

Release 1349

**Service Request 15218
Rename Benefits Plans**

Detail Design

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Information Systems & Computing
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Introduction

Service Request 15218

The Health and Welfare Division of Human Resources and Benefits has renamed some of the University of California's plan and packages. This became effective January 1, 2001. Several CICS map screen literals are being changed. The internal COBOL program data names remain un-changed.

Overview of Changes:

Current	Revised
Career Benefits	Full Benefits
Limited Career Benefits	Mid-Level Benefits
University-Paid Career Life	Basic Life
University-Paid Disability	Short Term Disability
Employee-Paid Life	Supplemental Life
Employee-Paid Disability	Supplemental Disability
University Paid Core Life	Core Life

Error Report 1738

Several CICS HELP anchor positions were improperly specified. For CICS screens IINS IINP and EINS, the positions have been corrected to match the existing field positioning.

Overview

To implement these changes in the Payroll/Personnel System (PPS) the following modifications will be made:

- Data Dictionary/On-line Help: The Data Dictionary and on-line help text will be changed to reflect the new benefit plan names.
- On-line Screens: The on-line screens EINS, IINS, IINP, IBN1 and IBN2 will be modified to reflect the new benefit plan names.
- System Messages: System messages will be changed to reflect the new benefit plan names.
- Post Authorization Notification (PAN): The benefit plan names displayed on the “Bene” and the “Hire” section of the PAN will be changed.
- Employee Documents (IDOC): The “Personal Information” and the “Appointment Information” sections of the IDOC will be changed to display the new benefit plan names.
- Data Element Table (DET): Data element descriptions on the DET table will be changed to reflect new benefit plan names.
- Code Translation Table (CTT): Code translations will be changed to reflect new benefit plan names.
- Gross-To-Net Table (GTN): GTN descriptions will be changed to reflect new benefit plan names.
- Reports: Various report headings will be changed to reflect new benefit plan names.
- UPAY Forms: Various UPAY forms will be changed to reflect new benefit plan names.

Differences from Requirements

Data Element EDB 0234-1 was not listed in the Service Request. The description will be changed from “EPD DE-ENROLL” to “DIS DE-ENROLL”.

CICS HELP EDB0282G was not listed in the Service request. EDB0282G contains three impacted data elements (EDB0233, EDB0277, and EDB0451). EDB0282G will be included in the Release CICS HELP.

Program PPP560 is impacted by the Service Request. It will be adjusted to change the PPP5601 report header of “Employee Paid Disability” to become “Supplemental Disability”.

Programs

PPP010

PPP010, report PPP0114 header “Group Life Insurance” has been changed to “Supplemental Life”. And header “Employee Paid Disability has been changed to “Supplemental Disability”.

PPP560

PPP560 report header (PPP5601 “Benefits Deduction Register”) will be changed from “Employee Paid Disability” to “Supplemental Disability”.

PPP650

PPP650 report headers (PPP6501, PPP6502, PPP6503, and PPP6504) have been changed from “EPD” (Employee Paid Disability) to “SPDIS”. “EELI” (Employee Paid Life) has been changed to “SPLIF”.

PPDXBENI

PPDXBENI is used by batch and online IDOC processing. Batch IDOC is reported by program PPP750. Online uses the IDOC panel. This is a “Dual” program.

Literals being changed:

The report literal “University-Paid Disability” was replaced by “**Short Term Disability**”. The report literal “Employee Paid Disability Plan” was replaced by “**Supplemental Disability Insurance**”. The report literal “University-Paid Life Insurance in the amount” was replaced by “**Basic Life Insurance in the amount**”. The report literal “Employee Paid Life Insurance Plan” was replaced by “**Supplemental Life Insurance**”.

Attachment “D” contains a detailed IDOC example.

CICS PROGRAM

PPNTBENE

The online PAN processing uses this program. Attachment “C” contains a detailed example.

Literals being changed:

PPNTBENE is included in PAN processing and is online only. The literal “**Supplemental Life**” replaces the term “Employee-Paid Life”. The literal “**Supplemental Disability**” replaces the literal “Employee-Paid Disability”.

CICS Maps

The COBOL programs supporting the CICS maps are not being changed. The literals that appear in the CICS map are being changed as indicated below.

Inputs for HELP:

- PAYDIST.R1349.HELPSCRN (screen level).
- PAYDIST.R1349.HELPDDSE (field level).

