

BENEFITS AND DEDUCTIONS

BENEFITS AND DEDUCTIONS IN PAYROLL

- Determine what payroll deductions your system will allow:
 - Establish benefits committee
 - Develop policy for accepting new payroll deductions
 - Mandatory Deductions
 - PEEHIP
 - Uploading monthly deductions
 - Reporting corrections
 - Balancing withholding
 - TRS
 - How to handle multiple tier status
 - Reconciling remittance
 - Garnishments
 - How to set up deduction for system calculation
 - Section 125 / Pre Tax Deductions
 - How to set up a tax sheltered deduction

- Establish policy for implementing new voluntary payroll deductions
 - Excessive voluntary payroll deductions creates burden on monthly payroll processing
- Determine nature of new payroll deduction:
 - Standard deduction
 - Section 125 tax sheltered
 - Flexible spending
 - Dependent care
 - Garnishment
 - 403b / 457 retirement plan
 - Direct Deposit

PAYROLL CODE MAINTENANCE

New deductions set up reference Tabs 1- W2 Code, 2 – Deduction Type and 7 – Deduction Report Type

PR/PDCM: Payroll Code Maintenance I (v3.06)

7. Deduction Report Type	8. Worker's Comp. Code	9. Ded. Adjustment Type
4. State Emp. Type	5. Substitute Rate Level	6. Retirement Code
1. W2 Code	2. Deduction Type	3. Pay Class Codes

W2 Code 1

W2 Code Description Section 125 (Cafeteria Plan)

W2 Box Number 14

W2 Identifier CAF

Deduction Amount Type

☒ Employee ☐ Employer ☐ Both

W2 Check Boxes

☐ Retirement Plan ☐ Third Party Sick Pay

Inquire Mode: Enter the Key Word for the Desired Record

PR/PDCM: Payroll Code Maintenance I (v3.06)

7. Deduction Report Type	8. Worker's Comp. Code	9. Ded. Adjustment Type
4. State Emp. Type	5. Substitute Rate Level	6. Retirement Code
1. W2 Code	2. Deduction Type	3. Pay Class Codes

Deduction Type 1 Deduction Type Description Federal Tax

☒ Federal Tax ☐ Soc. Security Tax ☐ ACH Direct Deposit ☐ Child Support

☐ State Tax ☐ Medicare Tax ☐ Direct Deposit ☐ Levy

☐ County Tax ☐ Add. Medicare W/H ☐ Savings Bond ☐ Other

☐ City Tax ☐ Workers Comp ☐ Garnishment ☐ Board-Paid Insurance

☐ EIC ☐ Retirement ☐ Reimbursement ☐ Group Term Life

☐ SUI Tax

Allow Deduction at

☐ Job Level ☒ Employee Level ☒ Single Deduction # ☐ Disable Shelter Flags

Inquire Mode: Enter the Key Word for the Desired Record

PR/PDCM: Payroll Code Maintenance I (v3.06)

