



<b>File Name</b>	Evidence of Insurability Life Proof Received.doc
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## **Evidence of Insurability Life Proof Received**

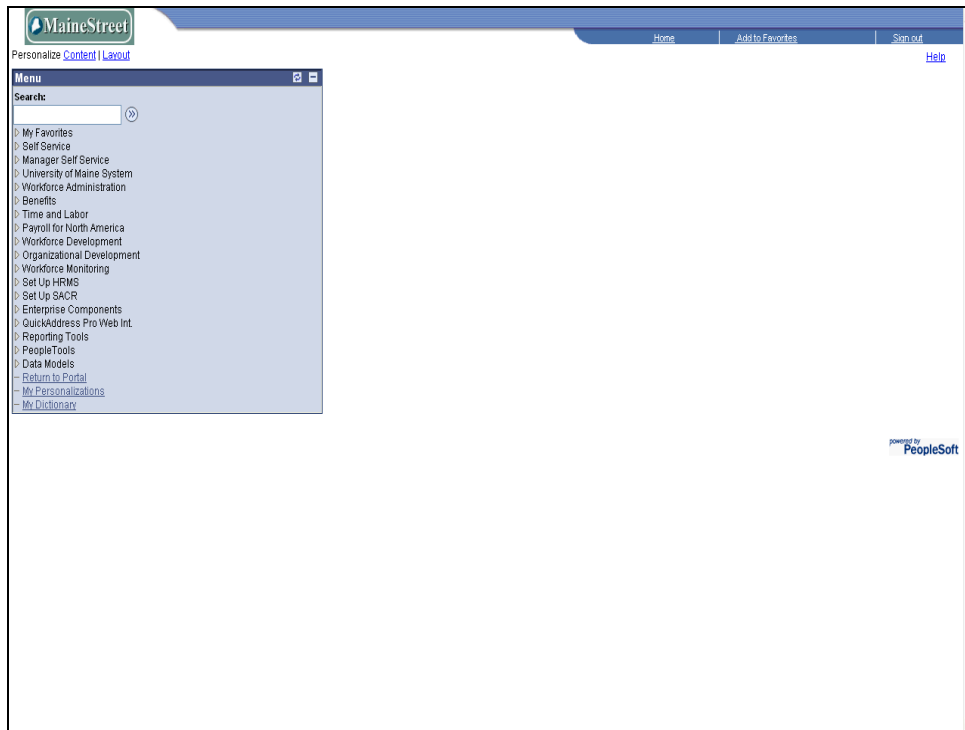
### **Concept**





Supplemental Life requires proof of insurability for coverage levels of 4x or 5x and for amounts exceeding \$300,000. Spouse Life requires proof if the employee increases coverage more than 1 level.

If the employee elects coverage requiring proof, the employee will initially be enrolled in a lower coverage level until such proof is received from the insurance company. Depending on when the proof is received, the original event can be reprocessed or a manual event will be required to change the level of coverage.



## Navigation




Step	Action
1.	Click the <b>Benefits</b> link. 
2.	Click the <b>Manage Automated Enrollment</b> link. 
3.	Note: You may need to create a manual (BEN) event if the effective date (New Hire) has already passed.  During Open Enrollment, since the effective date may be 4-6 weeks from the day the employee elected coverage, you may be able to Re-enter the employee's selection with Proof Received. This exercise follows this situation.
4.	Click the <b>Events</b> link. 
5.	Click the <b>On-Demand Event Maintenance</b> link. 



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## HRMS: Evidence of Insurability Life Proof Received

### Procedure

Step	Action
6.	Enter the desired information into the <b>EmplID</b> field.
7.	Click the <b>Search</b> button. 