The impacted screens have similar changes. This provides a summary, by EDB Field ID Number, for the impacted fields. Then, a summary for each screen (EINS, IINS, IINP, IBN1 and IBN2) is listed.

Overall Summary of fields, listed in field number sequence:

HELP	Current Screen Literal	Revised Screen Literal
EDB0123G contains EDB0123 EDB0231	UCDI/Emp Pd Dis	STD/Suppl Life
EDB0123	UCDI	STD
EDB0231	EPD Wait Per	SUPPL Disability Wait Per
EDB0232	EPD Sal Base	Suppl Disability
EDB0233	EPD Eff Date	Suppl Disability Eff Date
EDB0234	EPD De-Enroll	No screen literal impacts. CICS HELP is being changed See Attachment "A".
EDB0275	Life Sal Base	(shift right two bytes) No change to literal text.
EDB0276	Life Plan	Suppl Life Plan
EDB0277	Life Eff Date	(shift right two bytes) No change to literal text.
EDB0282G contains EDB 0282 EDB 0233+ EDB 0277+ EDB 0188 EDB 0451+ (+ is changed in this SR)	Cov Eff Date	Cov Eff Date The screen literal remains un- changed. EINS screen: EDB 0233, 0277, and 0451 HELP text is changed.
EDB0330	Life Insurance – UC paid	Basic Life
EDB0451	Life Ins Eff Date – UC Paid	Basic life Ins Eff Date
EDB0453	UCTD Eff Date	STD Eff Date

PPEINS0

PPEINS0 is the map used by screen processor program PPWEINS.
 The map has had several literals and online HELP adjusted.

HELP	Current Screen Literal	Revised Screen Literal
EDB0276	Employee Paid Life Plan	Supplemental Life
EDB0282G	Cov Eff Date	Cov Eff Date Note that the literal has not changed, just the CICS HELP text.
EDB0330	UC Paid Life Ins	Basic Life

PPIINS0

PPIINS0 is the map used by screen processor program PPWIINS.
 The map has had several literals and online HELP fields adjusted.

HELP	Current Screen Literal	Revised Screen Literal
EDB0276	Life	Supplemental Life
EDB123G contains EDB0123 EDB0231	UCDI/Emp Pd Dis	STD/Suppl Dis
EDB0330	UC Paid Life	Basic Life

PPIINP0

PPIINP0 is the map used by screen processor program PPWIINP.
 The map has had several literals and online HELP fields adjusted.

HELP	Current Screen Literal	Revised Screen Literal
EDB0276	Life	Supplemental Life
EDB123G Contains EDB0123 EDB0231	UCDI/Emp Pd Dis	STD/Suppl Dis
EDB0330	UC Paid Life	Basic Life

PPIBN10

PPIBN10 is the map used by screen processor program PPWIBN1.
 The map has had several literals and online HELP fields adjusted.

HELP	Current Screen Literal	Revised Screen Literal
EDB0123 contained in EDB 0123G	UCTD Code	STD Code
EDB0231 contained in EDB0123G	EPD Wait Per	SUPPL Disability Wait Per
EDB0232	EPD Sal Base	Suppl Disability
EDB0233	EPD Eff Date	Suppl Disability Eff Date
EDB0330	Life Insurance- UC Paid	Basic Life
EDB0451	Life Ins Eff Date- UC Paid	Basic Life Ins Eff Date
EDB0453	UCTD Eff Date	STD Eff Date

PPIBN20

PPIBN20 is the map used by screen processor program PPWIBN2.
 The map has had several literals and online HELP fields adjusted.

HELP	Current Screen Literal	Revised Screen Literal
EDB0275	Life Sal Base	(shift right two bytes) No change to literal text.
EDB0276	Life Plan	Suppl Life Plan
EDB0277	Life Eff Date	(shift right two bytes) No change to literal text.

