



Unicorn HRO

Benefit Set-Up

This document explains how to set up benefit plans.

Prerequisites:

- Common Objects:
 - Benefit Cost Methods
 - Benefit Group (enter Chart of Account ID code if G/L account numbers will be entered per plan)
 - Benefit Plan
 - Benefit Option
 - Benefit Category
 - Benefit Carrier
 - Core Benefit Class (optional)
 - Date Option (optional – if used, entries must be made in Date Rounding Formula function)
 - Payroll Deduction (optional)
 - Relationship Type
 - Rounding Option (optional)
 - Payment Option (optional for Administrative Costs)
 - Unit of Time Codes (mandatory for Costing only)
 - User Benefit Coverage Methods (optional)
- Date Rounding Formula (optional)
- Chart of Accounts Definition (mandatory only if using General Ledger accounts)
- Carrier Addresses (optional)
- Coverage List
- Dependent List

The Benefits module consists of several areas: benefits, flexible spending accounts, health savings accounts, paid time off plans and defined contributions. You may use one or more of these areas; any combination of these options is possible. This document will explain the workings of the benefits area.

Enter information in the areas shown above. Benefit groups are used to differentiate between plans offered to various segments of your population. For example, if your full-time employees are eligible for different benefits than your part-time employees, set up groups for both full-time and part-time employees. You may also need to set up benefit groups based on regional benefit differences. Employees may be enrolled in different groups at the same time, say, if a transfer is taking place. The employee's Primary Benefit Group is stored in Employee Direct. Benefit reports only include enrollments in the employee's primary benefit group.

After the above tables have been set up, access the Benefit Plans option. Select the Benefit Group that you will be working with, and then enter individual benefit plans. The following table describes the data elements associated with a benefit plan. There is a column that explains any differences between iCON TOOLS and Open Enrollment (OE), First Time Enrollment (FTE) and Life Events (LE). The last column describes whether or not the data is used in Benefit Enrollment in iCON TOOLS and Manager Services.

Field	OE/FTE/LE	iCON TOOLS/ MS Enrollment
The Benefit Plan usually defines the main type of benefit, say, Medical or Group Term Life Insurance. The Benefit Option further defines the Plan, for example, Single or Family option for a medical plan. This is how most companies use these two fields; however, they are provided for your definition of the benefit and can be used in any manner.		
The Benefit Category is used to prevent an employee from enrolling in more than one benefit of the same type, or category. For example, if your policy would not allow any employee to be enrolled in both a family medical plan and a single medical plan at the same time, you would assign the same Category to both of these plans (i.e., Medical category). If the employee was already enrolled in a Single plan option and tried to also enroll in a Family plan option, the system would give a message and not allow it. If you do not wish this to happen, you would assign a unique Category to each benefit plan; thereby, no duplications would be recognized.		
Benefit Carrier is also mandatory. This stores the name of the benefit provider. This field is linked to the Carriers table. If you wish to enter additional information about the carrier, access Carrier Addresses. There you may enter as many addresses as necessary for this provider, for instance headquarters address, claims processing address, etc. Contact names and phone numbers can be added, as well as fax numbers, employee voice response numbers, e-mail addresses, etc.		
Policy ID is optional. It stores the benefit provider's insurance policy number.		
The Active checkbox defaults to "Yes" when adding a benefit. If you have a benefit plan that is no longer offered, change this field to "No". It will then not appear as an available benefit when an employee is enrolling in benefits. If any employees are currently enrolled in this benefit, they will still appear when working with the employee's data, and can be changed or deleted.	If "off", will not be available for enrollment	same
Def. Contribution: Click on this box to indicate that this benefit is a Defined Contribution plan. By doing so, it will appear when setting up or enrolling in Defined Contribution plans, using the Defined Contribution Enrollment or Defined Contribution Worksheet. Benefits defined as Defined Contribution plans also will not appear on the Benefit Enrollment and Flex Benefit Enrollment screens.	If "on", will not appear	same
Taxable Life Ins.: Click on this box if the plan represents a group-term life insurance plan that is taxable according to IRS regulations. When this checkbox is on and the Taxable Life Process is run, all of the employee's taxable life insurance coverage amounts will be		

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<p>totalled. If the total is, and if greater than \$50,000, a lump sum will be created based on the amounts in the Taxable Life Rates. If dependents have coverage over \$2,000, the entire amount of coverage will be costed and included in the lump sum. If the employee pays any post-tax deductions toward the coverage, it will be subtracted from the lump sum earning.</p>		
<p>Click on Cost By Age if the benefit has separate costs by age. If this checkbox is set to “Yes”, the cost screens will have fields for the age ranges. When the benefit costs are calculated, the system will check the employee’s or dependent’s date of birth to determine their ages and use the appropriate costing data.</p>		
<p>Click on Validate Child Eligibility to check children’s ages during the on-line enrollment processes. If this checkbox is selected and the child’s age is equal to or greater than the higher of the Maximum Child Age or Maximum Student Age, the child’s information will be displayed in red when the employee enrolls. The check whether a dependent is a Child or a Spouse, the system looks at the “Child” and “Spouse” fields in the Relationship Type common object.</p>	As described	Not used
<p>Dependents: to allow dependent enrollment, click on the Dependents checkbox. If this is not “on”, dependents will not be allowed to enroll.</p>	If “on”, dependent button appears and at least one dependent must be enrolled	If “on”, dependent button is active but dependents are not required
<p>Limit enrollment to one dependent: select this checkbox if the system should require that only one dependent be enrolled, such as for Employee + One plans.</p>		
<p>More than one dependent enrollment required: select this checkbox if the system should require that two or more dependents be enrolled, such as for Employee + Family plans.</p>		
<p>Spouse Only Plan: select this checkbox if only the spouse can be enrolled in this plan. This will cause a plan to be shown as unavailable if the employee does not have a spouse in the Dependents function.</p>		
<p>Child(ren) Only Plan: select this checkbox if only children can be enrolled in this plan. This will cause a plan to be shown as unavailable if the employee does not have at least one child in the Dependents function.</p>		
<p>Both Spouse and Child(ren) Enrollment Required: select this checkbox if the plan requires that both the spouse and at least one</p>		