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## HRMS: Evidence of Insurability Life Proof Received



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**On-Demand Event Maintenance**

Karen Cai      Person ID: 0099999      Ben Rcd#: 0

**Activity Date:**      **Source:**      **Empl Rcd#: 0**  
      **Pending Activities:** 0            **Action:**

---

**Event ID:** 2      **Event Date:** 09/01/2008      **Status:** Program Elig Assigned      **Class:** MSC     

     **Event Status:** Open for Processing

     **Run Date:**      **Frequency:**  
 Deduction       Annual

     **Entered:** 0 of 0     

     **Errors:** 0             Finalize/Apply Defaults

     **Run Date:**

---

     **Process Indicator:** N      Normal Processing

Step	Action
8.	Click the <b>Event Status Update</b> button. <input type="button" value="Event Status Update"/>



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## HRMS: Evidence of Insurability Life Proof Received

BenAdmin Event Status Update

EmpID: 0099999 Karen Cai Ben Rod#: 0

Sched ID	Event ID	Pgm	Process Status	Eligibility Change	Disc	Out of Seq	Process Indicator	Final
Event Date	Event Class	Priority	Action Source	Addr / Multi/Job / Job	Suppress Forms	Indicator	Event Status	
ALL	2	FFT	Prepared	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Normal Prc	<input type="checkbox"/>
09/01/2008	Misc Chang	400	Job Data Change		Print Both		Open	
ALL	1	UFT	Enrolled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Normal Prc	<input type="checkbox"/>
08/01/2008	New Hire	100	Job Data Change		Print Both		Closed	

OK Cancel Apply Refresh

Step	Action
9.	Click the <b>Closed</b> list item for any currently Open event if necessary. 
10.	Click the <b>Open</b> list item for the event that needs to be Re-entered. 
11.	Click the <b>Re-Enter</b> list item. 
12.	Click the <b>OK</b> button. 
13.	Click the <b>OK</b> button. 

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**On-Demand Event Maintenance**

Karen Cai Person ID: 0099999 Ben Rcd#: 0

**Activity Date:**  **Source:**  **Pending Activities:** 0 **Empl Rcd#: 0** **Action:**

**Event ID:** 1 **Event Date:** 08/01/2008 **Status:** Finalized - Enrolled **Class:** HIR **Event Status:** Open for Processing

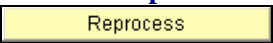
**Run Date:**  **Frequency:**  Deduction  Annual

**Entered:** 12 of 20

**Errors:** 0   Finalize/Apply Defaults

**Run Date:** 10/13/2008

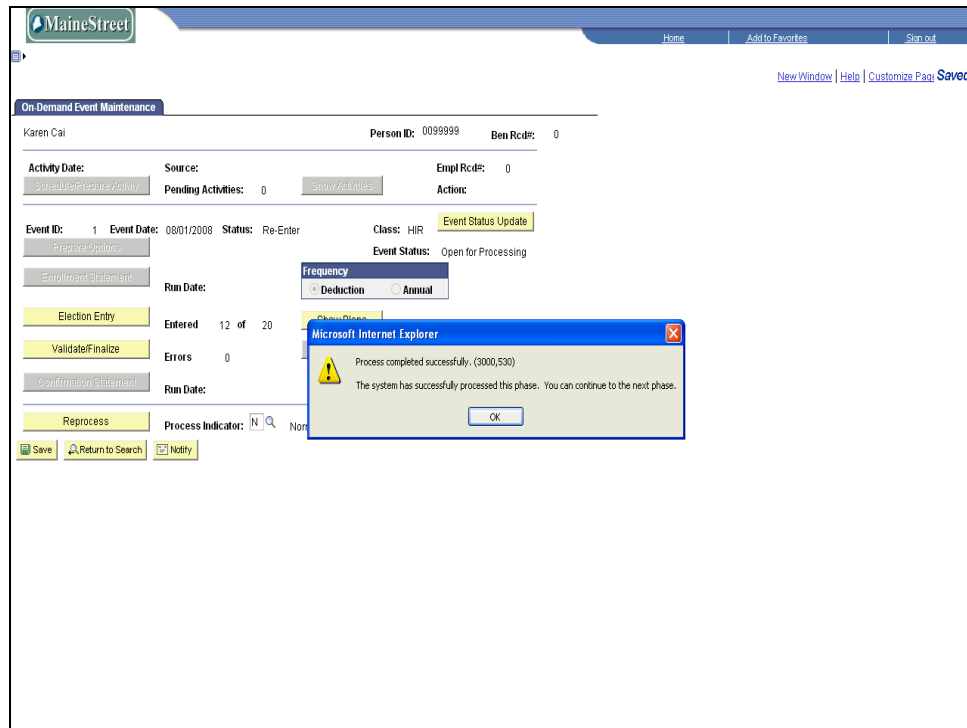
**Process Indicator:** R

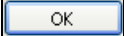
Step	Action
14.	Click the <b>Reprocess</b> button. 