Table Updates

System Messages

The following system messages will be changed:

Employee Paid Disability Messages

Current Messages:

```
IV-023   EPD MAXIMUM SALARY NOT AVAILABLE FROM BRE
RC-090   INVALID EPD WAITING PERIOD
RC-091   INVALID EPD SALARY BASE ON TRANSACTION
01-088   BENEFITS RATES: NON-NUMERIC EMPLOYEE PAID DISABILITY RATE
01-089   INVALID EPD MAXIMUM SALARY BASE VALUE
01-657   BENEFITS RATES: INVALID LINE NUMBER FOR EPD RATES
08-188   EMPLOYEE-PAID LIFE INS DATA IS INCONSISTENT WITH ASSIGNED BELI
08-189   INELIGIBLE FOR EPD INS DUE TO BELI - WILL BE BLOCKED
12-021   INELIGIBLE FOR EPD INS DUE TO BELI - ADD/CHANGE BLOCKED
12-022   EMPLOYEE DE-ENROLLED FROM EMPLOYEE-PAID DISABILITY
13-020   EPD ENROLLMENT BLOCKED DUE TO BELI INELIGIBILITY
13-047   EPD ENROLLMENT BLOCKED - ALREADY ENROLLED
57-030   CALCULATED EPD BASE IS ZERO, PRIOR VALUE RETAINED
```

Revised Text

```
IV-023   SUPPLEMENTAL DISABILITY MAXIMUM SALARY NOT AVAILABLE FROM BRE
RC-090   INVALID SUPPLEMENTAL DISABILITY WAITING PERIOD
RC-091   INVALID SUPPLEMENTAL DISABILITY SALARY BASE ON TRANSACTION
01-088   BENEFITS RATES: NON-NUMERIC SUPPLEMENTAL DISABILITY RATE
01-089   INVALID SUPPLEMENTAL DISABILITY MAXIMUM SALARY BASE VALUE
01-657   BENEFITS RATES:INVALID LINE NUMBER FOR SUPPL DISABILITY RATES
08-188   SUPPLEMENTAL LIFE INS DATA IS INCONSISTENT WITH ASSIGNED BELI
08-189   INELIGIBLE FOR SUPPL DISABILITY DUE TO BELI - WILL BE BLOCKED
12-021   INELIGIBLE FOR SUPPL DISAB DUE TO BELI - ADD/CHANGE BLOCKED
12-022   EMPLOYEE DE-ENROLLED FROM SUPPLEMENTAL DISABILITY
13-020   SUPPL DISABILITY ENROLLMENT BLOCKED DUE TO BELI INELIGIBILITY
13-047   SUPPLEMENTAL DISABILITY ENROLLMENT BLOCKED - ALREADY ENROLLED
57-030   CALCULATED SUPPL DISABILITY BASE IS ZERO, PRIOR VALUE RETAINED
```

Life Insurance Messages

Current messages

IV-024 GLI MAXIMUM SALARY NOT AVAILABLE FROM BRL
 RC-056 INVALID LIFE INSURANCE PLAN CODE ON TRANSACTION INPUT
 RC-057 INVALID LIFE INSURANCE SALARY BASE ON TRANSACTION INPUT
 08-087 LIFE INSURANCE PLAN INFORMATION INCOMPLETE
 08-088 EMPLOYEE-PAID LIFE INS DATA IS INCONSISTENT WITH ASSIGNED BELI
 12-030 EMPLOYEE DE-ENROLLED FROM EMPLOYEE-PAID LIFE INSURANCE BENEFITS
 12-319 INELIGIBLE FOR LIFE INSURANCE DUE TO BELI - ADD/CHANGE BLOCKED
 13-021 EMPLOYEE PAID LIFE ENROLLMENT BLOCKED DUE TO BELI INELIGIBILITY
 13-048 LIFE INSURANCE ENROLLMENT BLOCKED - ALREADY ENROLLED

Revised Text

IV-024 SUPPLEMENTAL LIFE MAXIMUM SALARY NOT AVAILABLE FROM BRL
 RC-056 INVALID SUPPLEMENTAL LIFE PLAN CODE ON TRANSACTION INPUT
 RC-057 INVALID SUPPLEMENTAL LIFE SALARY BASE ON TRANSACTION INPUT
 08-087 SUPPLEMENTAL LIFE PLAN INFORMATION INCOMPLETE
 08-088 SUPPLEMENTAL LIFE INS DATA IS INCONSISTENT WITH ASSIGNED BELI
 12-030 EMPLOYEE DE-ENROLLED FROM SUPPLEMENTAL LIFE INSURANCE BENEFITS
 12-319 INELIGIBLE FOR SUPPLEMENTAL LIFE DUE TO BELI - ADD/CHANGE BLOCKED
 13-021 SUPPLEMENTAL LIFE ENROLLMENT BLOCKED DUE TO BELI INELIGIBILITY
 13-048 SUPPLEMENTAL LIFE ENROLLMENT BLOCKED - ALREADY ENROLLED

Gross to Net Table (GTN)

Gross-to-Net descriptions on the GTN table have been changed to reflect new benefit descriptions.