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child must be enrolled, as in the case of a Family plan. This will cause a plan to be shown as unavailable if the employee does not have a spouse and at least one child in the Dependents function.		
Medical Coverage: if this benefit represents medical coverage, click on this checkbox. Certain states want to know whether each employee has medical coverage available to him/her. If the employee is in a benefit group that contains at least one benefit marked Medical Coverage, this is indicated in the State New Hires Report. The employee does not have to be enrolled in the benefit, but the coverage must be available.		
Maximum HSA Contribution Allowed: if this benefit represents a high deductible health plan (HDHP), enter the amount that is in effect for the current year. By doing so, the system will make sure the employee is enrolled in an HDHP before allowing enrollment in a Health Savings Account (HSA).		
Display plan on Benefit Statement: this field will default to “on” so that employees may view this plan in their Benefit Statement in Employee Self Service. If you do not want employees to view this plan, unselect the checkbox. Note that this checkbox only affects the Benefit Statement, and not the on-line benefit functions.		
Beneficiaries: to allow beneficiaries to be specified, click on the Beneficiaries checkbox.	If “on” beneficiaries button appears and primary beneficiaries must equal 100%	If “on”, beneficiaries button is active but beneficiaries are not required
If costs for this benefit are different for tobacco users and non-tobacco users, click on the Tobacco User Rates Apply checkbox. If this field is set to “Yes”, there will be separate cost records for tobacco users and non-tobacco users. When calculating the benefit costs for employer and employee, the system will check the employee’s Personal Data file or the Dependent file to see if he/she is a tobacco user or not. The proper rates will then be applied.		
Select Report cost on W-2 if the total cost of this benefit must be reported in Box 12 of the employee’s W-2s as code DD. This is effective for tax years 2012 and forward. If this checkbox is selected, a button called Health Costs will appear on the main page next to this benefit. Click on this button to enter the costs that are to be reported on W-2 forms and files. Health Costs will only be used for W-2 reporting; they will not be used for costs stored in Benefit History, nor will they affect benefit-related Deductions or Employer Deductions.		

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<p>Select the Allow Deselection checkbox if employees can deselect, or unenroll from, the benefit in FTE, OE or LE. If your company provides a core plan and you do not want the employee to deselect it, clear this checkbox. If the checkbox is cleared, this can be the only benefit in the coverage category. During on-line enrollment, the system will display a message that the benefit cannot be deselected. It will enroll the employee in the plan if he or she has not already selected it.</p>	As described	Not used
<p>Cost Method: To enter a total cost for the employee, and have the system calculate the employee and employer costs based on percentages, select the Percentage Based option. To use percentages in combination with annual salary ranges, select the Salary/Percentage Based method. For all other methods, select the Amount method or leave this field blank.</p>		
<p>Core Benefit Class: If you want certain benefits to automatically be assigned to an employee when he/she is hired, select one of the core benefit classes. If you select All, this benefit will be assigned to all new employees when they are added through the Personal Data screen. If you select Single, this benefit will be assigned to new Single employees, as defined in the Marital Status field of the Personal Data file. If you select Married, all employees who are not Single will automatically be assigned this benefit when they are added to the system. If you do not wish this benefit to be automatically assigned, leave this field blank.</p>		
<p>If a benefit has costs to be paid by the employee, enter a Payroll Deduction value in the Employee Deduction field. When the employee is enrolled in this benefit, his/her cost will be calculated based on current costs, and a deduction record will be created in Employee Deduction Formulas.</p>		
<p>If you want to have the system automatically create Employer Deduction Formulas that contain the company-paid cost for this benefit, enter a Payroll Deduction value in the Employer Deduction field.</p>		
<p>The Date Option field is used to calculate the employee's Eligibility Date. It can be used alone, or in conjunction with the Days Required for Eligibility field. The Date Option has entries such as Next First of Month, Last 15th of Month, etc. These values are user defined and stored in the Date Option table. You specify the number of days from the employee's hire date to determine when he/she will be eligible to participate in this benefit. If the Days Required for Eligibility field is blank, the eligibility date will be calculated from the hire date. If the Days Required for Eligibility field is entered, the system will add this number of days to the employee's Benefit</p>	In FTE, displays eligibility date as Effective Date	

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<p>Start Date, and then apply the Date Option rounding criteria, if any. For example, if the employee had to wait 90 days, and the Date Option was Next 1st of Month, and was hired on January 17 which was also the Benefit Start Date, the Eligibility Date would be calculated as May 1st. If the Date Option and Days Required for Eligibility were both blank, the eligibility date would become the employee's Benefit Start Date. The Eligibility Date can be accessed from the employee screen, and can be overridden if necessary.</p>		
<p>Minimum MM Enrolled: Certain plans may require that an employee be enrolled in the plan a certain number of months before discontinuing plan coverage. If this field is filled in, and the employee attempts to discontinue coverage before the number of months from the enrollment date has passed, the system will give a message and will not allow the employee to opt out of the plan at that time. You will only be able to delete the employee's plan after the required number of months has passed.</p>		
<p>Coverage Calculation Method section: There are several ways to define how the system will calculate an employee's benefit coverage. This section can be left blank, say, for medical coverage: either you have it or you don't, and there are no coverage amounts associated with it. If you have a benefit that is defined as a multiple of the employee's salary, for instance life insurance, you would enter a Salary Multiplier. When calculating coverage for the employee, the system will annualize the salary found in the Employee Compensation record and multiply it by the Salary Multiplier. If there is a flat, or fixed amount for everyone, enter the amount in the Fixed Amount field. If the employee has the option of purchasing coverage as a multiple of a certain amount, you would choose the Increments option and enter the amount. For example, if the employee can purchase supplemental life insurance in multiples of \$10,000, choose the Increments option and select a Rounding Option of \$10,000.</p>		
<p>The Salary Multiplier and Increments options can also have a Minimum and Maximum coverage amount specified. If the Salary Multiplier option is used, and the employee's salary times the multiplier is less than the minimum amount, the minimum amount of coverage will be assigned to that employee. If the salary times the multiplier is greater than the maximum amount, the maximum amount will be assigned. If the benefit is defined as Increments and the employee attempts to purchase either less than the minimum or more than the maximum, the appropriate limits will be enforced.</p>		
<p>The Custom field in the Coverage Calculation Method section allows for the entry of a user exit. If the other calculation methods</p>		

