Test Plan
RELEASE 1307

HIPAA (Health Insurance Portability And Accountability Act) Follow-up Changes

October 5, 2000

Information Systems & Computing
Office of the President
University of California
Testing Overview

This test plan addresses the test runs and cases constructed to verify the correct installation of Release 1307. The test is made up of the following components:

1. Control Table Data Base (CTL) Initial Load (LOADCTL)
2. Employee Data Base (EDB) Initial Load (LOADEDDB)
3. One-time Re-derive Plan Coverage Levels (PPOT1307)
4. EDB File Maintenance (EDBMAINT)
5. Daily EDB Maintenance (DAILYMT)
6. Benefits Eligibility Level Control Reporting (RUN650)
7. Interim Carrier Reporting (RUN567)
8. EDB On-line Testing
CONTROL TABLE (CTL) INITIAL LOAD (LOADCTL)

**Description**

This job loads the DB2 CTL database.

**Verification**

Ensure that the DB2 CTL has been successfully restored by verifying normal completion of the job and ensuring that all tables have been successfully loaded into the database. The members in PDS UDB2CTL already reflects the updates applied to the DB2 Control tables.
EMPLOYEE DATA BASE (EDB) INITIAL LOAD (LOADEDDB)

Description

This job loads the EDB database.

Verification

In order to assure successful completion of this job, verify that the EDB has been successfully restored by verifying normal completion of the job and ensuring that all tables have been successfully loaded into the data base.
Onetime Re-Derive Plan Coverage Levels (PPOT1307)

Description

This onetime job re-derives the Plan Coverage Levels if necessary. Only Dependent records containing a Plan Coverage End Date of either 06/30/00 or 07/31/00 are selected for processing. Further processing depends on the employee’s Plan Code and Plan Coverage Effective Date and/or Plan Coverage End Date. Refer to the requirements in Service Request 15201.

Verification

Verify the data for the following employees using the PPP2501 report that is written after the one-time process has executed.

POT13071 Report

Verify that the control totals on the one-time report are the same as the control totals sent with this release.

PPP2501 Report

Selection criteria:

1. Plan Code is not 'XX', 'XC' or 'XD' or blank, and
2. Plan Coverage Effective Date is equal to or earlier than the Dependent Coverage End Date and
3. Plan Coverage End Date is later than the corresponding Dependent Coverage End Date

An employee’s Benefit record is selected, and the appropriate Plan Coverage Level is updated if conditions 1 and 2 and 3 (Plan Coverage End Date exists) must all be true, or if no Plan Coverage End Date exists, then conditions 1 and 2 must all be true.

If the derived Plan Coverage Level is different from the current Plan Coverage Level, the PCED will be set equal to the Dependent Coverage End Date (plus one day). However, if one dependent has a Coverage End Date of 07/31/00 and a second dependent has a Coverage End Date of 06/30/00, the PCED should be set equal to the latest Dependent
Coverage End Date (plus one day). In this example, the latest Dependent Coverage End Date is 07/31/00, and the derived PCED should be set equal to 08/01/00.

Verify that the appropriate plan coverage levels are updated for each of the following employees:

• 000000001

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>PH</td>
<td>06/30/00</td>
<td>10/31/00</td>
<td>06/30/00</td>
<td>01</td>
<td>Yes</td>
<td>Yes (U)</td>
</tr>
<tr>
<td>D1</td>
<td>07/01/00</td>
<td></td>
<td>06/30/00</td>
<td>01</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

New PCED of 07/01/00 for medical.

Corresponding entry (Benefit Type = M, Plan Coverage Effective Date = 06/30/00) in the FCB Table should have a Coverage End Date of 06/30/00. New entry for medical in FCB Table should have PCED of 07/01/00, coverage end date of 10/31/00, and an Enrollment Reason Code of ‘CV’.

• 000000087

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>XD (Med)</td>
<td>05/01/00</td>
<td>11/30/00</td>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>XD (Den)</td>
<td>05/01/00</td>
<td>11/30/00</td>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>XD (Vis)</td>
<td>05/01/00</td>
<td>11/30/00</td>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

• 000050002

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>KN</td>
<td>01/01/90</td>
<td></td>
<td></td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>
### Plan Code Table

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1</td>
<td>01/01/90</td>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>VI</td>
<td>01/01/90</td>
<td></td>
<td></td>
<td></td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>J1</td>
<td>07/01/00</td>
<td>06/30/00</td>
<td>02</td>
<td></td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