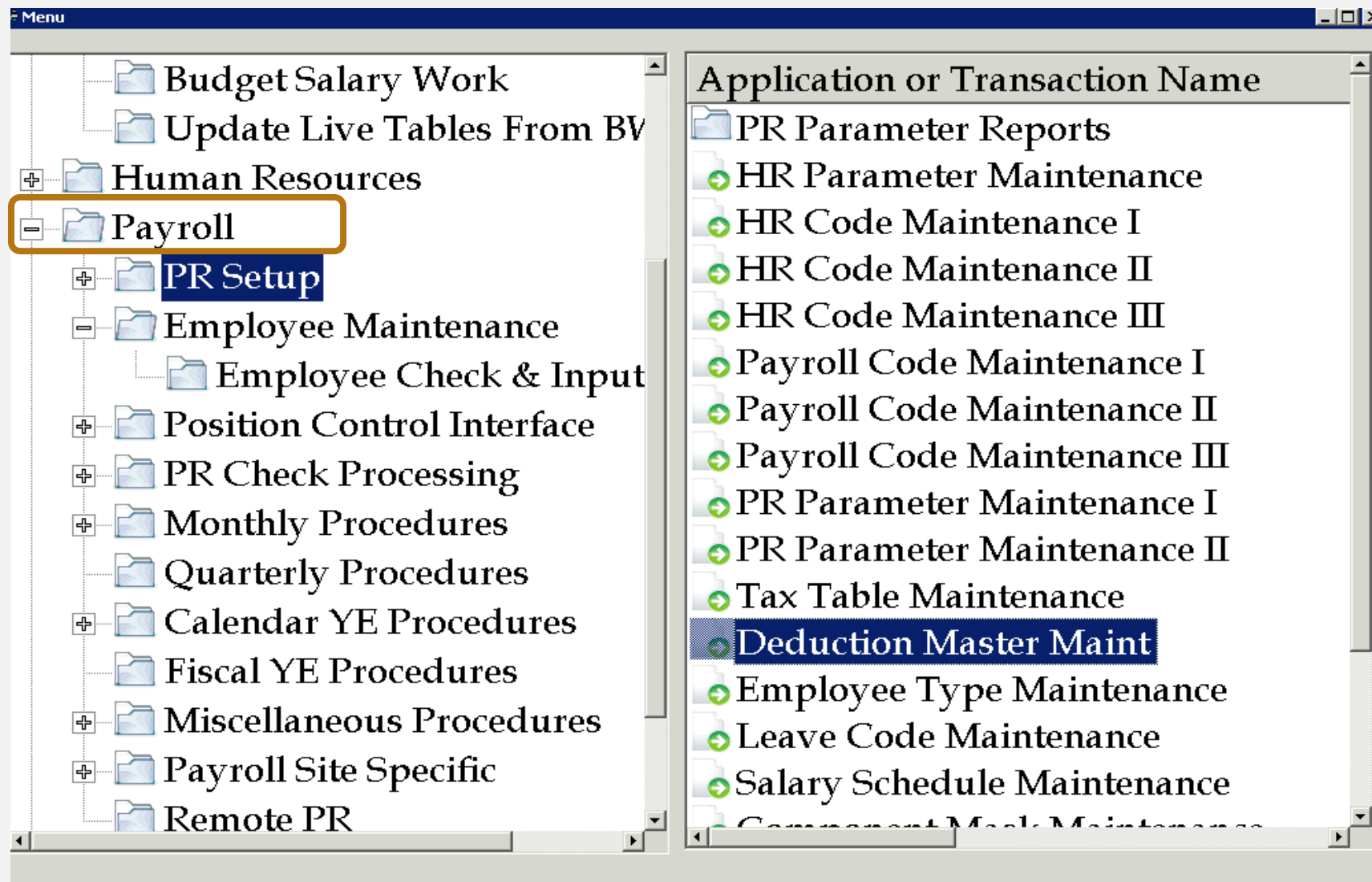
4. State Emp. Type	5. Substitute Rate Level	6. Retirement Code
1. W2 Code	2. Deduction Type	3. Pay Class Codes
7. Deduction Report Type	8. Worker's Comp. Code	9. Ded. Adjustment Type

Deduction Report Type PHP

Deduction Report Type Description ACH Direct Deposit

Inquire Mode: Enter the Key Word for the Desired Record

SETTING UP NEW DEDUCTIONS



Deduction #

44

Ded. Desc.