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do not apply, a separate program can be written for the calculation of benefit coverage. The program name would be entered in the common object value that is selected here. Software Plus has programmed one alternate coverage calculation called BCVGGTLI. If this value is used, the system will get the employee's YTD FICA Tax Base from the previous year in place of the annualized compensation.		
For plans such as life insurance or AD&D, select the Apply Age Reduction Schedule checkbox if the employee's coverage amount will be reduced when he or she reaches a certain age. If this checkbox is selected, click on the Age Reduction button to enter the age ranges and the corresponding reduction percentage or fixed amount.		
The Coverage Rounding Option can be used with the Salary Multiplier or Increments. It can be used with or without minimum and maximum values. The table is user-defined with dollar values and the direction (up or down) of the coverage rounding.		
The Salary Rounding Option can be used if the employee's salary must be rounded before applying the salary multiplier. When both a Salary Rounding Option and Coverage Rounding Option are specified, the employee's salary will be rounded first, the salary multiplier will applied, and then the coverage rounding will take place.		
A Minimum Coverage amount can be specified. This option is used with the Salary Multiplier and Purchased in Increments options. If the plan is by Increments, a coverage amount less than the minimum amount cannot be entered. If the Salary Multiplier is used and an employee's salary times the multiplier is less than the minimum amount, the minimum amount will be assigned. If a Coverage List is used for the employee, the minimum must be blank.		
A Maximum Coverage amount can be specified. This option is used with the Salary Multiplier and Purchased in Increments options. If the plan is by Increments, a coverage amount more than the maximum amount cannot be entered. If the Salary Multiplier is used and an employee's salary times the multiplier is more than the maximum amount, the maximum amount will be assigned. If a Coverage List is used for the employee, the maximum must be blank.		
Limit Increase of Increments: Click on this option if you wish to limit the number of additional increments an employee can select. You must define a Coverage List for Employee if you select this checkbox. You must also enter the Maximum Increase in		

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<p>Increments Allowed. For example, if the plan has a Coverage List with increments of \$10,000, and employees are limited to 5 additional increments, and the employee currently has \$40,000 coverage, he would be limited to \$90,000 (\$40,000 + \$10,000 x 5) when selecting a new coverage amount. In on-line enrollment, only amounts up to \$90,000 would appear in the drop-down list in this example.</p>		
<p>Maximum Increase in Increments Allowed: If you select the Limit Increase of Increments checkbox, enter the maximum number of increments by which an employee can increase his or her coverage. This number does not apply if the employee is decreasing the coverage amount.</p>		
<p>Limit Maximum Coverage by Salary Multiple: Click on this option if you wish to limit the amount of coverage an employee selects to a multiplier of his or her annual salary. You must define a Coverage List for Employee if you select this checkbox. You must also enter the Maximum Multiples of Salary Allowed if you select this checkbox. For example, if the employee's annual salary is \$22,000, and the maximum multiples are 2, and the Coverage List contains increments of \$10,000, the employee would be able to select an amount up to \$44,000. This is the allowable coverage amount that does not exceed 2 times the annual salary (\$44,000).</p>		
<p>Maximum Multiples of Salary Allowed: If you select the Limit Maximum Coverage by Salary Multiple checkbox, enter the maximum number of annual salary multiples that will be available to employees.</p>		
<p>Apply Guaranteed Issue Amount: Click on this option if you wish to provide employees with a guaranteed issue amount when they first select this benefit until they provide Evidence of Insurability (EOI). When the employee selects the benefit, the Guaranteed Issue Amount will be written to the Override Coverage Amount field, and the amount the employee selected will be written to the Calculated Coverage Amount field. When EOI is received, remove the Override Coverage Amount (guaranteed issue). You must also enter a Guaranteed Issue Amount if you select this checkbox.</p>		
<p>Guaranteed Issue Amount: If you select the Apply Guaranteed Issue Amount checkbox, enter the Guaranteed Issue Amount in this field.</p>		
<p>The Maximum Percentage of Employee Coverage Allowed for Dependent may be used if you want to restrict a spouse's coverage amount to a particular percentage of the employee's coverage amount. This feature must be used in conjunction with Coverage Lists for the employee and dependent. You can restrict the dependent's coverage when he or she is enrolled in the same plan as</p>	As described	Not used

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the employee, or when the dependent is enrolled in a “linked” plan (via the “Required employee enrollment in Benefit Plan” field).		
Required employee enrollment in Benefit Plan: If the employee must first be enrolled in a specific benefit plan before selecting this one, select the required benefit plan in this field. If the employee must first be enrolled in any plan option for a particular benefit plan, select the benefit plan with "Any Plan Option".		
Use Payroll Frequency: Leave this field blank or select "Yes" to have any new deduction use the same Frequency as an existing deduction when enrolling through FTE, OE or LE. If no deduction exists for this plan, the new deduction will use the Frequency from the Employee Payroll record. If you are using the iCON TOOLS payroll system, it is recommended that you leave this field blank or "Yes". If the field is "No", the system will use the Frequency from the Benefit Deduction Defaults for the "GenWeb" user if the Frequency is not "Per Pay Period" (value "P"). If the Frequency for the GenWeb user is "Per Pay Period", any new deduction that is created will use the same Frequency as the existing deduction. If there is no existing deduction, it will get the Frequency from the Employee Payroll record. If none of these records exist, it will set up the deduction with a Monthly frequency. Setting this field to "No" is only recommended for companies who do not use the iCON TOOLS payroll system. If you choose this option, you must also set the Generate Benefit Deductions Without Payroll to "No" in the HR System Defaults function.	As described	Not used
Eligible Dependent List: Click on the down-arrow to view the options set up in the Eligible Dependent Type function. Select the list that determines who is eligible to enroll in this plan. Based on the selected list, only eligible dependents will be displayed in FTE, OE and LE. If no list is selected, all of the employee's dependents will be able to be enrolled.	As described	Not used
Maximum Child Age: This field is only used if the ‘Validate Child Eligibility’ checkbox is selected. In the on-line enrollment processes, if a child’s age is equal to or greater than the higher of the Maximum Child Age or Maximum Student Age, he or she will appear in red with a warning message such as “If any dependent(s) display in a red colored row then that dependent(s) may not be eligible for coverage in this benefit. You can check about the condition of eligibility from your benefit administrator.”	As described	Not used
Maximum Student Age: This field is only used if the ‘Validate Child Eligibility’ checkbox is selected. In the on-line enrollment processes, if a child’s age is equal to or greater than the higher of the Maximum Child Age or Maximum Student Age, he or she will	As described	Not used