- **000050009**

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>KN</td>
<td>06/30/00</td>
<td>01/01/01</td>
<td>01</td>
<td></td>
<td>Yes</td>
<td>Yes (UU)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/30/00</td>
<td>03</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D1</td>
<td>06/30/00</td>
<td>06/30/00</td>
<td>01</td>
<td></td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/30/00</td>
<td>03</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI</td>
<td>01/01/90</td>
<td>01/01/01</td>
<td>01</td>
<td></td>
<td>Yes</td>
<td>Yes (UU)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/30/00</td>
<td>03</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>J1</td>
<td>01/01/90</td>
<td>01/01/01</td>
<td>01</td>
<td></td>
<td>Yes</td>
<td>No (Coverage Level already at UUU)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/30/00</td>
<td>03</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

New PCED of 07/01/00 for medical and vision.

Corresponding entry (Benefit Type = M, Plan Coverage Effective Date = 06/30/00) in the FCB Table should have a Coverage End Date of 06/30/00. Corresponding entry (Benefit Type = V, Plan Coverage Effective Date = 01/01/90) in the FCB Table should have a Coverage End Date of 06/30/00. New entry for medical in FCB Table should have PCED of 07/01/00 with an Enrollment Reason Code of ‘CV’. New entry for vision in FCB Table should have PCED of 07/01/00, and an Enrollment Reason Code of ‘CV’.

- **000050012**

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>KN</td>
<td>01/01/90</td>
<td>11/30/00</td>
<td>07/31/00</td>
<td>01</td>
<td>Yes</td>
<td>Yes (U)</td>
</tr>
</tbody>
</table>
Final  
October 5, 2000

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1</td>
<td>01/01/90</td>
<td>07/31/00</td>
<td>07/31/00</td>
<td>01</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>VI</td>
<td>01/01/90</td>
<td>07/01/00</td>
<td>07/31/00</td>
<td>01</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>J1</td>
<td>01/01/90</td>
<td>07/31/00</td>
<td>06/30/00</td>
<td>01</td>
<td>Yes</td>
<td>Yes (U)</td>
</tr>
</tbody>
</table>

New PCED of 08/01/00 for medical and legal.

Corresponding entry (Benefit Type = M, Plan Coverage Effective Date = 01/01/90) in the FCB Table should have a Coverage End Date of 07/31/00. Corresponding entry (Benefit Type = J, Plan Coverage Effective Date = 01/01/90) in the FCB Table should have a Coverage End Date of 07/31/00. New entry for medical in FCB Table should have PCED of 08/01/00, coverage end date of 11/30/00, and an Enrollment Reason Code of ‘CV’. New entry for legal in FCB Table should have PCED of 08/01/00, and an Enrollment Reason Code of ‘CV’.

- 000050024

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>KN</td>
<td>01/01/90</td>
<td>01/01/01</td>
<td></td>
<td>02</td>
<td>Yes</td>
<td>Yes (UU)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>01/01/01</td>
<td></td>
<td>03</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>07/31/00</td>
<td></td>
<td>04</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D3</td>
<td>01/01/90</td>
<td>01/01/01</td>
<td></td>
<td>02</td>
<td>Yes</td>
<td>Yes (UU)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>01/01/01</td>
<td></td>
<td>03</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>07/31/00</td>
<td></td>
<td>04</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI</td>
<td>01/01/90</td>
<td>01/01/01</td>
<td></td>
<td>02</td>
<td>Yes</td>
<td>Yes (UU)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>07/31/00</td>
<td></td>
<td>03</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>07/31/00</td>
<td></td>
<td>04</td>
<td></td>
<td></td>
</tr>
<tr>
<td>J1</td>
<td>01/01/90</td>
<td>01/01/01</td>
<td></td>
<td>01</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>01/01/01</td>
<td></td>
<td>02</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

New PCED of 08/01/00 for medical, dental, and vision.
Corresponding entry (Benefit Type = M, Plan Coverage Effective Date = 01/01/90) in the FCB Table should have a Coverage End Date of 07/31/00. Corresponding entry (Benefit Type = D, Plan Coverage Effective Date = 01/01/90) in the FCB Table should have a Coverage End Date of 07/31/00. Corresponding entry (Benefit Type = V, Plan Coverage Effective Date = 01/01/90) in the FCB Table should have a Coverage End Date of 07/31/00. New entry for medical in FCB Table should have PCED of 08/01/00, and an Enrollment Reason Code of ‘CV’. New entry for dental in FCB Table should have PCED of 08/01/00, and an Enrollment Reason Code of ‘CV’. New entry for vision in FCB Table should have PCED of 08/01/00, and an Enrollment Reason Code of ‘CV’.

