

Release 1827

**Service Request 82240
COBRA IDOC StayWell Changes**

Test Plan

July 9, 2008

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Testing Overview

This document addresses the test cases constructed to verify the correct installation of Release 1827. The test consists of the following steps:

1. Employee Documents / Document Selection Menu (IDOC)
2. Generate IDOC for Separation
3. Generate IDOC for Layoff
4. Generate IDOC for Retirement
5. Generate IDOC for Reduction of Hours
6. Generate IDOC for Approved Leave without Pay

Employee Documents / Document Selection Menu (IDOC)

Description

To navigate to the Employee Documents Document Selection Menu screen, perform the following steps:

- Enter IDOC and any Employee ID, then press Enter
- Press F8 to page forward to the second screen

Generate IDOC for Separation

Description

To generate the IDOC for an employee who is separating from the University, perform the following steps:

- Select All COBRA Notification Documents (type “S” next to All) and press F5
- Select Separation (type “S” next to Separation) and press F5

Verification

Verify that the IDOC contains the following text on the first page:

“To elect COBRA continuation coverage for yourself and/or your covered family members, you must complete this form and submit it to your health plan carrier(s) by this date:”

Verify step #5 of the Instructions section to confirm the IDOC contains the following text:

“Make photocopies of all pages of this completed Application for COBRA Continuation. Send one copy to each health plan carrier (medical, dental, vision, and/or wellness) with whom you wish to continue coverage.”

Verify the Current Coverage and Date Coverage Ends section contains the following text:

“Wellness Program: You may or may not be eligible to continue coverage under the StayWell Health Management Program. Please refer to <http://atyourservice.ucop.edu> or your Benefits Office or the person handling benefits in your department to determine eligibility for you or your enrolled family member(s).”

Verify the Qualified Beneficiaries section contains the modifications:

- A column with the heading of “Wellness”
- A set of brackets appears underneath the Wellness column heading
- The date of birth for each family member appears after the SSN on the next line

Generate IDOC for Layoff

Description

To generate the IDOC for an employee who is being laid off from the University, perform the following steps:

- Select All COBRA Notification Documents (type “S” next to All) and press F5
- Select Layoff (type “S” next to Layoff) and press F5

Verification

Verify that the IDOC contains the following text on the first page:

“To elect COBRA continuation coverage for yourself and/or your covered family members, you must complete this form and submit it to your health plan carrier(s) by this date:”

Verify step #5 of the Instructions section to confirm the IDOC contains the following text:

“Make photocopies of all pages of this completed Application for COBRA Continuation. Send one copy to each health plan carrier (medical, dental, vision, and/or wellness) with whom you wish to continue coverage.”

Verify the Current Coverage and Date Coverage Ends section contains the following text:

“Wellness Program: You may or may not be eligible to continue coverage under the StayWell Health Management Program. Please refer to <http://atyourservice.ucop.edu> or your Benefits Office or the person handling benefits in your department to determine eligibility for you or your enrolled family member(s).”

Verify the Qualified Beneficiaries section contains the modifications:

- A column with the heading of “Wellness”
- A set of brackets appears underneath the Wellness column heading
- The date of birth for each family member appears after the SSN on the next line

Generate IDOC for Retirement

Description

To generate the IDOC for an employee who is retiring from the University, perform the following steps:

- Select All COBRA Notification Documents (type “S” next to All) and press F5
- Select Retirement (type “S” next to Retirement) and press F5

Verification

Verify that the IDOC contains the following text on the first page:

“To elect COBRA continuation coverage for yourself and/or your covered family members, you must complete this form and submit it to your health plan carrier(s) by this date:”

Verify step #5 of the Instructions section to confirm the IDOC contains the following text:

“Make photocopies of all pages of this completed Application for COBRA Continuation. Send one copy to each health plan carrier (medical, dental, vision, and/or wellness) with whom you wish to continue coverage.”

Verify the Current Coverage and Date Coverage Ends section contains the following text:

“Wellness Program: You may or may not be eligible to continue coverage under the StayWell Health Management Program. Please refer to <http://atyourservice.ucop.edu> or your Benefits Office or the person handling benefits in your department to determine eligibility for you or your enrolled family member(s).”

Verify the Qualified Beneficiaries section contains the modifications:

- A column with the heading of “Wellness”
- A set of brackets appears underneath the Wellness column heading
- The date of birth for each family member appears after the SSN on the next line

Generate IDOC for Reduction of Hours

Description

To generate the IDOC for an employee who has a reduction of hours, perform the following steps:

- Select All COBRA Notification Documents (type “S” next to All) and press F5
- Select Reduction of Hours (type “S” next to Reduction of Hours) and press F5

Verification

Verify that the IDOC contains the following text on the first page:

“To elect COBRA continuation coverage for yourself and/or your covered family members, you must complete this form and submit it to your health plan carrier(s) by this date:”

Verify step #5 of the Instructions section to confirm the IDOC contains the following text:

“Make photocopies of all pages of this completed Application for COBRA Continuation. Send one copy to each health plan carrier (medical, dental, vision, and/or wellness) with whom you wish to continue coverage.”

Verify the Current Coverage and Date Coverage Ends section contains the following text:

“Wellness Program: You may or may not be eligible to continue coverage under the StayWell Health Management Program. Please refer to <http://atyourservice.ucop.edu> or your Benefits Office or the person handling benefits in your department to determine eligibility for you or your enrolled family member(s).”

Verify the Qualified Beneficiaries section contains the modifications:

- A column with the heading of “Wellness”
- A set of brackets appears underneath the Wellness column heading
- The date of birth for each family member appears after the SSN on the next line

Generate IDOC for Approved Leave without Pay

Description

To generate the IDOC for an employee who is taking an approved leave without pay, perform the following steps:

- Select All COBRA Notification Documents (type “S” next to All) and press F5
- Select Approved Leave without Pay (type “S” next to Approved Leave without Pay) and press F5

Verification

Verify that the IDOC contains the following text on the first page:

“To elect COBRA continuation coverage for yourself and/or your covered family members, you must complete this form and submit it to your health plan carrier(s) by this date:”

Verify step #5 of the Instructions section to confirm the IDOC contains the following text:

“Make photocopies of all pages of this completed Application for COBRA Continuation. Send one copy to each health plan carrier (medical, dental, vision, and/or wellness) with whom you wish to continue coverage.”

Verify the Current Coverage and Date Coverage Ends section contains the following text:

“Wellness Program: You may or may not be eligible to continue coverage under the StayWell Health Management Program. Please refer to <http://atyourservice.ucop.edu> or your Benefits Office or the person handling benefits in your department to determine eligibility for you or your enrolled family member(s).”

Verify the Qualified Beneficiaries section contains the modifications:

- A column with the heading of “Wellness”
- A set of brackets appears underneath the Wellness column heading
- The date of birth for each family member appears after the SSN on the next line