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appear in red with a warning message.		
Disability: Select this checkbox to allow non-spouse dependents to be enrolled in the plan in FTE, OE and LE, regardless of age, if the dependent has a disability.	As described	Not used
Attached Coverage List for Employee: Click on the down-arrow and select the coverage list that has valid coverage amounts for the employee. This will cause a Coverage button to appear in FTE/OE/LE. When the employee clicks on that button, a list of valid coverage amounts is displayed. The system will require a coverage amount to be selected.	As described	Not used
Attached Coverage List for Spouse: Click on the down-arrow and select the coverage list that has valid coverage amounts for the employee's spouse. This will cause a list of valid coverage amounts to display in FTE, OE and LE for the employee's spouse.	As described	Not used
Attached Coverage List for Child: Click on the down-arrow and select the coverage list that has valid coverage amounts for the employee's children. This will cause a list of valid coverage amounts to display in FTE, OE and LE for the employee's children.	As described	Not used
Plan End Date: If a plan will no longer be offered to employees, enter the last day the plan is in effect in the Plan End Date field. It will then no longer be available when using the on-line enrollment functions of First Time Enrollment, Open Enrollment and Life Events. If the effective date of the on-line enrollment is in the future, such as when going through Open Enrollment, the plan will be displayed (if the Display Plan checkbox is selected) but enrollment will not be allowed. If the employee is currently enrolled in a plan that has a Plan End Date, a red star will appear next to the plan in Open Enrollment, but the Decline Coverage option will be automatically selected, since the employee cannot choose the plan for the upcoming plan year. When the end date has arrived, run the Benefit Plan End Date Listing to end all current enrollments. If the benefit plan is ongoing, leave the Plan End Date field blank.		
Display Plan for First Time Enrollment, Life Events Enrollment and Open Enrollment: select this checkbox if you want to the display the plan to employees in any of the three on-line enrollment functions. Leave the checkbox empty if you do not wish to display the plan.		
Allow Selection for First Time Enrollment, Life Events Enrollment and Open Enrollment: select this checkbox if employees are allowed to select this benefit in any of the three on-line enrollment functions. To allow selection, you must also select the Display Plan checkbox.		
Click on the Administrative Costs button to enter either a cost with		

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the number of times per year that it is incurred (monthly, yearly, etc.), or enter the percentage of the actual total benefit cost that is necessary to administer this benefit. These costs are optional.		
Click on the G/L button if you wish to assign general ledger account numbers to your benefit plans. The General Ledger account number will appear in the format that was specified in the Benefit Group common object, from which it goes to the Chart of Accounts Definition. Enter the G/L number corresponding to this benefit plan, so that your costs can be reported separately by plan.		
To enter text that will appear beneath the benefit plan in FTE, OE and LE, highlight the benefit you wish to work with and click on the Text button. Enter instructions for the employee, whether for providing evidence of insurability or any other information employees need to have. HTML commands can be used within this text, including a link to a separate form or document.	As described	Not used
To only allow employees who live in certain zip codes to see the benefit in FTE, OE and LE, highlight the benefit you wish to work with and click on the Availability button. Enter either the zip code ranges or individual zip codes that are eligible. You can also enter exception ranges or zip codes by clearing the Eligible checkbox. If the employee's current, active mailing address is an eligible zip code, the plan will appear. Otherwise, it will not appear.	As described	Not used

COSTING

There are several ways to cost benefits. First, costs are incurred by either the employer or employee (or both), and for the employee or his/her dependents (or both).

Using the “Amount” Cost Method, costs can differ according to the employee’s or dependent’s age, or they can be the same for all ages. Costs can also differ whether the employee or dependent is a tobacco user.

The total cost of a benefit can be entered, with the associated percentages for both the employee and employer. Percentages can be entered according to the employee’s annual salary range also.

Any combination of the above costing features can be utilized.

You also have the ability to use the “Percentage Based” cost method or the “Salary Percent Based” cost method.

The system also provides effective dates, so that past and future costs can be stored on the system. Depending on the date that you are enrolling an employee, the appropriate cost will be used. Future costs can be entered, rather than waiting until the date that they are effective. Actual benefit costing routines will not use the future costs until they actually become effective.

In addition to the options mentioned above, all costing screens have a dollar amount, the number of times per year that this cost is incurred (i.e., monthly, yearly, etc.), and an optional coverage amount. For instance, if your life insurance plan is costed per \$1,000, you would enter that amount in the coverage field. If your medical plan is a certain flat amount with no associated coverage amount, you would leave the coverage field blank.

If a benefit plan is costed by the standard method, you may use the Benefit Cost Import to create cost records for benefit plans.

Open Enrollment Setup

To give your employees the ability to select their benefits for the upcoming plan year, follow the setup steps in this section.

In **HR System Defaults**, define the rules for displaying or hiding the Social Security Numbers and Dates of Birth. Use the Social Security Number Display Rule and Hide Date of Birth fields. These settings affect:

- The main page and View page of Personal Data
- The main page of Dependents
- In First Time Enrollment and Open Enrollment: Step 1, the main page of Step 2, Step 3
- In Life Events: the main page of Step 2, Step 3

In **HR System Defaults**, select the Require Dependent SSN checkbox if the Social Security Number should be a required field when a dependent is being added or updated. This will apply in Employee Self Service, Manager Services and iCON Tools.

In **HR System Defaults**, select the Require Dependent Gender checkbox if you wish to require the Gender whenever a dependent is added or updated, select this checkbox. This affects all functions in Employee Self Service, Manager Services and iCON Tools where dependents are entered.

In **HR System Defaults**, select the Display/Update Employee's Marital Status checkbox if you wish to allow employees to update their Marital Status (as stored in Demographics) in Personal Data, First Time Enrollment and Open Enrollment. Note that this field does not affect tax filing status in Tax Elections.