GTN#	Current Description	Revised Description
050	LIFE INSUR	SUPPL LIFE
325	EMP PD DIS	SUPPL DIS

Data Element Table (DET)

Data element descriptions on the DET table have been changed to reflect new benefit descriptions.

Data Element No.	Current Description	Revised Description
0231-8	EPD WAIT PERIOD	DIS WAIT PERIOD
0232-9	EDP SALARY BASE	DIS SALARY BASE
0233-0	EPD COVRGE DATE	DIS COVRGE DATE
0330-0	UC-PAID LI COVG	BASIC LIFE
0451-8	UC LIFE COV DAT	BASIC LI COV DT
0453-0	UC DISAB COV DT	STD COV DATE

Code Translation Table (CTT)

Code translations have been changed to reflect new benefit names, and BELLI_IND (EDB0360).

Data Element	Code Value	Current Code Translation	Transaction Length	New Translation
GTNLBL	020	Univ.Paid Disability	24	Short Term Disability
GTNLBL	050	Life Insurance	24	Supplemental Life
GTNLBL	325	Employee Paid Disability	24	Supplemental Disability
EDB0360	1	Career Benefits	23	Full Benefits
EDB0360	1	Career Benefits	18	Full Benefits
EDB0360	2	Limited Career Benefits	23	Mid-Level Benefits
EDB0360	2	Ltd. Career (12+)	18	Mid-Level (<12)
EDB0360	3	Limited Career Benefits	23	Mid-Level Benefits
EDB0360	3	Ltd.Career (<12)	18	Mid-Level(<12)

Forms

UPAY640A (Payroll Maintenance Worksheet-1) – on the DE transaction entry, reference is made to “EPD Salary”. This will be changed to “Supp Dis Sal”.

CICS HELP

ONLINE HELP

The CICS field HELP entries for EDB 0123, EDB 0231, EDB 0232, EDB0233, EDB0234, EDB 0275, EDB0276, EDB 0277, EDB 0330, EDB0360, EDB0451, and EDB0453 will be changed to reflect the new benefit name changes.

The CICS screen HELP entries for EDBHIINP, EDBHIINS, EDB0123G, EDB0282G, and HDBHXBN1 will be changed to reflect the new benefit name changes.

The revised HELP text is grouped into Attachment “A” of this Detail Design.
 The revised screens are grouped into Attachment “B” of this Detail Design.
 PAN is shown in Attachment “C” of this Detail Design.
 IDOC is shown in Attachment “D” of this Detail Design.

Attachment "A"

Revised CICS HELP text (Screen Level)

Changed text is underlined.

(General guide: "Career Benefit" is now "Full Benefit". "Employee-Paid" is now "Supplemental", etc.)

EDBHIINP TITLE= Help, EDB Insurance

Translations for highly abbreviated fields appear below:

BRSC -- Benefits Rate Selection Code

Supp Dis -- Supplemental Disability Insurance

waiting period-EDB

Qual -- Primary BELI Status Qualification Code

Ret -- Retirement System Code

STD -- Short Term Disability Insurance Code

Cov -- Coverage

EDBHIINS TITLE=Help EDB Insurance -Dept

BRSC -- Benefits Rate Selection Code

Supp Dis -- Supplemental Disability Insurance

waiting period-EDB

Qual -- Primary BELI Status Qualification Code

Ret -- Retirement System Code

STD -- Short Term Disability Insurance Code

EDB0123G ,TITLE=Short Term Dis. Supp Dis.

Description: This group field contains the following data elements:

@1-#0123 - Short Term Disability Insurance
Code

@2-#0231 - Supplemental Disability Insurance
Waiting Period

EDB0282G,TITLE=Coverage Effective Date

may appear for five separate data elements:

@1 - #0282 -- AD & D Coverage Effective Date

@2 - #0233 -- Supplemental Disability Coverage

Effective Date

@3 - #0277 -- Supplemental Live Insurance Coverage

Effective Date

@4 - #0188 -- Dependent Life Coverage Effective Date

@5 - #0451 -- Basic Life Insurance Coverage

Effective Date

HDBHXBN1,TITLE=Benefits Data-1

The following highly abbreviated terms are translated below:

BELI = Benefits Eligibility Indicator

STD = Supplemental Temporary Disability

ADD = Accidental Death & Dismemberment

Attachment "A" (continued)

Begin listing FIELD LEVEL HELP

Changed text is underlined.