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## HRMS: Evidence of Insurability Life Proof Received



Step	Action
15.	Click the <b>SAVE</b> button. 

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**On-Demand Event Maintenance**

Karen Cai Person ID: 0099999 Ben Rcd#: 0

Activity Date:  Source: Pending Activities: 0  Empl Rcd#: 0  
 Action:


Event ID: 1 Event Date: 08/01/2008 Status: Re-Enter Class: HIR   
 Event Status: Open for Processing

Run Date: **Frequency**  
 Deduction  Annual

Entered: 12 of 20   
 Errors: 0   Finalize/Apply Defaults

Run Date:

Process Indicator:  Normal Processing

Step	Action
16.	Click the <b>Election Entry</b> button. 



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## HRMS: Evidence of Insurability Life Proof Received

Event/Participant Selection | **Option Election** | Dependents/Beneficiaries

Sched ID: ALL EmpID: 0099999; Karen Cai Ben Rcd#: 0 Event ID: 1  
Event Date: 08/01/2008 New Hire Excess Credit Rollover To: Cash

Available Plans and Options [Find](#) 1-20 of 20

**Plan Type 60: Flex Spending Health - U.S.**

Option Code:  FSA Health Care (ADVHEA)

Annual Pledge:

Employee Contribution Override:  Monthly

**Contribution Worksheet**

Use this worksheet to calculate the employee's desired Annual Pledge and Contribution Amount.

Annual Pledge	Contributions Year-to-Date	Pay Periods Remaining	Pay Period Amount	Employee Contribution
<input type="text" value="\$1,000.00"/>	<input type="text" value="\$0.00"/>	<input type="text" value="4"/>	<input type="text" value="\$250.00"/>	<input type="text" value="\$250.00"/> Monthly

[Open Protected Fields](#) Open protected fields for change. (These fields are normally determined by the system.)

[Special Requirements](#)

**Plan Type 61: Flex Spending Dependent Care**

Option Code:  Waive Coverage

Annual Pledge:

Employee Contribution Override:

**Contribution Worksheet**

[Special Requirements](#)

**Plan Type 10: Medical**

Step	Action
17.	Click the <b>Find</b> link. <a href="#">Find</a>

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## HRMS: Evidence of Insurability Life Proof Received



Explorer User Prompt

Script Prompt:

Enter search string:

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Sched ID: ALL    EmpID: 0099999    Karen Cai    Ben Rcd#: 0    Event ID: 1

Event Data: 08/01/2008 New Hire    Excess Credit Rollover To: Cash

Available Plans and Options Find 1-20 of 20

**Plan Type 60 : Flex Spending Health - U.S.**

Option Code: 10  FSA Health Care (ADVHEA)

Annual Pledge:

Employee Contribution Override:  Monthly

**Contribution Worksheet**

Use this worksheet to calculate the employee's desired Annual Pledge and Contribution Amount.

Annual Pledge	Contributions Year-to-Date	Pay Periods Remaining	Pay Period Amount	Employee Contribution
<input type="text" value="\$1,000.00"/>	<input type="text" value="\$0.00"/>	<input type="text" value="4"/>	<input type="text" value="\$250.00"/>	<input type="text" value="\$250.00"/> Monthly

Open protected fields for change. (These fields are normally determined by the system).

[Special Requirements](#)

---

**Plan Type 61 : Flex Spending Dependent Care**

Option Code: W  Waive Coverage

Annual Pledge:

Employee Contribution Override:

**Contribution Worksheet**

[Special Requirements](#)

---

**Plan Type 10 : Medical**

Step	Action
18.	Enter the desired information into the field. Enter <b>"21"</b> .
19.	Click the <b>OK</b> button. <input type="button" value="OK"/>



## Process Document HRMS: Evidence of Insurability Life Proof Received

The screenshot displays the HRMS interface for managing life insurance plans. It features three main sections, each representing a different plan type:

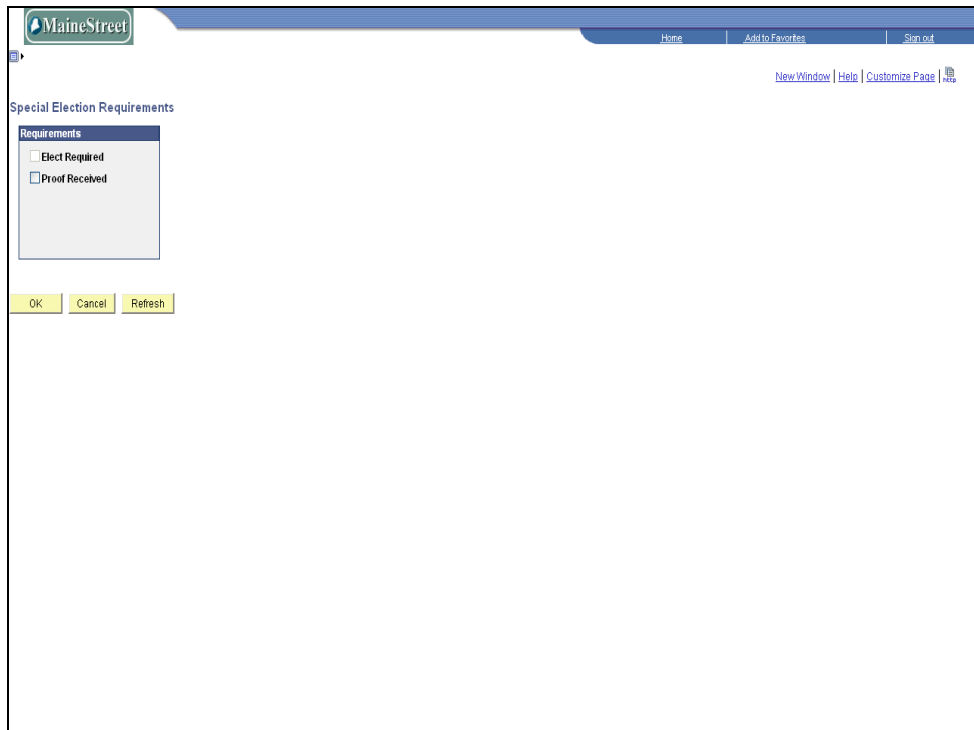
- Plan Type 21: Supplemental Life**: Option Code: 5, Optional 3X (SPLF3X). Fields include Factor x Salary, Flat Amount, and Benefits Base (Annual Rate). A link for Special Requirements is present.
- Plan Type 2W: Spouse Life**: Option Code: 50, Spousal Life 50K (SPLF50). Fields include Factor x Salary, Flat Amount, and Benefits Base (Annual Rate). A link for Special Requirements is present.
- Plan Type 25: Domestic Partner Life**: Option Code: W, Waive Coverage. Fields include Factor x Salary, Flat Amount, and Benefits Base (Annual Rate). A link for Special Requirements is present.

Each plan type section includes a 'Dependents/Beneficiaries' table with an 'Enroll All' button. The table columns are: ID, Name, Relationship to Employee, Percentage, Flat Amount, Contingent, and Excess.

Step	Action
20.	Enter the desired information into the <b>Option Code</b> field.
21.	Click the <b>Special Requirements</b> link. <a href="#">Special Requirements</a>

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## HRMS: Evidence of Insurability Life Proof Received



Step	Action
22.	Click the <b>Proof Received</b> option. <input type="checkbox"/> <b>Proof Received</b>
23.	Click the <b>OK</b> button. <input type="button" value="OK"/>



# Process Document

## HRMS: Evidence of Insurability Life Proof Received

After Tax Flat Amount:  Percent of Earnings:

[Special Requirements](#)

Dependents/Beneficiaries

Enroll All

ID	Name	Relationship to Employee	Percentage
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Allocation of Investment Funds

Investment Option	Description	Percent
1 <input type="text"/>	TIAA-CREF	50.00
2 <input type="text"/>	ING	25.00
3 <input type="text"/>	Fidelity	25.00

Plan Type 50 : Sick


Option Code: 10  Disability FT Prof/Fac FY (DISFTP) [Special Requirements](#)

Plan Type 51 : Vacation

Option Code: 10  Annual Leave-Prof (VACFFP) [Special Requirements](#)

OK Cancel Apply Refresh

[Event / Participant Selection](#) | [Option Election](#) | [Dependents / Beneficiaries](#)

Step	Action
24.	Click the <b>OK</b> button. 