- 000050050

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>KN</td>
<td>01/01/90</td>
<td>06/30/00</td>
<td>01</td>
<td>Yes</td>
<td>Yes (U)</td>
<td></td>
</tr>
<tr>
<td>D1</td>
<td>01/01/90</td>
<td>06/30/00</td>
<td>01</td>
<td>Yes</td>
<td>Yes (U)</td>
<td></td>
</tr>
<tr>
<td>VI</td>
<td>01/01/90</td>
<td>06/30/00</td>
<td>01</td>
<td>Yes</td>
<td>Yes (U)</td>
<td></td>
</tr>
<tr>
<td>J1</td>
<td>01/01/90</td>
<td>06/30/00</td>
<td>01</td>
<td>Yes</td>
<td>Yes (U)</td>
<td></td>
</tr>
</tbody>
</table>

New PCED of 07/01/00 for medical, dental, and vision. New PCED of 08/01/00 for legal.

Corresponding entry (Benefit Type = M, Plan Coverage Effective Date = 01/01/90) in the FCB Table should have a Coverage End Date of 06/30/00. Corresponding entry (Benefit Type = D, Plan Coverage Effective Date = 01/01/90) in the FCB Table should have a Coverage End Date of 06/30/00. Corresponding entry (Benefit Type = V, Plan Coverage Effective Date = 01/01/90) in the FCB Table should have a Coverage End Date of 06/30/00. New entry for medical in FCB Table should have PCED of 07/01/00 with an Enrollment Reason Code of ‘CV’. New entry for dental in FCB Table should have PCED of 07/01/00, and an Enrollment Reason Code of ‘CV’. New entry for vision in FCB Table should have PCED of 07/01/00. New entry for legal in FCB Table should have PCED of 08/01/00, and an Enrollment Reason Code of ‘CV’.

- 999888012
New PCED of 07/01/00 for vision and legal.

Corresponding entry (Benefit Type = V, Plan Coverage Effective Date = 04/01/97) in the FCB Table should have a Coverage End Date of 06/30/00. Corresponding entry (Benefit Type = J, Plan Coverage Effective Date = 04/01/97) in the FCB Table should have a Coverage End Date of 06/30/00. New entry for vision in FCB Table should have PCED of 07/01/00, and an Enrollment Reason Code of ‘CV’. New entry for legal in FCB Table should have PCED of 07/01/00, and an Enrollment Reason Code of ‘CV’.

- 999888013

<table>
<thead>
<tr>
<th>Plan Code</th>
<th>Plan Coverage Effective Date (PCED)</th>
<th>Plan Coverage End Date</th>
<th>Dependent Coverage End Date</th>
<th>Dependent Number</th>
<th>Plan Code Selected?</th>
<th>Coverage Level Updated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>KN</td>
<td>04/01/97</td>
<td>01/01/01</td>
<td>01</td>
<td>Yes</td>
<td>No (Coverage Level already at UUU)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>06/30/00</td>
<td>02</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>07/31/00</td>
<td>03</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>01/01/01</td>
<td>04</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D3</td>
<td>04/01/97</td>
<td>01/01/01</td>
<td>01</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>VI</td>
<td>04/01/97</td>
<td>07/31/00</td>
<td>03</td>
<td>Yes</td>
<td>Yes (U)</td>
<td></td>
</tr>
<tr>
<td>J1</td>
<td>04/01/97</td>
<td>06/30/00</td>
<td>03</td>
<td>Yes</td>
<td>Yes (U)</td>
<td></td>
</tr>
</tbody>
</table>

New PCED of 08/01/00 for vision. New PCED of 07/01/00 for legal.

Corresponding entry (Benefit Type = V, Plan Coverage Effective Date = 04/01/97) in the FCB Table should have a Coverage End Date of 07/31/00. Corresponding entry (Benefit Type = J, Plan Coverage Effective Date = 04/01/97) in the FCB Table should have a Coverage End Date of 06/30/00. New entry for vision in FCB Table should have PCED of 08/01/00, and an Enrollment Reason Code of ‘CV’. New entry for
legal in FCB Table should have PCED of 07/01/00, and an Enrollment Reason Code of ‘CV’.
EDB File Maintenance (EDBMAINT)

Description

This job processes update transactions.

Verification

Verify the data for the following employees using the PPP2501 report:

- **Setting of Plan Coverage End Dates for a BELI value of ‘?’**

  Currently, the SCR Current Date is set at 10/01/00 for this release.