TEXAS LIFE

Short Desc

TLIFE

Description to
print on check
stub/remittance

1. General

Other

Cancel

Deduction Type Options

Deduction Type Description

Ded Type

O

Other

W2 Code 1

W2 Code 2

Deduction T...	Deduction Type Descrip...	Federal Tax	State Tax	County ...	City Tax	EIC	Soci...
9	Additional Medicare Tax	0	0	0	0	0	0
A	ACH (Direct Deposit)	0	0	0	0	0	0
B	Savings Bond	0	0	0	0	0	0
D	Direct Deposit	0	0	0	0	0	0
G	Garnishment	0	0	0	0	0	0
I	Taxable Group Term Life	0	0	0	0	0	0
L	Levy	0	0	0	0	0	0
O	Other	0	0	0	0	0	0
P	Employee Owes Board	0	0	0	0	0	0
R	Reimbursement	0	0	0	0	0	0
S	Child Support	0	0	0	0	0	0
T	Retirement	0	0	0	0	0	0

Ded Amount

0.00

Reference #

State Benefit Code

Employee Vendor #

206

AMERICAN FIDELITY

P. O. BOX 268805

Employer Vendor #

206

AMERICAN FIDELITY

(No Address 2)

Ded Rep Type

OKLAHOMA CITY, OK 73126

Empl Liab Comp

AllButFund

Value

202261000000000000009044

Fund 38 clearing account.
Include deduction # in
special use code to aide in
clearing balances when
reviewing trial balances

LIFE INSURANCE DEDUC - No Description - SYSTEM N

Inquire Mode: Enter the Key Word for the Desired Record

When adding new accounts and creating new clearing accounts, you must first add the clearing account in budgetary under gl account maintenance and connect to the payroll bank code.

GL/MACT: GL Account Maintenance (v3.08)

Select by Acct #

Fd-C-Func-Obj-CCtr-SFnd-Y-Prog-Spec

38-2-0226-100-0000-0000-0-0000-9044

Select by ASN

200834

Effective Date

10/01/2007

-

09/30/2019

Internal Description

LIFE INSURANCE DEDUC

State/Auditor Desc.

LIFE INSURANCE DEDUC

Default Account Type

Credit

Group

State Alias

Created By

jnswidewski

Date Created

1/24/2008

Jan Swiderski

Status

A

Inactivated By

on

3/4/1999

Change Mode: Enter the Key Word for the Record to be Changed

GL/BKCA: Cash Accounts by Bank Code (v3.02)

Bank Code

PAY

ACS - Payroll

Account # 1127

Add Unlisted Account

Account Number	Description
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-0000	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-0520	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1110	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1220	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1221	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1230	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1240	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1250	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1252	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1260	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1275	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1279	CASH IN BANK (OPERAT
<input checked="" type="checkbox"/> 38-1-0111-000-0000-0000-0-0000-1285	CASH IN BANK (OPERAT

Select GL Accounts to be Associated with Each Bank Code for Reconciliation

STANDARD DEDUCTION

PR/DEDM: Deduction Master Maint (v3.12)

Deduction # Ded. Desc. Short Desc

1. General **2. Deduction Parameters** **3. Deduction Type Options**

Sheltered From

- ☐ Federal Tax
- ☐ State Tax
- ☐ Social Security
- ☐ Medicare
- ☐ City Tax
- ☐ County Tax
- ☐ Retirement
- ☐ SUI Tax
- ☐ Garnishment

☒ Process Thru Payroll

☒ Print Check

☐ Round Ded Amount

☐ Local Tax Fringe Benefit

☒ Ded Maintainable

☐ Qualify Retirement

☐ Mandatory Deduction

☐ Mandatory By Empl Type

☐ Store Deduction Wages

☒ Allow on Empl Master

☐ Allow on Empl Job

☐ Inactive

Employee

DT Amt. \$ ☒

DT % ☐

Employer

DT Amt. \$ ☐

DT % ☐

Wage Base Code

- ☒ Actual Pay Pd Earnings
- ☐ Full Time Earnings
- ☐ State Based Salary

Change Mode: Enter the Key Word for the Record to be Changed

Deduction # 44

Ded. Desc. TEXAS LIFE

Short Desc TLIFE

1. General2. Deduction Parameters3. Deduction Type Options

Employer Liability

Value

Comp

Employer Expense

Value

Comp

And

Value

When

Contains

Empl Ded. Limit

0.00

Empl Wage Limit

0.00

Empr Wage Limit

0.00

Garn. %

0

Minimum Amt

0

Minimum Hrs

0

Bond Denom

0

Bond Price

0

Premium Cost Per \$1000

0

DEI Account

00000000

Retire Code

Change Mode: Enter the Key Word for the Record to be Changed

SECTION 125 TAX SHELTERED/FLEX SPENDING DEDUCTIONS

PR/DEDM: Deduction Master Maint (v3.12)