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**On-Demand Event Maintenance**

Karen Cai      Person ID: 0099999      Ben Rcd#: 0

Activity Date:      Source:      Empl Rcd#: 0  
      Pending Activities: 0            Action:

---

Event ID: 1      Event Date: 08/01/2008      Status: Entered      Class: HIR        
      Event Status: Open for Processing

     Run Date:      **Frequency**  
 Deduction       Annual

     Entered 12 of 20        
      Errors 0             Finalize/Apply Defaults

     Run Date:

---

     Process Indicator:       Normal Processing

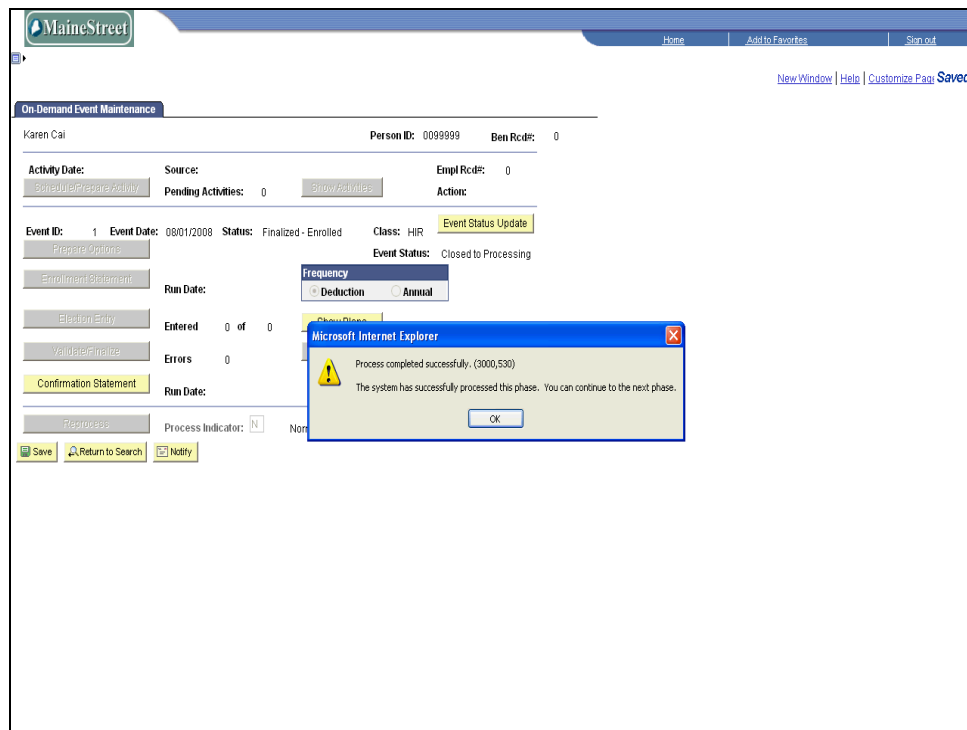
          

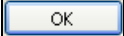
Step	Action
25.	Click the <b>Validate/Finalize</b> button. <input type="button" value="Validate/Finalize"/>



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Step	Action
26.	Click the <b>SAVE</b> button. 

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## HRMS: Evidence of Insurability Life Proof Received



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**On-Demand Event Maintenance**