EDB0123 TITLE=SHORT TERM DISABILITY INSURANC
Publ.: 05/14/01 "SHORT TERM DISABILITY INSURANCE CODE-EDB"
Code Interpr.: @A - Covered by Employee paid Short
Term Disability
@ (blank) - Not eligible for
coverage

EDB0231 TITLE=SUPPLEMENTAL DISABILITY INSURA
Publ.: 05/14/01 "SUPPLEMENTAL DISABILITY INSURANCE
WAITING PERIOD"

EDB0232,TITLE=SUPPLEMENTAL DISABILITY INSURA
Publ.: 05/14/01 "SUPPLEMENTAL DISABILITY INSURANCE SALARY
BASE-EDB"

Description: The full-time pay rate of covered
compensation, used in the computation of
Supplemental Disability premiums.

EDB0233,TITLE=SUPPLEMENTAL DISABILITY INSURA
Publ.: 07/01/92 "SUPPLEMENTAL DISABILITY INSURANCE COVERAGE
EFF DATE-EDB"

Description: The effective date of coverage for
Supplemental Disability Insurance.

EDB0234,P=3,TITLE=SUPPLEMENTAL DISABILITY DE-EN
#OPTIONS TYPE=W,FOOTER=5
Publ.: 07/01/92 "SUPPLEMENTAL DISABILITY DE-ENROLLMENT IND"

Description: Code indicating that data base maintenance
is required to reflect the individual's
de-enrollment in Supplemental Disability (DIS) insuranc

Format: N/A

EDB0275,P=3,TITLE=SUPPLEMENTAL LIFE INSURANCE SA
Publ.: 05/14/01 "SUPPLEMENTAL LIFE INSURANCE SALARY
BASE-EDB"

Description: The salary base used to determine
Supplemental Life insurance coverage,
expressed in thousands of dollars.

The Supplemental Life Insurance Salary
Base is always zero if the Supplemental Life
Insurance Plan Code is blank (not enrolled)
or 'F' (flat-rated).

EDB0276,,TITLE=SUPPLEMENTAL LIFE INSURANCE
Publ.: 05/14/01 "SUPPLEMENTAL LIFE INSURANCE PLAN CODE-EDB"

EDB0277,TITLE=SUPPLEMENTAL LIFE INSURANCE CO
Publ.: 05/14/01 "SUPPLEMENTAL LIFE INSURANCE COVERAGE
EFFECTIVE DATE-EDB"

Description: The effective date of coverage for
Supplemental Life insurance.

EDB0330,,TITLE=BASIC LIFE INSURANCE COVERAGE
Publ.: 05/14/01 "BASIC LIFE INSURANCE COVERAGE UC-PAID
-EDB"

\$19,000 and entered as '019'. The Basic Life
Insurance Amount is always blank if

EDB0360,TITLE=BENEFITS ELIGIBILITY LEVEL IND

Code Interpr.: @1 - Full benefits eligibility.

@2 - Mid-level benefits
eligibility - not a member of
a retirement system and
appointment is for 12 months
or more

@3 - Mid-level benefits
eligibility - not a member of
a retirement system and
appointment is for less than
12 months

EDB0451,TITLE=BASIC LIFE INSURANCE COVERAGE

Publ.: 05/14/01 "BASIC LIFE INSURANCE COVERAGE EFFECTIVE
DATE"

Description: The effective date of coverage for the
employer paid Basic Life Insurance Plan.

EDB0453,TITLE=SHORT TERM DISABILITY INSURANC

Publ.: 05/14/01 "SHORT TERM DISABILITY INSURANCE PLAN
COVERAGE EFFECTIVE DATE"

Description: The effective date of coverage for the
employer paid Short Term Disability
Insurance Plan.