In **HR System Defaults** in the Employee Self Service On-Line Enrollment Settings section, select the applicable checkboxes:

- Select Display/Update Beneficiary's Date of Birth and/or Display/Update Beneficiary's SSN. These checkboxes affect the information that is displayed in Benefit Beneficiaries, First Time Enrollment, Life Events and Open Enrollment.
- Select Include Field to Confirm Dependent's SSN if you want employees to enter the dependent's Social Security Number a second time in order to ensure that it is correct. If you only wish to display the last 4 digits of the Social Security Number, select Display Only Last 4 Digits of Dependent's SSN. Note that if you wish to only display the last 4 digits of a dependent's SSN, select both checkboxes. This will mask the first 5 digits of the SSN in the following functions: Dependents, First Time Enrollment, Life Events and Open Enrollment.
- Select Display/Update Employee's Marital Status if you wish to allow employees to update their Marital Status (as stored in Demographics) in Personal Data, First Time Enrollment and Open Enrollment functions. Note that this field does not affect tax filing status (as stored in Tax Elections).
- Select Require Dependent Gender if you wish to require the Gender whenever a dependent is added or updated. This affects Dependents, First Time Enrollment, Life Events and Open Enrollment.

If any benefit plans only allow certain dependent types to be enrolled, such as spouse and children, set up the lists in the **Dependent List** function.

If any benefit plans allow the employee to choose an amount of coverage, enter the coverage lists and their associated amounts in the **Coverage List** function.

Check the following items in **Benefit Plans**:

- 1) For plans that require beneficiaries to be entered, check the 'Beneficiaries' checkbox.
- 2) For plans that are high deductible health plans and an employee who selects this plan will be allowed to also select a Health Savings Account (HSA), enter the "Maximum HSA Contribution Allowed" amount.
- 3) For plans that require at least one dependent to be enrolled, check the 'Dependents' checkbox.
- 4) For plans that require two or more dependents to be enrolled, check the 'More than one dependent enrollment required' checkbox.
- 5) For plans where only one dependent can be enrolled, check the 'Limit enrollment to one dependent' checkbox.
- 6) For plans where only the spouse can be enrolled, check the 'Spouse Only Plan' checkbox. This will cause a plan to be shown as unavailable if the employee does not have a spouse in the Dependents function.
- 7) For plans where only children can be enrolled, check the 'Child(ren) Only Plan' checkbox. This will cause a plan to be shown as unavailable if the employee does not have at least one child in the Dependents function.
- 8) For plans that require both the spouse and at least one child to be enrolled, check the 'Both Spouse and Child(ren) Enrollment Required' checkbox, as in the case of a Family plan. This will cause a plan to be shown as unavailable if the employee does not have a spouse and at least one child in the Dependents function.
- 9) Associate an Eligible Dependent List with a benefit plan where the employee is only allowed to enroll certain types of dependents, for example, spouse and children.
- 10) If you wish to check child ages, select the 'Use Child Age' checkbox. Enter the Child Age, Student Age and Disability fields as needed. If the checkbox is on, the child will display in red in the on-line enrollment functions if he or she is equal to or greater than the higher of the Maximum ages.
- 11) If dependents can only select a certain percentage of the coverage that the employees have chosen, enter the "Maximum Percentage of Employee Coverage Allowed for Dependent." This field applies to dependents who are enrolled in the same benefit as the employee, or to dependents who are enrolled in a benefit that is linked to the employee's enrollment using the Required Employee Enrollment in Benefit Plan field.
- 12) If the employee must be enrolled in another benefit prior to enrolling in this benefit, select the Required Employee Enrollment In Benefit Plan.
- 13) Associate a Coverage List with a benefit plan where the employee will select an amount of coverage, such as supplemental or optional life insurance. Separate coverage lists can be defined for the employee, spouse and children.

- 14) If the coverage amount of the benefit is reduced when the employee reaches a certain age, select the Apply Age Reduction Schedule checkbox. From the main list of Benefit Plans, click on the age reduction benefit and define each age range, along with either the percentage by which to reduce benefits, or the fixed amount of coverage.
- 15) If you wish to limit the number of additional increments of coverage that an employee can select, click on the 'Limit Increase of Increments' checkbox and enter the "Maximum Increase in Increments Allowed."
- 16) If you wish to limit the amount of coverage an employee can select to a multiplier of his or her annual salary, select 'Limit Maximum Coverage by Salary Multiple' and enter the "Maximum Multiples of Salary Allowed."
- 17) If you wish to assign a guaranteed amount of coverage when an employee initially chooses a benefit, select the 'Apply Guaranteed Issue Amount' checkbox and enter the "Guaranteed Issue Amount."
- 18) Enter any new costs that will go into effect for the new plan year. The Effective Date should be the first Pay Period End Date when the new costs will go into effect. Note that this may be in the current year, such as December 31st.
- 19) Enter text that you wish to appear with benefit plans.
- 20) If the plan is only available to employees who live in certain zip codes, click on the **Availability** button and enter the zip code ranges, individual zip codes, or both.
- 21) Enter the Plan End Date if the plan will no longer be in effect for the new Open Enrollment period.
- 22) If you wish to hide certain benefits, clear the checkbox called 'Open Enrollment – Display Plan'
- 23) If you wish to show certain benefits as display-only, select the checkbox called 'Open Enrollment – Display Plan' and clear the checkbox called 'Open Enrollment – Allow Selection'.

In the **Flexible Spending Accounts** common object, ensure that the Medical and Dependent Care checkboxes are set up correctly. If you wish to sort FSAs in a manner other than the Flexible Spending Accounts code, enter the Sort Number. The lowest number will appear first in the list in on-line enrollment functions.

Use the **Flexible Spending Accounts Copy** to copy FSA plans from the current year to the next year *or* you may use **Flexible Spending Account Plans** to set up the next year's plans. Enter the text that you wish to appear with FSA plans.