  *The following tests are date sensitive. Campuses should look at the input A2 type transactions provided with this release and modify the separation date accordingly.*

  When an employee is separated retroactively (where Separation Date (EDB 0140) is prior to the last day of the actual current month) using the unmodified version of module PPEI340, the separated employee’s BELI (EDB 0360) is set equal to a value of ‘?’, and the Plan Coverage End Date for each appropriate plan is set equal to the last day of the actual current month. This is incorrect, because the separated employee is entitled to another month of benefits coverage.

  Using the modified version of PPEI340, the following test cases are used to verify that the Plan Coverage End Dates are set to the last day of the month following the employee’s separation month. Specifically, module PPEI340 has been changed such that the plan coverage end dates are not derived when the employee’s BELI is equal to a value of ‘?’. However, the EDB File Maintenance Process will trigger the subsequent unmodified module PPEI330 which **will derive** the correct plan coverage end dates for separated employees.

**Employee ID 000050001**

*Since the Separation Date is prior to the SCR Current Date of 10/01/00, existing module PPEM111 derives the BELI value of ‘?’. The BELI value of ‘?’ causes existing module PPEI340 to bypass the Plan Coverage End Date derivation. Finally, PPEI330 derives the appropriate Plan Coverage End Dates for the separated employee.*
Separation Date (EDB 0140) = ‘09/30/00’
Assigned BELI (EDB 0360) = ‘?’
Medical Plan Coverage End Date (EDB 0300) = 10/31/00
Dental Plan Coverage End Date (EDB 0271) = 10/31/00
Vision Plan Coverage End Date (EB 0346) = 10/31/00
Legal Coverage End Date (EB 0380) = 10/31/00

**Employee ID 000050003**

*Since the Separation Date is prior to the SCR Current Date of 10/01/00, existing module PPEM111 derives the BELI value of ‘?’*. The BELI value of ‘?’ causes existing module PPEI340 to bypass the Plan Coverage End Date derivations. Finally, PPEI330 derives the appropriate Plan Coverage End Dates for separated employees.

Separation Date (EDB 0140) = ‘09/01/00’
Assigned BELI (EDB 0360) = ‘?’
Medical Plan Coverage End Date (EDB 0300) = 10/31/00
Dental Plan Coverage End Date (EDB 0271) = 10/31/00
Vision Plan Coverage End Date (EB 0346) = 10/31/00
Legal Coverage End Date (EB 0380) = 10/31/00

**Employee ID 000050006**

*Since the Separation Date is later than the SCR Current Date of 10/01/00, existing module PPEM111 bypasses the BELI derivation logic. Module PPEI340 is not triggered, because the BELI value did not change*. Finally, PPEI330 derives the appropriate Plan Coverage End Dates for separated employees.

Separation Date (EDB 0140) = ‘11/30/00’
Assigned BELI (EDB 0360) = ‘1’
Medical Plan Coverage End Date (EDB 0300) = 12/31/00
Dental Plan Coverage End Date (EDB 0271) = 12/31/00
Vision Plan Coverage End Date (EB 0346) = 12/31/00
Legal Coverage End Date (EB 0380) = 12/31/00

- **BELI Edits that block changes to Plan Coverage End Dates**

If the modified versions of PPEC133, PPEC134, PPEC135, PPEC102, PPEC115, and PPEC120 were executed, the system should allow the user to update the Plan Coverage End Dates, even though the employee is no longer eligible for benefits coverage.
Changes to the Plan Coverage End Dates should be allowed when:

- An employee is not eligible for medical coverage, and an attempt to change the Medical Coverage End Date, and leaving the Medical Plan Code and the Medical Plan Coverage Effective Date unchanged, the paired messages 08-005 and 12-311 should not be issued.

- An employee is not eligible for dental coverage, and an attempt to change the Dental Coverage End Date, and leaving the Dental Plan Code and Dental Coverage Effective Date unchanged, the paired messages 08-142 and 12-322 should not be issued.

- An employee is not eligible for vision coverage, and an attempt to change the Vision Coverage End Date, and leaving the Vision Plan Code and Vision Coverage Effective Date unchanged, paired message 08-166 and 12-325 should not be issued.

If the unmodified versions of PPEC133, PPEC134, PPEC135, PPEC102, PPEC115, and PPEC120 were executed, the system would issue the appropriate paired messages and the changes to the Plan Coverage End Dates would be blocked.