Karen Cai      Person ID: 0099999      Ben Rcd#: 0

**Activity Date:**      
**Source:**     
**Pending Activities:** 0     
     
**Empl Rcd#: 0**     
**Action:**

---

**Event ID:** 1     
**Event Date:** 08/01/2008     
**Status:** Finalized - Enrolled     
**Class:** HIR     

    
**Event Status:** Closed to Processing

    
**Run Date:**     
**Frequency:**  Deduction       Annual

    
**Entered:** 0 of 0     

    
**Errors:** 0     
     
 Finalize/Apply Defaults

    
**Run Date:**

---

    
**Process Indicator:** N     
 Normal Processing

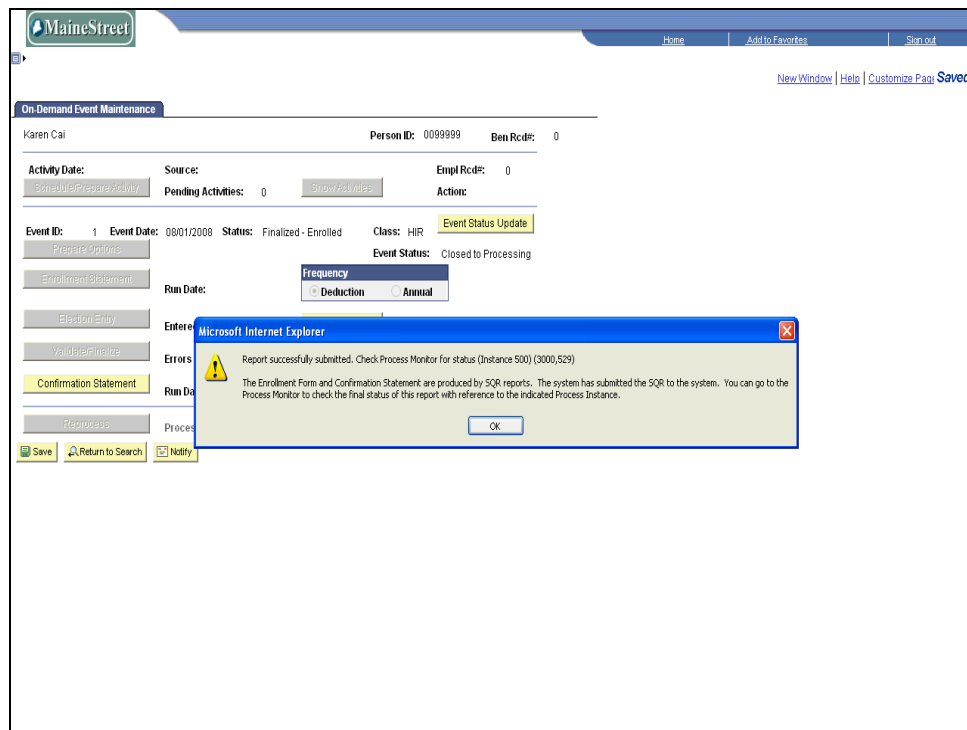
    
     

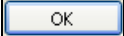
Step	Action
27.	Click the <b>Confirmation Statement</b> button. 



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## HRMS: Evidence of Insurability Life Proof Received



Step	Action
28.	Click the <b>SAVE</b> button. 

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## HRMS: Evidence of Insurability Life Proof Received



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**On-Demand Event Maintenance**

Karen Cai      Person ID: 0099999      Ben Rcd#: 0

**Activity Date:**      
**Source:**     
**Pending Activities:** 0     
     
**Empl Rcd#: 0**     
**Action:**

---

**Event ID:** 1     
**Event Date:** 08/01/2008     
**Status:** Finalized - Enrolled     
**Class:** HIR     

    
**Event Status:** Closed to Processing

    
**Run Date:**     
**Frequency:**  Deduction       Annual

    
**Entered:** 0 of 0     

    
**Errors:** 0     
     
 Finalize/Apply Defaults

    
**Run Date:**

    
**Process Indicator:**      
 Normal Processing

Step	Action
29.	Click the <b>Event Status Update</b> button. <input type="button" value="Event Status Update"/>



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## HRMS: Evidence of Insurability Life Proof Received

BenAdmin Event Status Update

EmpID: 0099999 Karen Cal Ben Rod#: 0

Sched ID	Event ID	Pgm	Process Status	Eligibility Change	Disc	Out of Seq	Process Indicator	Final
Event Date	Event Class	Priority	Action Source	Addr / Multi/Job / Job	Suppress Forms Indicator		Event Status	
ALL	2	FFT	Prepared	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Normal Prc	<input type="checkbox"/>
09/01/2008	Misc Chang	400	Job Data Change				Open	
ALL	1	UFT	Enrolled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Normal Prc	<input type="checkbox"/>
08/01/2008	New Hire	100	Job Data Change				Closed	