Note: When a Flexible Spending Account is added for an employee, the deduction Start Date will be set to the Effective Date of the Flexible Spending Account Plan. If the Pay Calendar for the next year has been set up for the employee's Payroll Processing Group, the system will get the last Check Date of the enrollment year, and set the deduction End Date to one day prior to the Pay Period End Date corresponding to the last Check Date. For example, if the FSA deduction would normally end on 12/31/2012, but the Pay Period End Date of 12/31/2012 has a Check Date of 1/5/2013, the system will set the deduction end date to

12/30/2012. This will ensure that the FSA deduction is not taken inadvertently in the next tax year. If this situation applies to you, set up your Pay Calendar(s) for the next year. If the Pay Calendar for the next year is not set up, you will receive a warning to advise you of this. You will be allowed to continue; the deduction End Date will be set to the End Date for the Flexible Spending Account Plan (typically December 31st).

In the **Health Savings Accounts** common object, ensure that the Self-Only and Family checkboxes are set up correctly. If you wish to sort HSAs in a manner other than the Health Savings Account code, enter the Sort Number. The lowest number will appear first in the list in on-line enrollment functions.

Use the **Health Savings Accounts Copy** to copy HSA plans from the current year to the next year *or* you may use **Health Savings Account Plans** to set up the next year's plans. Enter the text that you wish to appear with HSA plans.

Notes: (1) The End Date for an HSA deduction is determined in a similar manner to FSA deductions, with the exception that the End Date of the Health Savings Account Plan will be used if there is no Pay Calendar set up for the next year. If this is not the correct end date for HSA deductions, set up your Pay Calendar(s) for the next year. (2) For HSA deductions, both employee and employer amounts must be reported in W-2 Box 12 as Code W as of this writing. Make sure that both the W-2 Box 12: Employee field and W-2 Box 12: Employer field are set to "W" for the applicable deductions. If you have employees subject to taxes in California and New Jersey, employer deductions for W-2 Box 12: Employer "W" will be automatically added to taxable wages. If you have employees subject to Alabama taxes, select the HSA Employer Contribution AL SIT/SUI Taxable checkbox in Payroll Deductions.

Check the following items in the **Benefit Categories** common object dictionary:

- 1) To display coverage amounts to employees for plans such as life insurance in Steps 5 and 6 of the enrollment process and on the Benefit Statement, select the 'Show Coverage Amount' checkbox.
- 2) To display Benefit Categories in a different order than alphabetically by the Short Description, enter numbers in the Sort Order field. Number 001 will appear at the top of the list and number 999 will appear at the bottom. For example, if you want Medical to appear first, then Dental, then Life Insurance, assign numbers such as:

Medical	100
Dental	200
Life Insurance	300

- 3) After sorting by Benefit Categories, benefit plans are sorted in the following order. If you do not wish to sort by employee cost, select the Sort By Description Only in the Benefit Category record.
 - a. Long Description in the Benefit Plan common object
 - b. Employee cost
 - c. Long Description in the Benefit Option common object

Check that the ‘Child and Spouse’ checkboxes are correctly marked in the **Relationship Type** common object dictionary. These are used in conjunction with Eligible Dependent Lists to make sure employees can only enroll the types of dependents that are eligible. Also check that the ‘Dependent’ checkboxes are correctly marked. Employees will only be able to select relationship types that are defined as Dependent when they add dependents during on-line enrollment. All relationship types will appear in the drop-down list when adding beneficiaries.

Use the **Messaging Setup** function if you wish to set up e-mail messages to be sent when employees complete the Open Enrollment process. Complete the following steps:

- 1) Select the **ES Benefit Enrollment** process.
- 2) Select the Event called “On Submit” or “First/Open Enroll” (i.e., not an Event that begins with “LE” for Life Events).
- 3) Define your message and set up the e-mail address(es) that will receive the messages.

This message will be sent when an employee completes either the Open Enrollment or First Time Enrollment process.

Use the **Links** function in Manager Services to set up web sites or PDFs that can give employees detailed benefit data. Complete the following steps:

- 1) Select the **Benefits** area.
- 2) Define the benefit group and/or benefit category for each link. If there is no link for the lowest level (benefit category), the system will display a link from the previous level (benefit group or No Group).

Also in the **Links** function, you may add instructions for a Coverage Category that will be shown to employees during on-line enrollment. Complete the following steps:

- 1) Select the **Benefits** area.
- 2) Select the **Category**. You may select a Benefit Group or leave this field blank to have it apply to all benefit groups.
- 3) Enter the text that you wish to be shown underneath the Category description and Details button and above the first benefit in the Category. If you wish to set up information to display at both the top of the Category and after the last benefit, insert five or more equal signs (=) between the two sections. The top section will be shown below the Category, as described above. The bottom section will be shown after the last benefit and above the Decline Coverage option. To only display information after the last benefit, enter at least five equal signs, followed by the text.

Use the **Links** function in Manager Services to set up web sites or PDFs that can give employees detailed data after Flexible Spending Accounts and/or Health Savings Accounts. Complete the following steps:

- 1) Select either the **Flexible Spending Account** or **Health Savings Account** area.
- 2) Select the group that applied to the link and text. If there is no link or text for the employee’s group, the system will display the link or text from the default group (*No FSA or *No HSA).

These links will be shown in Open Enrollment, First Time Enrollment, Benefit Statement and Life Events.

Use the **On-Line Enrollment Top of Page Text** function in Manager Services if you want to replace the default first paragraph in the Employee Self Service enrollment functions.

In **Benefit Deduction Defaults** in Manager Services, set the Tax Year to the current year (not the year that Open Enrollment takes effect).

In **Benefit Enrollment Defaults** in Manager Services, enter the following information:

- 1) In Benefit Group(s) Authorized For Open Enrollment, select All if all benefit groups use the same dates. If only certain benefit groups are eligible for the next Open Enrollment date range, click on Select and indicate the benefit groups that will participate in the next Open Enrollment season.
- 2) Start Date and End Date of the Open Enrollment period: This determines when the Open Enrollment option appears in the Employee Self Service menu.
- 3) Effective date of new benefit costs to be displayed during Open Enrollment.
- 4) Effective date of benefit enrollment records that will be created during Open Enrollment. Generally, this date should be same as the Effective date of new benefit costs to be displayed during Open Enrollment. If the dates are different, a warning message will appear. This may be overridden if necessary.
- 5) Effective date of FSA elections made during Open Enrollment.
- 6) For age-costed benefits, date from which employee's age should be determined.
- 7) For salary-multiplier benefits, date from which employee's salary should be determined.
- 8) Select the 'Display Employer Cost' checkbox if you wish to show employees the cost that your company pays. These amounts are retrieved from the employer cost fields in Employer Benefit Plans. If this option is selected, employer costs will be shown in Open Enrollment, Life Events, First Time Enrollment and the Benefit Statement.
- 9) Select the 'Allow Employee to Change Date of Birth during Open Enrollment' checkbox if employees can change their birth date. Leave this checkbox blank to show the employee's date of birth as display only. Note that benefit plans that are costed by age use the Date of Birth to determine the cost.
- 10) Select the 'Allow Employee to Change Address during Open Enrollment' checkbox if employees can change their address. Leave this checkbox blank to show the employee's address as display only. Note that benefit plans whose eligibility is based on the employee's zip code will use this information.
- 11) Select the 'Allow Employee to Select Limited-Use FSA Without Selecting HDHP in Enrollment Functions' checkbox if you wish to display a message in this scenario, but still allow the employee to continue. If you leave this checkbox blank, the system will require enrollment in a HDHP if the employee selects a Limited-Use FSA.

- 12) Select the 'Display Declined Benefits on Confirmation Statement in Enrollment Functions' checkbox if you wish to display declined benefits on Step 6 of the on-line enrollment functions, in addition to displaying them on Step 5. If you leave this checkbox blank, declined benefits will only be shown on Step 5.
- 13) If you want new benefit enrollment records to be generated even when no benefit changes are made, select the 'Always Create New Benefit Records' checkbox. If you only want a new benefit enrollment record to be generated when the employee selects a new plan, do not put a checkmark in this box. If the checkbox is blank and the employee changes dependent information, the dependents will be updated on the existing enrollment record; a new enrollment record will not be entered. If the employee changed beneficiary information, a new set of beneficiaries will be added to the existing benefit enrollment records, but with a new beneficiary effective date.
- 14) In the 'Tax Year' field of the GenWeb user section of this function, select the current year. This must be done in order for the system to create benefit-related deductions.
- 15) Select the 'Display tobacco user status in ESS and allow employees to change for self and dependents' checkbox if you wish to show the 'Tobacco User' field and allow the employee to change the status in **Personal Data, Dependents, Open Enrollment, First Time Enrollment and Life Events**.
- 16) Select the 'Display and update Email Address(es) in the Personal Information page' checkbox if you wish to display the employee's Work, Home and Alternate Email Addresses from the E-Mail Addresses function on the Step 1 – Verify Personal Information page in **Open Enrollment and First Time Enrollment**. If you display these fields, the employee will be able to update them. If you do not select this checkbox, the email fields will not be displayed on the Verify Personal Information page in these benefit functions.
- 17) Select the 'Allow Change of Dependent Status in the Dependents Page' checkbox if you wish to display the Status field when the employee updates a Dependent in **Open Enrollment and First Time Enrollment**. This would allow an employee to change the status for an Active dependent to Suspended or Terminated, such as for an ex-spouse. If a dependent is change to a status other than Active, he or she will not be shown on the list of dependents when enrolling dependents in a benefit on Step 4. Once a dependent is changed to a non-Active status, he or she will no longer appear in the list of dependents on Step 2. Leave this checkbox blank if you do not want employees to see the Status field when updating a dependent in **Open Enrollment and First Time Enrollment**.
- 18) Select the 'Require user to upload Dependent Verification documents' checkbox if you wish to require a dependent verification document to be uploaded for each dependent. If this checkbox is selected and no document has been uploaded, the dependent cannot be enrolled in a benefit. This affects the following functions in Employee Self Service: **Dependents, First Time Enrollment, Open Enrollment and Life Events**. It affects the following functions in Manager Services: If you wish to show certain benefits as display only, select the checkbox called 'Open Enrollment – Display Plan' and clear the checkbox called 'First Time Enrollment – Allow Selection'.
- 19) In 'Start deduction on Pay Period End Date corresponding to the first Check Date on or after the Benefit Enrollment Date': If the Deduction Start Date in the ESS Online Enrollment Defaults section is set to Enrollment Date, and you wish to start deductions for new benefit enrollments on

the Pay Period End Date corresponding to the first Check Date on or after the Enrollment Date, select this checkbox. This applies to First Time Enrollment, Life Events and Open Enrollment (when the effective date is not January 1) in Employee Self Service, and to Open Enrollment in Manager Services. Note that for Open Enrollment, if your effective date is January 1, you do not need to select this checkbox. The system will automatically set the deduction Start Date to the Pay Period End Date corresponding to the first Check Date on or after January 1. If you select this checkbox, it will also affect **Benefit Enrollment** in Manager Services and iCON Tools: the system will set the deduction Start Date to the Pay Period End Date corresponding to the first Check Date on or after the Deduction Start Date in **Benefit Deduction Defaults** (such as Enrollment Date or Eligibility Date). If this checkbox is empty, the deduction Start Date will be calculated according to the setting of the Deduction Start Date in the ESS Online Enrollment Defaults when using Employee Self Service **First Time Enrollment, Life Events and Open Enrollment** (where the effective date is not January 1) and Manager Services **Open Enrollment**. For Manager Services and iCON Tools **Benefit Enrollment**, it will be the Deduction Start Date specified in **Benefit Deduction Defaults**.

If employees are set up on payroll, any benefit costs will be calculated per pay period using the Pay Frequency that exists in **Misc. Payroll**.

If employees are not set up on payroll, enter the following information:

- 1) In **Benefit Plans**, set the 'Use Pay Frequency' field to "No" for each plan.
- 2) In **HR System Defaults**, select the 'Generate Benefit Deductions Without Payroll' checkbox.
- 3) In **Benefit Enrollment Defaults** in Manager Services, enter the Pay Frequency to be used to calculate and display the per pay period costs. If this is not entered, the system will default to a monthly pay frequency.

In **Employee Security** in Manager Services, select the **Open Enrollment** function.

First Time Enrollment Setup

In addition to the setup steps in the Open Enrollment section, check the following areas on your system.

Check the following items in **Benefit Plans**:

- 1) If you wish to hide certain benefits, clear the checkbox called 'First Time Enrollment – Display Plan'.
- 2) If you wish to show certain benefits as display only, select the checkbox called 'Open Enrollment – Display Plan' and clear the checkbox called 'First Time Enrollment – Allow Selection'.