Note that Release 1300 (Service Request 17358) made changes to the EDB File Maintenance Process, such that an employee who is already enrolled in legal may retain legal insurance coverage when his BELI status changes. These requirements asked that the PPS be modified to not derive a Legal Coverage End Date (EDB 0380) when the Assigned BELI (EDB 0360) changes from a '1' to any other value.

**Employee ID 999888002**

An X1 transaction was processed to change the employee’s Medical Coverage End Date from 09/30/00 to 12/31/00.

Verify on the PPP2501 report that the Medical Coverage End Date (EDB 0300) has been updated to 12/31/00.

Verify on the PPP1001 report that messages 08-005 and 12-311 are not issued for this employee.

**Employee ID 999888003**

An X1 transaction was processed to change the employee’s Dental Coverage End Date from 09/30/00 to 11/30/00.
Verify on the PPP2501 report that the Dental Coverage End Date (EDB 0271) has been updated to 11/30/00.

Verify on the PPP1001 report that messages 08-142 and 12-322 are not issued for this employee.

**Employee ID 999888004**

An X1 transaction was processed to change the employee’s Vision Coverage End Date from 09/30/00 to 10/31/00.

Verify on the PPP2501 report that the Vision Coverage End Date (EDB 0346) has been updated to 10/30/00.

Verify on the PPP1001 report that messages 08-166 and 12-325 are not issued for this employee.

- **PPA (Pending Premium Activity) Row Coverage Code Update**

When an employee is initially hired and has not yet selected benefits, the system automatically enrolls the employee in the default plan codes DM, DD, and DD. In addition, the PIE (Period of Initial Eligibility) Date is derived from the employee’s Hire Date (EDDB 0113). When the compute is run with a pay period end date that is within the employee’s PIE Date, the appropriate PPA (Pending Premium Activity) set of data is written to the PPPPPA Table.

**Employee ID 999888106**

Note that the employee’s PIE Date is equal to ‘10/19/00’.

Prior to running this particular EDB File Maintenance Process, the newly hired employee was enrolled into the new default plan codes of DM, DD, and DV, with single coverage in each of the plan codes, and no PPA data in the PPPPPA Table. A Compute was run with a pay period end date of 09/30/00, which wrote the required PPA data in the PPPPPA Table. Since the actual current date has not exceeded the employee’s PIE Date, an EDB File Maintenance Process was run to enroll the employee into medical plan KN, dental plan D3, and vision plan VI.

Prior to running this particular EDB File Maintenance Process, the employee’s Medical Plan Code is equal to a value of KN with single coverage, Dental Plan Code is equal to a value of D3 with single coverage, and the Vision Plan Code is equal to a value of VI with single coverage.
To verify that the plan coverage levels in the PPA entries are correctly updated, a DM type transaction is processed to enroll the employee’s spouse into the medical, dental, and vision plans.

**Expected Result:**

With the correct implied triggers set for data elements 0293, 0273, 0348, and 0354 in the Data Element Table, the coverage levels in the PPA entries have been updated from single (U) coverage to two-party (UU) coverage for medical, dental, and vision at the end of the File Maintenance Process. Verify that the plan coverage level for medical, dental, and vision in the PPA data have changed via the PPP2501 report.

If the above implied triggers were not set in the Data Element Table, the coverage levels in the PPA entries would have remained at single (U) coverage for medical, dental, and vision.
Special Daily EDB Maintenance (DAILYMT)

Description

The Daily EDB Maintenance process develops a date range that includes the dates from the time it was last run to the actual current date.

Verification

PPP2501 Report (*REPORTS PDS, member P2501C2*)

If the unmodified version of PPEI350 is run, the original Future Enrollment Reason Code would be overlaid with an incorrect value of ‘UN’.

Verify that the following future enrollment data have been updated for Employee ID 999888001. Most importantly, verify that the Future Enrollment Reason Code is correctly updated on the EDB.

- Future Medical Data
  
  EDB 0694 – Future Benefit Type of ‘M’
  EDB 0695 – Future Medical Coverage Effective Date of ‘10/15/00’
  EDB 0696 – Future Medical Enrollment Reason Code of ‘OR’
  EDB 0697 – Future Medical Plan Code of ‘PH’

- Future Dental Data
  
  EDB 0694 – Future Benefit Type of ‘D’
  EDB 0695 – Future Dental Coverage Effective Date of ‘10/15/00’
  EDB 0696 – Future Dental Enrollment Reason Code of ‘ER’
  EDB 0697 – Future Dental Plan Code of ‘D3’