ATTACHMENT "B"
CICS Screen Changes

EINS Screen Changes

```

PPEINS0-E1281          EDB Entry/Update          01/16/01 13:38:00
01/09/01 14:10:09      Insurance Enrollment      Userid: PAYPCW
ID: 000050020 Name: PRESENT, MARCUS          SSN: 555-55-5020 Pri Pay: MO
Assigned BELI: 1   Derived BELI: 1   Effective Date: 020191
BELI Status Qualifiers: Primary:   Date:           Secondary:   Date:
CURRENT ENROLLMENTS
      Plan  Cov Eff Date End Date   Opt Out          BRSC
Medical
Dental    D1  U    010191
Vision    VI  U    010190
Legal     J1  U    010190
Future Enrollment Pending: NO
                                Cov Eff Date          BRSC
AD&D      Prin Sum: 085 Coverage : M    010190
Disability Wait Per:      Salary Base: 4117    010190
Supplemental Life : 1    Salary Base: 50     010190
Dependent Life Plan:
Basic Life      :      Salary Base: 050    020191
Insurance Reduction Code :
Next Func:      ID:           Name:           SSN:

====>
F:  1-Help          3-PrevMenu  4-Print      5-Update
F:                   9-Jump          12-Exit
  
```

ATTACHMENT "B"
CICS Screen Changes (Continued)

IINS Screen Changes

PPIINS0-I1311	EDB Inquiry		01/16/01 14:39:04			
01/16/01 14:30:11	Insurance - Departmental		Userid: PAYPCW			
ID: 000050020	Name: PRESENT, MARCUS		SSN: 555-55-5020			
Hm Dept: 804918	CHAN OFFICE		Emplmt Status: A Pri Pay: MO			
Asgn/Drv BELI: 1/1	Eff Dt: 02/01/91		Qual: /		Ret: U Ins Red: Age 1/1: 42	
Plan	Description	Cov	Contr	Empl Cost	BRSC	Eff Date End Date
Medical	OPT-OUT=X			0.00	0.00	
Dental	Delta Dental	SINGLE				01/01/91
Vision	Vision Care	SINGLE				01/01/90
Legal	Signature Legal	SINGLE		0.00	8.46	01/01/90
						Future Enrollment Pending: NO

Insurance Type	Cov	Sal Base	Empl Cost	BRSC	Eff Date	
Basic Life		050				
Exec Life						
Supplemental Life	1 X ANNUAL	050	5.05		01/01/90	
Dep Life	SPOUSE/DP		2.25		01/01/90	
STD/Suppl Dis	A / 007	04117	56.40		01/01/90	
AD&D	MODIFIED Prin Sum 085		0.00		01/01/90	
Next Func:	ID:	Name:			SSN:	
====>						
F: 1-Help	2-Browse	3-PrevMenu	4-Print			
F:		9-MainMenu		12-Exit		

ATTACHMENT "B"
CICS Screen Changes (Continued)

IINP Screen Changes

PPIINP0-1311		EDB Inquiry		01/16/01 15:05:06	
01/16/01 14:30:11		Insurance		Userid: PAYPCW	
ID: 000050020 Name: PRESENT, MARCUS		SSN: 555-55-5020			
Hm Dept: 804918 CHAN OFFICE		Emplmt Status: A Pri Pay: MO			
Asgn/Drv BELI: 1/1 Eff Dt: 02/01/91 Qual: /		Ret: U Ins Red: Age 1/1: 42			
Plan	Description	Cov	Contr	Empl Cost	BRSC Eff Date End Date
Medical	OPT-OUT=X			0.00 0.00	
Dental	Delta Dental	U			01/01/91
Vision	Vision Care	U			01/01/90
Legal	Signature Legal	U	0.00	8.46	01/01/90
Future Enrollment Pending: NO					

Insurance Type	Cov	Sal Base	Empl Cost	BRSC	Eff Date
Basic Life		050			
Exec Life					
Supplemental Life	1 X ANNUAL	050	5.05		01/01/90
Dep Life	SPOUSE/DP		2.25		01/01/90
STD/Suppl Dis	A / 007	04117	56.40		01/01/90
AD&D	MODIFIED Prin Sum 085		0.00		01/01/90
Next Func:	ID:	Name:			SSN:
====>					
F:	1-Help	2-Browse	3-PrevMenu	4-Print	
F:			9-MainMenu		12-Exit

ATTACHMENT "B"
CICS Screen Changes (Continued)