OK Cancel Apply Refresh

Step	Action
30.	<p>For all events effective after the reprocessed event, click the <b>Assign Pgm</b> list item to reprocess all subsequent events.</p> <p><b>NOTE:</b> The Out of Sequence box is checked because the earlier event was reprocessed.</p> <p>Normal Prc</p>
31.	<p>Click the <b>OK</b> button.</p> <p>OK</p>
32.	<p>Click the <b>OK</b> button.</p> <p>OK</p>

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## HRMS: Evidence of Insurability Life Proof Received



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**On-Demand Event Maintenance**

Karen Cai      Person ID: 0099999      Ben Rcd#: 0

**Activity Date:** [Schedule/Prepare Activity](#)      **Source:**      **Pending Activities:** 0      [Show Activities](#)      **Empl Rcd#: 0**      **Action:**

**Event ID:** 2      **Event Date:** 09/01/2008      **Status:** Prepared      **Class:** MSC      [Event Status Update](#)  
**Prepare Options:**      **Event Status:** Open for Processing

**Enrollment Statement**      **Run Date:**      **Frequency:**  Deduction       Annual

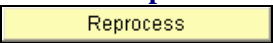
**Election Entry**      **Entered:** 0 of 4      [Show Plans](#)

**Validate/Finance**      **Errors:** 0      [Show Errors](#)       **Finalize/Apply Defaults**

**Confirmation Statement**      **Run Date:**

[Reprocess](#)      **Process Indicator:**  Assign Benefit Program

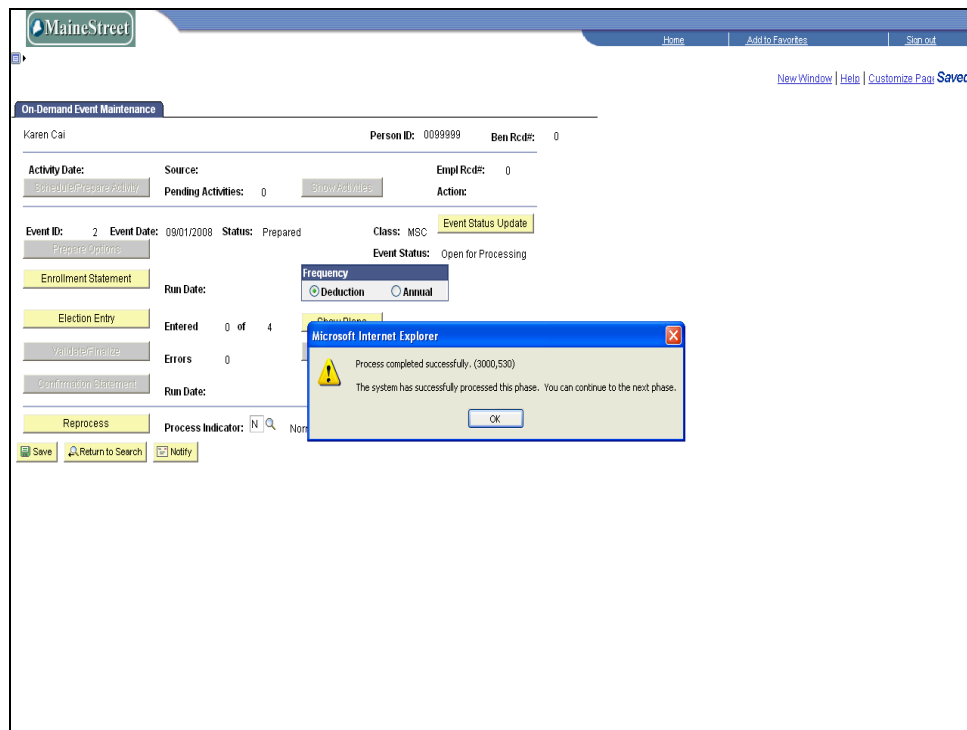
[Save](#)      [Return to Search](#)      [Notify](#)

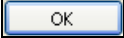
Step	Action
33.	Click the <b>Reprocess</b> button. 



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## HRMS: Evidence of Insurability Life Proof Received



Step	Action
34.	Click the <b>SAVE</b> button. 
35.	<b>End of Procedure.</b>