- Future Vision Data
  
  EDB 0694 – Future Benefit Type of ‘V’
  EDB 0695 – Future Vision Coverage Effective Date of ‘11/01/00’
  EDB 0696 – Future Vision Enrollment Reason Code of ‘LV’
  EDB 0697 - Future Vision Plan Code of ‘XX’

- Future Legal Data
EDB 0694 – Future Benefit Type of ‘J’
EDB 0695 – Future Legal Coverage Effective Date of ‘12/01/00’
EDB 0696 – Future Legal Enrollment Reason Code of ‘PI’
EDB 0697 - Future Legal Plan Code of ‘XC’
Benefits Eligibility Level Control Reporting (RUN650)

Description

This job produces the Benefits Eligibility level Control Reports which indicate whether or not an employee is enrolled in a particular benefit by displaying a ‘Y’ in the column for that benefit if enrolled, and leaving the column blank if not enrolled.

Verification

The SCR Current Date is set to 10/01/00.

Verify the benefits enrollment indicators on the various reports for the following Employee IDs.

If the employee’s plan contains a plan coverage end date, the plan coverage end date is compared against the SCR Current Date. If the plan coverage end date is prior to the SCR Current Date, the employee is not enrolled in the plan. Otherwise the employee is enrolled in the plan.

PPP6502 Report (REPORT PDS, member PPP6502)

Listed under (EMPLOYEES OUT OF COMPLIANCE AS OF: 03/93)

- EMPLOYEE ID 000050070 – Medical Plan Code is blank, Dental Plan Code is blank, Vision Plan Code is blank, and Legal Plan Code is blank on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Listed under (EMPLOYEES OUT OF COMPLIANCE AS OF: 123/93)

- EMPLOYEE ID 000050047 – Medical Plan Code is blank, Dental Plan Code is blank, Vision Plan Code is blank, Legal Plan Code is ‘J1’ (no end date) on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Y</td>
</tr>
</tbody>
</table>
Listed under (EMPLOYEES OUT OF COMPLIANCE AS OF: 07/96)

• EMPLOYEE ID 999888010 – Medical Plan Code is ‘XD’, Dental Plan Code is blank, Vision Plan Code is blank, Legal Plan Code is blank on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Listed under (EMPLOYEES OUT OF COMPLIANCE AS OF: 02/99)

• EMPLOYEE ID 000050124 – Medical Plan Code is ‘PH’ (no end date), Dental Plan Code is blank, Vision Plan Code is blank, and Legal Plan Code is blank on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

• EMPLOYEE ID 000050130 – Medical Plan Code is ‘KN’ (no end date), Dental Plan Code is ‘D3’ (no end date), Vision Plan Code is ‘VI’ (no end date), and Legal Plan Code is ‘J1’ (no end date) on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

PPP6503 Report (REPORT PDS, member PPP6503)

Listed under Home Department 804918 Chancellors Office:

• EMPLOYEE ID 000050054 – Medical Plan Code is ‘KN’ with end date of 09/30/00, Dental Plan Code is ‘D1’ with end date of 09/30/00, Vision Plan Code is ‘VI’ with end date of 09/30/00, and Legal Plan Code is ‘J1’ with end date of 09/30/00 on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

• EMPLOYEE ID 000050072 – Medical Plan Code is ‘KN’ with end date of 10/01/00, Dental Plan Code is ‘D1’ with end date of 10/01/00, Vision Plan Code is ‘VI’ with end date of 10/01/00, and Legal Plan Code is ‘J1’ with end date of 10/01/00 on EDB.
• **EMPLOYEE ID 000050049** – Medical Plan Code is ‘KN’ with end date of 10/31/00, Dental Plan Code is ‘D1’ with end date of 10/31/00, Vision Plan Code is ‘VI’ with end date of 10/31/00, and Legal Plan Code is ‘J1’ with end date of 10/31/00 on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

Listed under Home Department 827701 Hospital Education:

• **EMPLOYEE ID 00005057** – Medical Plan Code is ‘XD’, Dental Plan Code is ‘D1’, Vision Plan Code is ‘VI’, and Legal Plan Code is ‘J1’ on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

• **EMPLOYEE ID 000050036** – Medical Plan Code is blank, Dental Plan Code is blank, Vision Plan Code is blank, and Legal Plan Code is ‘XC’ on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
</table>

• **EMPLOYEE ID 000050014** – Medical Plan Code is ‘XX’, Dental Plan Code is ‘XX’, Vision Plan Code is ‘XX’, and Legal Plan Code is blank on EDB.