IBN1 Screen Changes

```
PPIBN10-I0944          History Inquiry          01/16/01 14:50:52
07/16/96 14:24:00      Benefits Data 1          Userid:  PAYPCW
ID: 000050020 Name: ABSENT,MARCUS          SSN: 555-55-5020
Incorrect Flag:

BELI-Assigned      : 1          ADD Coverage          : M
BELI-Derived       : 1          ADD Eff Date          : 01/01/1990
BELI Eff Date      : 02/01/1991  ADD Principal         : 085
BELI Change Date   : 01/93
BELI Conflict Dt   :              Suppl Disability      : 04117
                                   Suppl Disability Eff Date :
                                   Suppl Disability Wait Per :
Core Ben Cover     :
Ins Reduction      :
Auto/Home Deduct   :              Basic Life            : 050
STD Code           : A          Basic Life Ins Eff Date : 02/01/1991
STD Eff Date       : 02/01/1991

Next Func:         ID:           Name:           SSN:
Date:             View incorrect records?

===>
F:  1-Help        2-Browse        3-PrevMenu    4-Print
F:                               9-MainMenu   10-PrevRec
                                   12-Exit
```


Attachment "C "
PAN (continued)

Post Authorization Notification (PAN) Change

Hire/Rehire

-----< HIRE >-----
Employee Name: PAUL J JONES ID Number: 340000000
The following Hire has been recorded.
Hire Date: 07/01/00 Home Department: 804918 CHANCELLORS OFFICE
Student St: 1-Not Registered Units: 00.0 Citizen: U.S. Citizen
Exclusively Represented: No Next Rvw. Dt-Typ: - Prob. Per. End:
Retirement: UCRP FICA: OASDI/Medicare
BELI: 1-Full Benefits¹ BELI Eff. Date: 07/01/00
PIE End Date: 07/31/00

Appointed as:
10) 7276 PROGRAMMER/ANALYST II-SUPVR Dept: CHAN OFFICE FLSA: Non-Ex
Term of Service: 07/01/00 to Indefinite % Time: 1.00 Grade: TUC: 99 LV:
Personnel Program: Prof/Staff Appt Type: Career Basis: Paid Over:

11) Pay Category: REG-REGULAR \$5,323.00 Monthly Step:
at 100.00% Fixed Time, effective 07/01/00, with an end date of Indefinite
from account 3-404918- -19900- -1

¹ For BELI 1, print the literal "**Full Benefits**"
For BELI 2 print the literal "**Mid-Level (12+)**"
For BELI 3 print the literal "**Mid-Level (<12)**"
For BELI 4 and 5, no changes are requested

Attachment "D"
IDOC

Employee Document (IDOC) Change

Summary of UC Benefits Enrollment

PERSONAL INFORMATION

Your Employee Identification Number is: 000050002
Your Birthdate is: 03/02/20
We have as your Permanent Address:
1 WILCOX WAY
MARIN CA, 95813
Your citizenship status is: U.S. Citizen
Your Visa Type is: Your Work Permit End Date is:
You have chosen the following Withholding Allowances:
Federal Tax Status: Married 5
State Tax Status: Married 2
Additional State Allowances: 3
Your appointment has qualified you for:
University of California Retirement Plan
OASDI & Medicare
Full Benefits ²
Mid-Level Benefits ³
Core Benefits ← **No change** ("Core Benefits" prints when the BELI is 4)
No Benefits ← **No change** ("No Benefits" prints when the BELI is 5)

HEALTH AND WELFARE BENEFIT ENROLLMENT INFORMATION

You are enrolled in the following health and welfare plans:
* Kaiser North
Family Coverage
Coverage Effective date: 01/01/90
Your monthly cost for this coverage is: \$ 5.00
* Delta Dental
Two-Party Coverage
Coverage Effective date: 01/01/90
Your monthly cost for this coverage is: \$ 0.00
* Vision Services Plan
Two-Party Coverage
Coverage Effective date: 01/01/90
Your monthly cost for this coverage is: \$ 0.00
* Signature LegalCare
Family Coverage
Coverage Effective date: 01/01/90
Your monthly cost for this coverage is: \$ 10.45

² Print the literal "Full Benefits" when BELI is 1

³ Print the literal "Mid-Level Benefits" when BELI is 2 or 3

The following family members are enrolled:

