whichever comes first. Once the health plan vendor is notified of your reduction in force, they will send you a benefit packet in the mail regarding your RIF health plan options. At this time, it is important that you make an election or your coverage will not continue. Payments for RIF health coverage are not sent to BEST Shared Services or deducted from your paycheck. RIF health plan payments will need to be sent directly to the vendor or coverage will be canceled or reduced to a non-contributory "Employee Only" plan if applicable. If your dependent(s) are canceled from your health plan, the dependent will not be eligible for COBRA (continuation coverage under federal guidelines).
>
> After completion of the 12 month RIF coverage period, you can continue your health coverage by paying the full premium cost to the vendor. The health plan vendor will notify you regarding payment information to continue your coverage thereafter. If you decide to retire, your retiree health benefits will begin the first of the month following the date of retirement. Premiums to cover dependent(s) if applicable will be deducted from your retiree benefit payments at that time.

Medicare Eligibility (age 65 and older)

Upon separation from employment, Medicare will be considered the primary payor, and the State Health Plan will become secondary for employees who are Medicare eligible and choose to continue coverage under COBRA, Reduction in Force (RIF) or under the State Retirement System as a retiree. Therefore, you may want to consider enrolling in Medicare Part B, if not already enrolled. (For retirees, it is required to have Part B in place for the last month of active coverage if enrolling in a Medicare Advantage Plan.) Members can contact the Social Security Administration at 1-800-772-1213 or 1-800-325-0778 (TTY) for specific information regarding Medicare. The Seniors' Health Insurance Information Program (SHIIP) under the NC Department of Insurance is also an available resource at 1-855-408-1212.

Disclaimer: While every attempt has been made to ensure the accuracy of this notice, the legal documents, polices, certificates pertaining to the various benefits prevail in the event of any discrepancy. This is not a legal document, and does not guarantee coverage. Policies summarized here are subject to change. Rev. 8/15/19

* *

EXERCISE 3.3: Print a Benefits Termination Letter

SCENARIO

Christa Fernandez is leaving your agency and State Government. You need to print the Benefits Termination letter for her, so she knows the status of her various benefits, especially coverage termination dates.

Information

Transaction:	ZBNS013
Employee:	Christa Fernandez
PERNR	80000048

Instructions

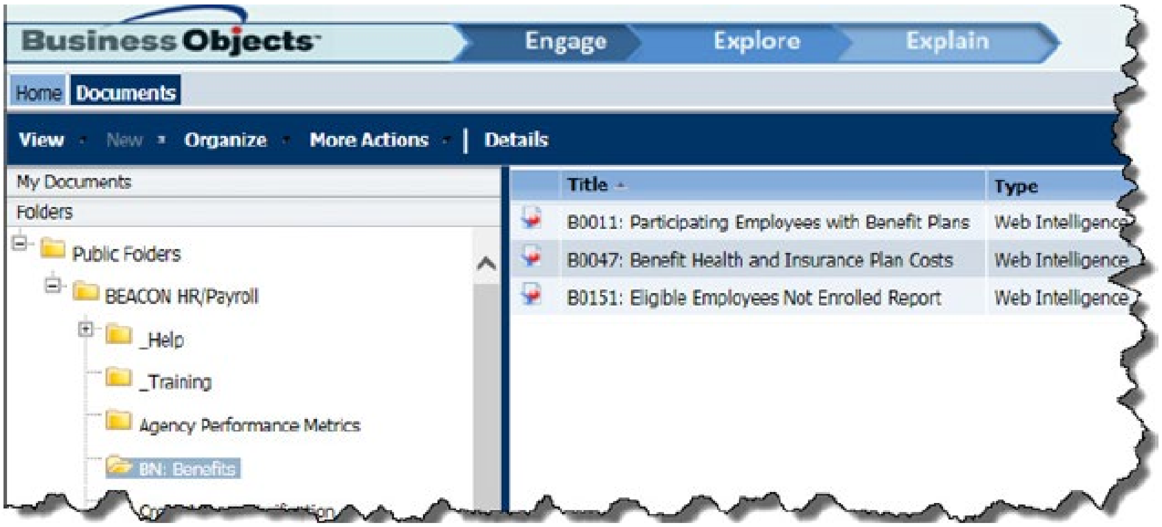
Follow along with the Instructor who will lead you in printing a Benefits Termination letter using the ZBNS013 transaction. The ZBNS013 transaction allows you to preview the letter online or print it locally.

Additional Resources
Refer to the OSC Training website in HELP documents for the current Benefits Termination Letter. Search for the following Job Aid: • *Benefits Termination Letters*

* *

Additional Reporting

Business Objects (BOBJ) Reports



Additional Resources
Refer to the OSC Training website in HELP documents for a complete list of Business Objects (BOBJ) reports available and their description. • Search for one or two words in the report title to see a list of reports dealing with your inquiry.

SUMMARY

In this lesson, you learned to:

- Print Benefits Confirmation Forms
- Print Benefits Letters

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LESSON 4: COURSE REVIEW

Course Overview

Upon completion of this course, you should now be able to:

- Describe the benefits enrollment and plan administration processes.
- List the tasks performed by Agency HBR, BEST Shared Services, and eBenefits for benefits administration.
- Search for an employee and view available benefit infotypes on the employee's record using transaction code PA20.
- Display benefits confirmation forms and letters.

Next Steps

- Monitor the Integrated HR-Payroll System communication
    - BEST Shared Services web site (especially the Updates tab)

      URL: https://www.osc.nc.gov/state-employees/BEST
    - Review conceptual materials
    - Access the Training HELP site

      URL: https://www.osc.nc.gov/state-agency-resources/training
    - Practice what you've learned

      URL: http://mybeacon.nc.gov
    - Client 899
    - Use your current NCID user name and password

Keep your training materials close by as a ready reference.

Want to practice what you have learned from your desk?

Follow the link provided above to access the training client. The training client is number 899. Your current NCID user name and password are used to access the practice environment.

Need transactional assistance?

Remember to access the Training HELP website when you need assistance in completing transactions. As stated above, the work instructions can be accessed on line through the web link in the steps above.

Course Assessment/Evaluation

Follow the instructions given by your instructor to complete your competency assessment and your evaluation of today's class in the Learning Management System (LMS).

CONGRATULATIONS!

You've completed the course!