Deduction #21

Ded. Desc.PEEHIP - EMPLOYEE

Short DescPHPEMPL

1. General

2. Deduction Parameters

3. Deduction Type Options

Ded TypeOther

W2 Code 11Section 125 (Cafeteria Plan)

W2 Code 2

Employee Vendor #1829PEEHIP

Employer Vendor #1829PEEHIP

Ded Rep TypePHPPEEHIP

Empl Liab CompAllButFund

Min Ded Amount0.00

Ded Reference #

State Benefit Code

P O BOX 302150

(No Address 2)

MONTGOMERY, AL 36130-3613

Value2022500000000000000000009021

HEALTH INSURANCE DED - Default Object Value - SYS

Inquire Mode: Enter the Key Word for the Desired Record

Deduction #

21

Ded. Desc.

PEEHIP - EMPLOYEE

Short Desc

PHPEMPL

1. General

2. Deduction Parameters

3. Deduction Type Options

Sheltered From

- ☒ Federal Tax
- ☒ State Tax
- ☒ Social Security
- ☒ Medicare
- ☐ City Tax
- ☐ County Tax
- ☐ Retirement
- ☐ SUI Tax
- ☐ Garnishment

☒ Process Thru Payroll☒ Print Check☐ Round Ded Amount☐ Local Tax Fringe Benefit☒ Ded Maintainable☐ Qualify Retirement

Employee

DT Amt. \$ ☒ 0.00DT % ☐ 0%☐ Mandatory Deduction☐ Mandatory By Empl Type☐ Store Deduction Wages☒ Allow on Empl Master☐ Allow on Empl Job

