

SR80551
Four-Tier Benefit Plan Coverage - Legal

Submitted by
Alice Plebuch
Information Systems Staff
Human Resources and Benefits
July 10, 2003

Table of Contents

1	Background.....	1
1.1	Current Coverage Levels	1
1.2	Code Definitions	1
1.3	Revised Coverage Levels	2
2	Overview.....	2
3	PPS Modifications.....	3
3.1	Code Translation Table.....	3
3.2	Coverage Level Code Derivation	3
3.3	Derivation Logic	3
3.4	Compute	3
3.5	One-time Conversion	3
3.6	Coverage Codes and Translations in Related Files/Reports and Systems.....	3
4	Attachment I – EDB Data Dictionary	i
5	Attachment II – Code Translation Tables	iv

SR80551

Four Tier Plan Coverage Codes for Legal

1 Background

For Open Enrollment 2003, Benefits changed Plan Coverage Codes from three tiers to four tiers for medical, dental and vision. Legal continued to be a two tiered plan, but replaced the old "Family" level code (UUU) with the new "Self + Family" code of (UAC). This service request is to adopt the full four tiers for Legal.

1.1 Current Coverage Levels

The coverage levels for the legal benefit are defined and coded as follows:

Chart A – Two Tier Coverage Codes	
Code	Description
U	Self
UAC	Self + Family

1.2 Code Definitions

A three-character code should be used to describe the plan coverage. The plan code is constructed through a combination of four values:

- U = Employee (Adult)
- A = Adult
- C = Child[ren]
- M = Medicare

The "Adult" category includes the employee and up to one dependent identified as spouse ("S"), same-sex domestic partner ("D") or adult dependent relative ("A").

The "Child[ren]" category includes any dependent not in the "Adult" category, that is, Natural or Adopted Child ("C"), Grandchild ("G"), Child or Grandchild of a Domestic Partner ("K"), Other Child ("O"), Step Child ("P"), Legal Ward ("W").

1.3 Revised Coverage Levels

Code	Description
U	Self
UA	Self and adult
UC	Self and Children
UAC	Self and Family

2 Overview

1. The EDB Data Dictionary will need to be updated to reflect the new coverage level codes and definitions and online field-level help should reflect these data dictionary changes.
2. The Code Translation Table (CTT) will need to carry the revised code translations.
3. The coverage code derivation logic should be modified to reflect the new four tier rate structure. Coverage level derivation is performed in the following processes:
 - EDB explicit maintenance
 - EDB daily maintenance that performs date driven derivations
 - EDB daily maintenance that processes transactions from the IVR and web enrollment applications
 - EDB monthly maintenance (?)
 - Carrier file production
 - Consolidated Billing
4. A one-time program to convert from the two-tiered coverage codes to 4-tiered coverage codes will be needed.
5. Additionally, the new coverage codes and/or translations must be correctly handled by:
 - EDB inquiry and update screens (both CICS and web)
 - Post Authorization Notification (PAN) (both CICS and web)
 - Documents to Employees (IDOC)
 - Carrier Files
 - Corporate Personnel System/Benefits Counseling System (CPS/BCS) interface file
 - History Database (HDB)

3 PPS Modifications

The data dictionary will carry the values for the fields listed below. See Attachment I for the revised data dictionary pages.

- LEGAL PLAN COVERAGE CODE-EDB
- PENDING PREMIUM COVERAGE LEVEL
- LEGAL COVERAGE CODE-PAR
- PLAN COVERAGE CODE

3.1 Code Translation Table

The Code Translation Tables (CTT) will be modified to reflect the new values. See Attachment II for CTT entries.

3.2 Coverage Level Code Derivation

The four codes pertaining to enrollments will be derived. The valid codes and their definitions are:

- U Self (no dependents are currently enrolled)
- UA Self and adult. There are **no** “children” enrolled.
- UC Self and children. There is **no** “adult” enrolled.
- UAC Self and Family – Employee, one adult **and** one or more children are enrolled.

3.3 Derivation Logic

Using “adult” and “child” dependent categories, the system should evaluate for the existence of a covered “adult” and covered “child[ren]” and compare this to the existing plan coverage level whenever coverage derivation is triggered.

3.4 Compute

The compute needs to be reviewed to confirm that the correct rates are retrieved for each of the coverage codes.

3.5 One-time Conversion

A one-time program, using the derivation logic, will be needed to convert from the two-tiered coverage codes to 4-tiered coverage codes. The one-time conversion should create an Employee Change File (ECF) for auditing purposes and capture in the HDB.

3.6 Coverage Codes and Translations in Related Files/Reports and Systems

Existing processes will need to handle the new coverage codes and/or translations correctly. Although it is believed no changes are required, the following subsystems should be tested to ensure that unexpected interactions do not occur.

- EDB inquiry and update screens (both CICS and web)

Ensure that the revised coverage level codes are correctly displayed and translated on the EINS, IINS, IINP, IBNA, and IMEM CICS screens, and on the EDB Inquiry Web 'Benefits Enrollment Information' page.

- PAN

Ensure that the revised coverage level codes are correctly displayed and translated on the PAN notifications (both CICS and web).

- IDOC

Ensure that the revised coverage level codes are correctly displayed and translated on the Benefits IDOC.

- Carrier Files

Ensure that the revised coverage level codes are correctly displayed in positions 161-163 of the Employee Record (Type 1).

- CPS/BCS

Ensure that the revised coverage level codes are correctly handled by the interfaces to the Corporate Personnel System and the Benefits Counseling System.

- HDB

Ensure that the revised coverage level codes are correctly displayed in the History Data Base.

- Reports

The one time should produce an employee change file for recording in History.

4 Attachment I – EDB Data Dictionary

System Number: EDB0354

User Access Name: 0354-8

Programming Name: LEGAL_COVERAGE IN PPBEN

Revision Date: 01/01/03

Comments: HBN 4534 – Legal Plan Coverage Code-HBN in HDB
APS 2796 – Legal Plan Coverage Code
BCS 2796 – Legal Plan Coverage Code
CPS 2796 – Legal Plan Coverage Code
IPS 2796 – Legal Plan Coverage Code
OPP 2796 – Legal Plan Coverage Code

Name: LEGAL PLAN COVERAGE CODE-EDB

Type: ALPHANUMERIC

Length: 3

Format:

General Description:

Code indicating the level of legal plan coverage selected by the individual.

Code Interpretation:

U Self only
UC Self and Child[ren]
UA Self and Adult
UAC Self and Family

System Number: PAR0354

User Access Name:

Programming Name: LEGAL_COVERAGE IN PPPPEB

Revision Date: 01/01/03

Comments:

Location(s)

Name: LEGAL COVERAGE CODE-PAR

Type: ALPHANUMERIC

Length: 3

Format:

General Description:

Code indicating the legal plan coverage for which a premium was generated during a Compute process for which there was current pay.

Code Interpretation:

U - Self only
UC - Self and Child[ren]
UA - Self and Adult
UAC - Self and Family

5 Attachment II – Code Translation Tables

Data Base/File ID	Data Element	Legal Plan Coverage Level		
		Code Value	Translation Length	Code Translation
EDB	354	U	9	Self
EDB	354	U	21	Self Coverage
EDB	354	UC	9	W/Childrn
EDB	354	UC	21	Self/Children Covrage
EDB	354	UA	9	W/Adult
EDB	354	UA	21	W/Adult Coverage
EDB	354	UAC	9	Family
EDB	354	UAC	21	Family Coverage