In **Benefit Enrollment Defaults** in Manager Services, enter the following information:

- 1) Select 'Benefit group(s) authorized for First Time Enrollment.' *Note: this new field only applies to employees who have a hire date that is within the Maximum number of days after Adjusted Hire Date that First Time Enrollment is available to new hire that is defined in this function. To authorize all Benefit Groups to access the First Time Enrollment function in Employee Self Service, select the "All" radio tab. If only certain benefit groups are to be authorized for First Time Enrollment, click on the "Select" radio tab then select the applicable benefit group(s) to

which First Time Enrollment should be authorized in Employee Self Service (Ctrl + mouse click to select more than one benefit group). If an employee's benefit group is not one of the selected groups, the First Time Enrollment function will not appear in Employee Self Service.

- 2) Enter the number of days that the employee has after his or her Adjusted Hire Date in which to access First Time Enrollment and make benefit elections. After this time, the First Time Enrollment option will no longer appear in the menu.
- 3) Select the 'Allow Employee to Change Date of Birth During First Time Enrollment' checkbox if employees can change their birth date. Leave this checkbox blank to show the employee's date of birth as display only. Note that benefit plans that are costed by age use the Date of Birth to determine the cost.
- 4) Select the 'Allow Employee to Change Address During First Time Enrollment' checkbox if employees can change their address. Leave this checkbox blank to show the employee's address as display only. Note that benefit plans whose eligibility is based on the employee's zip code will use this information.
- 5) If you want the system to use a date other than the enrollment date for age-costed benefits, enter the month and day in the 'For age-costed benefits, use employee's age as of this date (MM/DD)'. The system will cost the benefit using the employee's age as of this month and day of the year in which the employee becomes eligible for the benefit.

If you have not already set up a **Messaging Setup** entry for Open Enrollment, you may add one to the system. Use this function if you wish to set up e-mail messages to be sent when employees complete the First Time Enrollment process. Complete the following steps:

- 1) Select the **ES Benefit Enrollment** process.
- 2) Select the Event called "On Submit" or "First/Open Enroll" (i.e., not an Event that begins with "LE" for Life Events).
- 3) Define your message and set up the e-mail address(es) that will receive the messages.

Note that this message will be sent when an employee completes either the Open Enrollment or First Time Enrollment process.

Select the **First Time Enrollment** function in **Employee Security**.

When a new employee goes through First Time Enrollment, the eligibility dates for each benefit will be calculated and shown in the **Start Date** column on Step 4 of the process. This date will be written to the Eligibility Date of the benefit enrollment record, as well as to the Start Date of any deduction formulas that are created.

Benefit Statement Setup

To give your employees the ability to view their benefits for the current year as well as view any elections made through the Open Enrollment process for the next year, select the **Benefit Statement** function in **Employee Security**. Your employees will be able to view their plans, dependents, beneficiaries, coverage amounts (where set up to do so) and links. No data can be changed in this

function. In **Benefit Plans**, clear the checkbox called ‘Display in Benefit Statement’ for benefits you do not wish employees to see.

Life Events Setup

In addition to the steps for Open Enrollment, enter information in the following functions.

In the **HR Common Object Life Events Codes**, the following codes must exist with these exact Short Descriptions. Enter the Long Description as shown or change as needed.

Code	Short Description	Long Description
01	LEM	Marriage
02	LEB	Birth
03	LED	Divorce
04	LES	Legal Separation
05	LEX	Dependent Death
06	LMV	Change of Address
07	LDS	Dependent Student Status
08	LSE	Spouse Employment Status
09	LEA	Legal Adoption
10	LSC	Employment Status Change
11	LEO	Employee Ages Out
12	LDO	Dependent Ages Out
13	LDE	Dependent Eligibility
14	LCM	Court Mandated Dependent

Note that the Life Event for Employment Status Change is intended for an employee who is going from not being eligible for benefits to becoming eligible, such as going from part time status to full time. When going through Life Events, the employee will only be able to access the Employment Status Change if he or she has an active status record in **Employment Status** that is within the number of days specified in **Life Event Preferences**. If any benefits in the employee’s Benefit Group have a Date Rounding Formula, the rounding will be applied to the employee’s most recent Employment Status Date. For example, if the employee’s latest Employment Status record is dated March 18, and a benefit in the Benefit Group has 30 days, rounded to the Next 1st of Month, the system will round the employee’s eligibility date to April 1. Any benefits selected during the Life Event will have this Enrollment Date.

In **Benefit Plans**, choose one of the following options:

- 1) If you wish to hide certain benefits, clear the checkbox called ‘Life Events – Display Plan’.
- 2) If you wish to show certain benefits as display only, select ‘Life Events – Display Plan’ and clear the checkbox called ‘First Time Enrollment – Allow Selection’.

Use the **Life Events Preferences** function in Manager Services to tailor the information that is shown to employees.

- 1) In the **Benefits** section, add the Life Events that you wish to allow your employees to use. These may be entered for all benefit groups or for individual benefit groups. Specify the “Overview Text” that appears at the beginning of the Life Event process and any “Summary Text” that you wish to display in Step 6 of the process. Also specify the maximum number of days after the life event date during which the employee may make changes.
- 2) If you offer FSAs to your employees, click on the **FSA** section in the function heading. Specify when FSA-related deduction changes should take effect, such as the next pay period after the change is made.
- 3) If you offer HSAs to your employees, click on the **HSA** section in the function heading. Specify when HSA-related deduction changes should take effect, such as the next pay period after the change is made.

In the **Links** function, select the **Life Events** area. You may then add links for specific benefit groups and/or life events. These links will appear in Step 5 of the Life Events process. They will be sorted according to the Link Number that you assign. Number 1 will appear first, and number 99 will appear last.

Use the **Messaging Setup** function if you wish to set up e-mail messages to be sent when employees complete the Life Events process. Complete the following steps:

- 1) Select the **ES Benefit Enrollment** process.
- 2) Select the Event that corresponds to the Life Event with which you wish to work; i.e., “LE Marriage,” “LE Child Birth,” etc.
- 3) Select “*All Users” in the ‘User’ field.
- 4) Define your message and set up the e-mail address(es) that will receive the messages.

In **Employee Security** in Manager Services, select the **Life Events** function.