Employer

DT Amt. \$ ☐ 0.00DT % ☐ 0%☐ Inactive

Wage Base Code

- ☒ Actual Pay Pd Earnings
- ☐ Full Time Earnings
- ☐ State Based Salary

Inquire Mode: Enter the Key Word for the Desired Record

Deduction # Ded. Desc. Short Desc

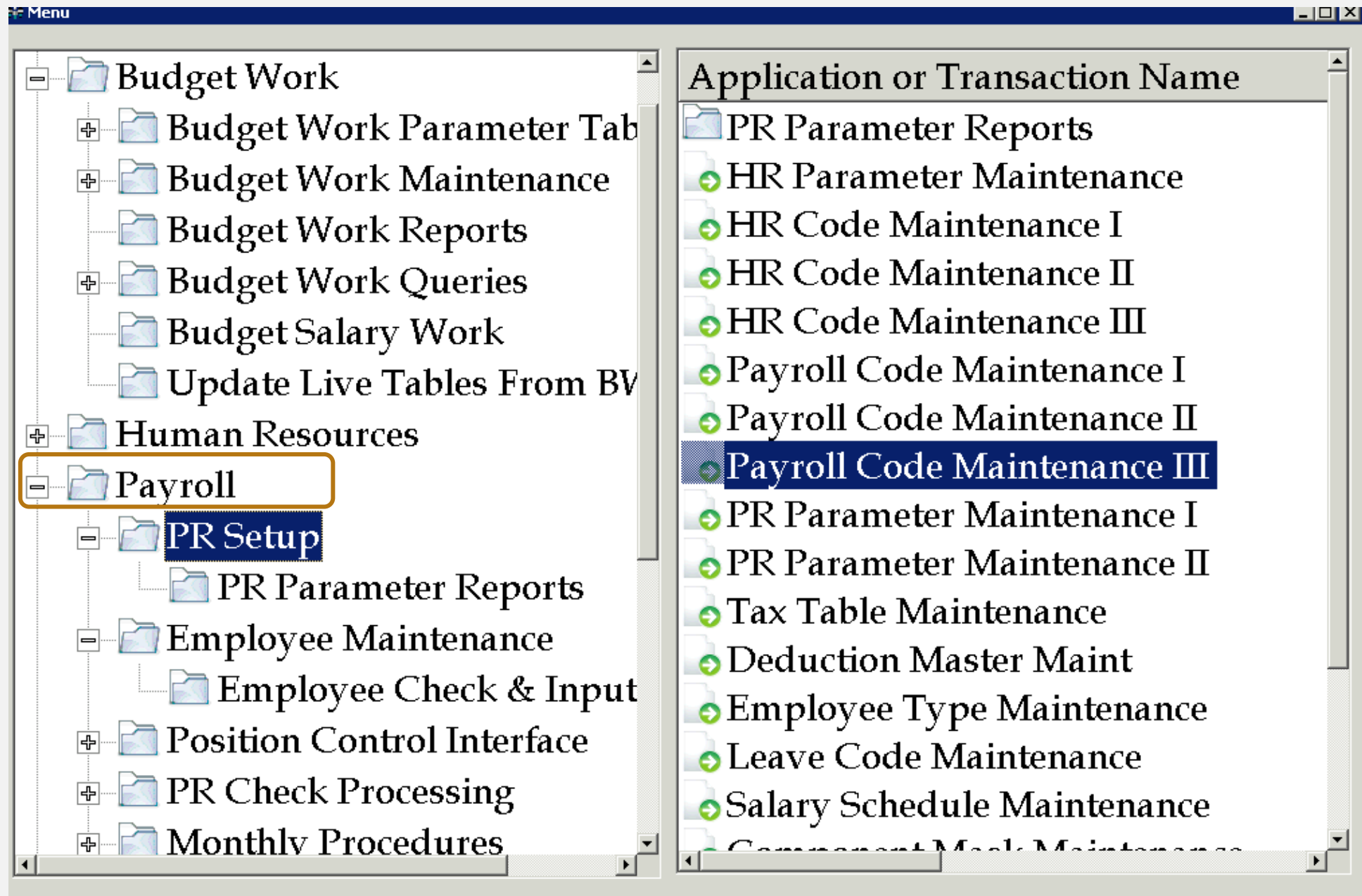
1. General**2. Deduction Parameters****3. Deduction Type Options**

Employer Liability Value
Comp
Employer Expense Value
Comp
And Value
When Contains

Empl Ded. Limit Empl Wage Limit Empr Wage Limit Garn. %
Minimum Amt Minimum Hrs Bond Denom Bond Price
Premium Cost Per \$1000 DEI Account Retire Code

Inquire Mode: Enter the Key Word for the Desired Record

When adding new PEEHIP deductions you must map the PEEHIP interface file to the corresponding Nextgen deduction.



,Auburn City Board of Education,TAUB,08-01-2018,08-31-
2018,07-05-2018,967

M,01,101502834,800.00,101502834

M,02,101502834,30.00,101502834

M,03,101502834,0.00,101502834

M,04,101502834,0.00,101502834

M,05,101502834,0.00,101502834

M,06,101502834,38.00,101502834

M,07,101502834,0.00,101502834

M,08,101502834,0.00,101502834

M,09,101502834,0.00,101502834

M,10,101502834,0.00,101502834

M,11,101502834,0.00,101502834

M,01,111865105,800.00,111865105

M,02,111865105,0.00,111865105

M,03,111865105,0.00,111865105

M,04,111865105,0.00,111865105

M,05,111865105,0.00,111865105

M,06,111865105,0.00,111865105

M,07,111865105,0.00,111865105

M,08,111865105,0.00,111865105

M,09,111865105,0.00,111865105

M,10,111865105,0.00,111865105

M,11,111865105,0.00,111865105

PR/PDC3: Payroll Code Maintenance III (v3.03)

