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**SR82195 Requirements**  
**2008 Obsolete Medical Plan Codes - Payroll**

**Objective:**

Five medical plans were terminated as of 12/31/2007. The purpose of this Service Request is to remove those obsolete plans from the Payroll application.

**Project Type:**

This project involves modifications to the Payroll/Personnel application.

**Requested by:**

HR&B Health & Welfare Policy and Planning

**Analyst:**

Beth Burkart

**Due Date(s):**

The requested modifications are non-urgent.

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## **Background**

Open Enrollment changes for 2008 included discontinuing the following five plans:

- Pacificare (FP)
- Pacificare Nevada (PN)
- Definity (DH)
- Select EPO (SE)
- Blue Cross High Option (BH)

These plan changes will require modifications to the Payroll/Personnel System.

Note: the Data Dictionary and CICS field level help were already updated to move these codes down to the “Previously Valid Codes” section for Medical Plan Code EDB0292 and Future Medical Plan Code EDB0680 as part of the Open Enrollment project that took place in the end of 2007.

## **Current Process:**

Until the end of 2007, Pacificare, Pacificare Nevada, Definity, Select EPO and Blue Cross High Option were among the medical plans available to UC employees.

The carrier file process and the historical premium activity process include logic to set a common sort key for related plans, for example the common sort key “B1” is used for all existing Blue Cross plans. Currently a sort key of “UH” is used for the Select EPO (SE) plan.

## **Proposed Process:**

The obsolete plans should be removed from the control tables in the Payroll application, and no longer accepted as valid codes on the EDB screens.

The logic related to “BH” should be removed from both the carrier file process and the historical premium activity process.

The logic related to the “UH” sort key should be removed from both the carrier file process and the historical premium activity process. The “SE” plan is now obsolete, and all other plans previously associated with the “UH” sort key are also obsolete at this point.

## Change Requirements

### 1.0 Control Table Updates

#### 1.1 Gross to Net (GTN)

The following Gross to Nets (GTNs) should be made inactive:

<b>GTN</b>	<b>Plan</b>
220	Pacificare (FP)
221	Pacificare CON
306	Blue Cross High Option (BH)
307	Blue Cross High Option CONT
317	Select EPO (SE)
318	Select EPO CON
331	Pacificare Nevada (PN)
332	Pacificare Nevada CON
333	Definity (DH)
334	Definity CON

#### 1.2 Code Translation Table

The Code Translation Table should be modified to make translations for the following codes obsolete: FP, PN, DH, SE, and BH for EDB data element 0292.

#### 1.3 Data Element Table

The Data Element Table should be updated to remove the obsolete plan code values of FP, PN, DH, SE, and BH from data element numbers 0292, 0680, and 0697.

### 2.0 EDB Maintenance

#### 2.1 Explicit Maintenance

##### 2.1.1 Range and Value Edits

If one of the obsolete codes (FP, PN, DH, SE, or BH) is entered for the Medical Plan Code or Future Medical Plan Code online or in batch, the system should reject the update and issue the following error message: "Field out of range or illegal value."

## **3.0 Carrier File Process**

### **3.1 Carrier File**

The process that creates the carrier files from the monthly PAR and EDB data should be modified to remove logic related to the plan code of “BH” and also the sort key of “UH.” The “UH” sort key will no longer be needed, as “SE” was the last plan code associated with it.

### **3.2 Historical Premium Activity**

The process that updates the historical premium activity table also should be modified to remove logic related to the plan code of “BH” and also the sort key of “UH.” The “UH” sort key will no longer be needed, as “SE” was the last plan code associated with it.