Name No.	Birthdate	Sex	Relationship Social Sec.No.	Enrolled/Effective Date/End Date			
				Medical	Dental	Vision	Legal
S1 POWERS 01	02/02/42	Female	Spouse 543-76-8091	Yes 01/01/93	Yes 01/01/93	Yes 01/01/93	Yes 01/01/93
C1 POWERS 02	10/09/82	Female	Child 489-03-9281	Yes 02/01/00	No	No	Yes 03/02/93
C2 POWERS 03	12/28/51	Male	Child-Disabled 489-02-8048	Yes 02/01/00	No	No	No

(It is your responsibility to ensure that all family members meet UC eligibility requirements. Contact your campus Benefit Representative for more information.)

Additionally, you are enrolled in the following:

- * Accidental Death & Dismemberment Insurance
 Your coverage type is: Modified Family Plan
 Amount of Coverage: \$ 200,000.00
 Coverage Effective Date: 01/01/90
 Your monthly cost for this coverage is: \$ 3.40
- * Short Term Disability Insurance ⁴
- * Supplemental Disability Insurance ⁵
 Waiting period: 7 days
 Salary Base: \$ 7143.00
 Coverage Effective date: 04/01/92
 Your monthly cost for this coverage is: \$ 523.92
- * Basic Life Insurance ⁶ in the amount of \$ 50,000.00
- * Supplemental Life Insurance ⁷
 Plan Type: 3 times your most recent January 1 Annual Salary Base
 Annual Salary Base: \$ 117,000.00
 Coverage Effective Date: 01/09/00
 Your monthly cost for this coverage is: \$ 684.45

You are participating in the Executive Life Insurance Plan for 2 times your most recent January 1 annual salary.

You are participating in the Tax Savings on Insurance Premium (TIP) Plan. Any premiums you pay as an employee for health will be on a pre-tax basis.

⁴ Print the literal "Short Term Disability Insurance" instead of "University-Paid Disability"

⁵ Print the literal "Supplemental Disability Insurance" instead of "Employee Paid Disability Plan"

⁶ Print the literal "Basic Life Insurance" instead of "University-Paid Life Insurance"

⁷ Print the literal "Supplemental Life Insurance" instead of "Employee Paid Life Insurance Plan"

Attachment "D" IDOC (continued)
Employee Documents (IDOC) Change
Summary of Initial Hire or Rehire

APPOINTMENT INFORMATION

You have been appointed as:

(1) CHANCELLOR Title Code: Grade: C
Department: CHANCELLORS OFFICE
Term of Service: 07/01/96 to Indefinite
Percent of Time: 100 FLSA: Exempt
Personnel Program: Mgmt/Sr Prof Appointment Type: Regular/Career

(2) PROFESSOR - 9-MONTHS Title Code: Step:
UNIVERSITY OF CALIFORNIA Print Date: 01/17/01
PAYROLL/PERSONNEL SYSTEM Page 2 of 2
Summary of Initial Hire or Rehire
Department: CHANCELLORS OFFICE
Term of Service: 07/01/89 to Tenure
Percent of Time: FLSA: Exempt
Personnel Program: Academic Appointment Type: Academic

Your position is covered by the following union contract(s):

- (1) none
- (2) none

Your appointment has qualified you for:

University of California Retirement Plan
OASDI & Medicare
Full Benefits ⁸
Mid-Level Benefits ⁹
Core Benefits ← **No change** ("Core Benefits" prints when the BELI is 4)
No Benefits ← **No change** ("No Benefits" prints when the BELI is 5)

Your appointment(s) allows you to accrue the following:

- (1) Vacation: Yes *Rate: 16.00 hrs/month
Sick Leave: Yes *Rate: 8.00 hrs/month
Sabbatical Credit: Yes
- (2) Vacation: No
Sick Leave: No
Sabbatical Credit: Yes

*Note: Accrual rate shown is the approximate maximum that may be earned for 100 percent time per month or quadriweekly cycle. Your accrual will vary according to your hours worked. You must be on pay status at least one-half of the working hours in the month or quadriweekly cycle to be eligible to earn vacation or sick leave for that period.

At this time, you are scheduled to receive a Salary Review on 07/93 for Merit

⁸ Print the literal "Full Benefits" when BELI is 1

⁹ Print the literal "Mid-Level Benefits" when BELI is 2 or 3