5. Job Type Codes	6. Group Term Life	7. Benefit Code	8. Fund Code
1. Schedule Type	2. Salary Sched Codes	3. Salary Sched Rank	4. Ret Class/Cont Grp
9. Day Type	10. Sub Category	11. Sick Bank Trans	12. 3rd-Party Types

Third-Party Deduction Type 01

Third-Party Ded Type Desc Peehip Employer Portion

Deduction Number 20 PEEHIP - EMPLOYER

☐ Employee Amount ☒ Employer Amount

Inquire Mode: Enter t

PR/PDC3: Payroll Code Maintenance III (v3.03)

5. Job Type Codes	6. Group Term Life	7. Benefit Code	8. Fund Code
1. Schedule Type	2. Salary Sched Codes	3. Salary Sched Rank	4. Ret Class/Cont Grp
9. Day Type	10. Sub Category	11. Sick Bank Trans	12. 3rd-Party Types

Third-Party Deduction Type 02

Third-Party Ded Type Desc Employee Peehip

Deduction Number 21 PEEHIP - EMPLOYEE

☒ Employee Amount ☐ Employer Amount

Inquire Mode: Enter the Key Word for the Desired Record

DEPENDENT CARE DEDUCTIONS

PR/DEDM: Deduction Master Maint (v3.12)

Deduction #	<input type="text" value="29"/>	Ded. Desc.	<input type="text" value="DEPENDENT CARE"/>	Short Desc	<input type="text" value="PHP DCARE"/>
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1. General

2. Deduction Parameters

3. Deduction Type Options

Ded Type

Other

W2 Code 1

Dependent Care

Min Ded Amount

Ded Reference #

Ded Type Other

W2 Code 1 Dependent Care

Ded Type ☐ Other

W2 Code 1 Dependent Care

<u>Min Ded Amount</u>	0.00
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Ded Reference #

W2 Code 2

Employee Vendor #	1829	PEEHIP
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P O BOX 30

Employer Vendor #	1829	PEEHIP
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(No Addres

Ded Rep Type PHP PEEHIP

MONTGOM

Empl Liab Comp AllButFund ▼

Value	2023000000000000000000009029
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MISCELLANEOUS DEDUCT -

Inquire Mode: Enter the Key Word for the Desired Record

PR/DEDM: Deduction Master Maint (v3.12)

Deduction #
Ded. Desc.
Short Desc

1. General

2. Deduction Parameters

3. Deduction Type Options

Sheltered From

☒ Federal Tax
☒ State Tax
☒ Social Security
☒ Medicare
☐ City Tax
☐ County Tax
☐ Retirement
☐ SUI Tax
☐ Garnishment

☒ Process Thru Payroll
☒ Print Check
☐ Round Ded Amount
☐ Local Tax Fringe Benefit
☒ Ded Maintainable
☐ Qualify Retirement

Employee

DT Amt. \$ ☒
DT % ☐

☐ Mandatory Deduction
☐ Mandatory By Empl Type
☐ Store Deduction Wages
☒ Allow on Empl Master
☐ Allow on Empl Job

Wage Base Code

☒ Actual Pay Pd Earnings
☐ Full Time Earnings
☐ State Based Salary

Inquire Mode: Enter the Key Word for the Desired Record

403B / 457 DEDUCTIONS

PR/DEDM: Deduction Master Maint (v3.12)

Deduction # Ded. Desc. Short Desc

1. General **2. Deduction Parameters** **3. Deduction Type Options**

Ded Type ☐ Other
W2 Code 1 Section 403(b) Plan
W2 Code 2

Min Ded Amount
Ded Reference #
State Benefit Code

Employee Vendor # AMERICAN FIDELITY P.O. BOX 25520
Employer Vendor # AMERICAN FIDELITY (No Address 2)
Ded Rep Type
OKLAHOMA CITY, OK 73125