<table>
<thead>
<tr>
<th>MED</th>
<th>DEN</th>
<th>VIS</th>
<th>LEGL</th>
</tr>
</thead>
</table>

**Employee File**

Verify that the correct benefits enrollment indicator value is set on the Employee File for each of the following Employees IDs:

**EMPLOYEE ID 000050014** – Medical Plan Code is ‘XX’, Dental Plan Code is ‘XX’, Vision Plan Code is ‘XX’, and Legal Plan Code is blank on EDB.
EMPLOYEE ID 000050036 – Medical Plan Code is blank, Dental Plan Code is blank, Vision Plan Code is blank, and Legal Plan Code is ‘XC’ on EDB.

EMPLOYEE ID 000050047 – Medical Plan Code is blank, Dental Plan Code is blank, Vision Plan Code is blank, Legal Plan Code is ‘J1’ (no end date) on EDB.

EMPLOYEE ID 000050049 – Medical Plan Code is ‘KN’ with end date of 10/31/00, Dental Plan Code is ‘D1’ with end date of 10/31/00, Vision Plan Code is ‘VI’ with end date of 10/31/00, and Legal Plan Code is ‘J1’ with end date of 10/31/00 on EDB.

EMPLOYEE ID 000050054 – Medical Plan Code is ‘KN’ with end date of 09/30/00, Dental Plan Code is ‘D1’ with end date of 09/30/00, Vision Plan Code is ‘VI’ with end date of 09/30/00, and Legal Plan Code is ‘J1’ with end date of 09/30/00 on EDB.

EMPLOYEE ID 00005057 – Medical Plan Code is ‘XD’, Dental Plan Code is ‘D1’, Vision Plan Code is ‘VI’, and Legal Plan Code is ‘J1’ on EDB.
EMPLOYEE ID 000050070 – Medical Plan Code is blank, Dental Plan Code is blank, Vision Plan Code is blank, and Legal Plan Code is blank on EDB.

EMPLOYEE ID 000050072 – Medical Plan Code is ‘KN’ with end date of 10/01/00, Dental Plan Code is ‘D1’ with end date of 10/01/00, Vision Plan Code is ‘VI’ with end date of 10/01/00, and Legal Plan Code is ‘J1’ with end date of 10/01/00 on EDB.

EMPLOYEE ID 000050124 – Medical Plan Code is ‘PH’ (no end date), Dental Plan Code is blank, Vision Plan Code is blank, and Legal Plan Code is blank on EDB.

EMPLOYEE ID 000050130 – Medical Plan Code is ‘KN’ (no end date), Dental Plan Code is ‘D3’ (no end date), Vision Plan Code is ‘VI’ (no end date), and Legal Plan Code is ‘J1’ (no end date) on EDB.

EMPLOYEE ID 999888010 – Medical Plan Code is ‘XD’, Dental Plan Code is blank, Vision Plan Code is blank, Legal Plan Code is blank on EDB.
<table>
<thead>
<tr>
<th>MED (Position 86)</th>
<th>DEN (Position 87)</th>
<th>VIS (Position 88)</th>
<th>LEGL (Position 89)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Interim Carrier Reporting (RUN567)

Description

This job produces an interim carrier change file from PPP567, and PPP568 uses the interim carrier change file as input to produce the Enrollment Update Report (PPP5681).

Verification

Program PPP567 has been modified to bypass processing of plan codes ‘XX’, ‘XC’, ‘XD’, ‘DM’, ‘DD’, and ‘DV’.

Enrollment Update Report (REPORTS PDS, member PPP5681)

The following employees have plan codes of ‘XX’, ‘XC’, ‘XD’, ‘DM’, ‘DD’, or ‘DV’ (Refer to the PPP2501 report for verification of medical, dental, vision, and legal plan data).


If the unmodified version of PPP567 is run, the Enrollment Update Report incorrectly displays employees with plan codes of ‘XX’, ‘XC’, ‘XD’, ‘DM’, ‘DD’, or ‘DV’.
EDB On-line Testing

EDB File Maintenance - Edits

1. Coverage End Dates for BELI of ‘?’

   For this test, the SCR Current Date must be set to the first of the month following the actual current month.

   Select an employee whose BELI (EDB 0360) is equal to a value of ‘1’ and is already enrolled in the medical, dental, vision, and legal plans. Using the ESEP screen, separate the employee with a separation Date that is prior to the SCR Current Date.

   For example, the SCR Current Date is set at 10/01/00 from Monthly Periodic Maintenance. The employee’s separation is processed on 09/30 (Actual Current Date), and a Separation Date (EDB 0140) of 09/15/00 is entered on the ESEP screen. Because the Separation Date is already achieved, the employee’s Employment Status (EDB 0144) is set to a value of ‘S’.

   Since the Separation Date is prior to the SCR Current Date, the employee’s BELI is changed to a value of ‘?’ . The expected Plan Coverage End Dates for medical, dental, vision, and legal should be set to the last day of the month following the month of separation. In this particular case, the derived Plan Coverage End Dates should be 10/31/00.

2. BELI eligibility edits that block changes to coverage end dates

   Select an employee whose BELI is equal to a value of ‘1’ and is already enrolled in the medical, dental, vision, and legal plans. Change the employee’s BELI from a ‘1’ to ‘5’. The system should derive a plan coverage end date for the medical, dental, vision, and legal plans equal to the last day of the actual current month. For example, if the actual date today is 09/22/00, the derived plan coverage end date would be 09/30/00.

   - Update Medical Plan Data

     With the BELI set at ‘5’, attempt to change the Medical Plan Coverage End Date only. Press the PF5 key. The update should be allowed, and messages 08-005 and equivalent 12-311 should not be issued.
Attempt to change either the Medical Plan Code or Medical Plan Coverage Effective Date, and change the Medical Plan Coverage End Date. Press the PF5 key. The update should be blocked, and messages 08-005 and 12-311 should be issued indicating that the medical plan enrollment is inconsistent with the Assigned BELI.

Leaving the Medical Coverage End Date unchanged, attempt to change either the Medical Plan Code or Medical Plan Coverage Effective Date. Press the PF5 key. The update should be blocked, and messages 08-005 and 12-311 should be issued indicating that the medical plan enrollment is inconsistent with the Assigned BELI.

Thus, any attempt to the Medical Plan Code or Medical Plan Coverage Effective Date regardless whether the Medical Plan Coverage End Date is changed or not, should trigger the issuance of messages 08-005 and 12-311.

- Update Dental Plan Data

With the BELI set at ‘5’, attempt to change the Dental Plan Coverage End Date only. Press the PF5 key. The update should be allowed, and messages 08-142 and equivalent 12-322 should not be issued.

Attempt to change either the Dental Plan Code or Dental Plan Coverage Effective Date, and change the Dental Plan Coverage End Date. Press the PF5 key. The update should be blocked, and messages 08-142 and 12-322 should be issued indicating that the dental plan enrollment is inconsistent with the Assigned BELI.

Leaving the Dental Coverage End Date unchanged, attempt to change either the Dental Plan Code or Dental Plan Coverage Effective Date. Press the PF5 key. The update should be blocked, and messages 08-142 and 12-322 should be issued indicating that the dental plan enrollment is inconsistent with the Assigned BELI.

Thus, any attempt to the Dental Plan Code or Dental Plan Coverage Effective Date regardless whether the Dental Plan Coverage End Date is changed or not, should trigger the issuance of messages 08-142 and 12-322.

- Update Vision Plan Data

With the BELI set at ‘5’, attempt to change the Vision Plan Coverage End Date only. Press the PF5 key. The update should be allowed, and messages 08-166 and equivalent 12-325 should not be issued.
Attempt to change either the Vision Plan Code or Vision Plan Coverage Effective Date, and change the Vision Plan Coverage End Date. Press the PF5 key. The update should be blocked, and messages 08-166 and 12-325 should be issued indicating that the vision plan enrollment is inconsistent with the Assigned BELI.

Leaving the Vision Coverage End Date unchanged, attempt to change either the Vision Plan Code or Vision Plan Coverage Effective Date. Press the PF5 key. The update should be blocked, and messages 08-166 and 12-325 should be issued indicating that the vision plan enrollment is inconsistent with the Assigned BELI.

Thus, any attempt to the Vision Plan Code or Vision Plan Coverage Effective Date regardless whether the Vision Plan Coverage End Date is changed or not, should trigger the issuance of messages 08-166 and 12-325.

3. IMEM Screen

Place the cursor each of the employee’s coverage effective dates.

- Place the cursor on the medical coverage effective date and press the PF1 key. The displayed field level help text should be associated with the Employee Medical Effective Date (EDB 0454).

- Place the cursor on the dental coverage effective date and press the PF1 key. The displayed field level help text should be associated with the Employee Dental Effective Date (EDB 0455).

- Place the cursor on the vision coverage effective date and press the PF1 key. The displayed field level help text should be associated with the Employee Vision Effective Date (EDB 0456).

- Place the cursor on the legal coverage effective date and press the PF1 key. The displayed field level help text should be associated with the Employee Medical Effective Date (EDB 0457).