Empl Liab Comp Value

Inquire Mode: Enter the Key

PR/DEDM: Deduction Master Maint (v3.12)

Deduction # Ded. Desc. Short Desc

1. General **2. Deduction Parameters** **3. Deduction Type Options**

Ded Type ☐ Other
W2 Code 1 Section 457 Plan
W2 Code 2

Min Ded Amount
Ded Reference #
State Benefit Code

Employee Vendor # AEA EDUCATOR BENEFITS COR P O BOX 5603
Employer Vendor # AEA EDUCATOR BENEFITS COR (No Address 2)
Ded Rep Type Alabama Education Association MONTGOMERY, AL 36103-3610

Value

e: Enter the Data Fields to be Changed

PR/DEDM: Deduction Master Maint (v3.12)

Deduction # Ded. Desc. Short Desc

1. General **2. Deduction Parameters** **3. Deduction Type Options**

Sheltered From
☒ Federal Tax
☒ State Tax
☐ Social Security
☐ Medicare
☐ City Tax
☐ County Tax
☐ Retirement
☐ SUI Tax
☐ Garnishment

☒ Process Thru Payroll
☒ Print Check
☐ Round Ded Amount
☐ Local Tax Fringe Benefit
☒ Ded Maintainable
☐ Qualify Retirement

Employee
DT Amt, \$ ☒
DT % ☐

☐ Mandatory Deduction
☐ Mandatory By Empl Type
☐ Store Deduction Wages
☒ Allow on Empl Master
☐ Allow on Empl Job

Employer
DT Amt, \$ ☐
DT % ☐

☐ Inactive
☐ Wage Base Code
☒ Actual Pay Pd Earnings
☐ Full Time Earnings
☐ State Based Salary

Change Mode: Enter the Data Fields to be Changed

GARNISHMENT DEDUCTIONS

PR/DEDM: Deduction Master Maint (v3.12)

Deduction #

65

Ded. Desc. SMALL CLAIMS

Short Desc SMALL

1. General

2. Deduction Parameters

3. Deduction Type Options

Ded Type G Garnishment

Min Ded Amount 0.00

W2 Code 1

Ded Reference #

W2 Code 2

State Benefit Code

Employee Vendor # 1263 LEE COUNTY CIRCUIT CLERK

2311 GATEWAY DR RM 104

Employer Vendor #

(No Address 2)

Ded Rep Type GAR Garnishments

OPELIKA, AL 36801

Empl Liab Comp AllButFund

Value 2023380000000000000000009065

No Description - No Description - SYSTEM NO COST CE

Inquire Mode: Enter the Key Word for the Desired Record

Deduction # Ded. Desc. Short Desc 1. General2. Deduction Parameters3. Deduction Type Options

Sheltered From

- ☐ Federal Tax
- ☐ State Tax
- ☐ Social Security
- ☐ Medicare
- ☐ City Tax
- ☐ County Tax
- ☐ Retirement
- ☐ SUI Tax
- ☐ Garnishment

☒ Process Thru Payroll☒ Print Check☐ Round Ded Amount☐ Local Tax Fringe Benefit☒ Ded Maintainable☐ Qualify Retirement

Employee

DT Amt. \$ ☒ DT % ☐ ☐ Mandatory Deduction☐ Mandatory By Empl Type☐ Store Deduction Wages☒ Allow on Empl Master☐ Allow on Empl Job

Employer

DT Amt. \$ ☐ DT % ☐ ☐ Inactive

Wage Base Code

- ☒ Actual Pay Pd Earnings
- ☐ Full Time Earnings
- ☐ State Based Salary

Inquire Mode: Enter the Key Word for the Desired Record

Deduction #

65

Ded. Desc.

SMALL CLAIMS

Short Desc

SMALL

1. General

2. Deduction Parameters

3. Deduction Type Options

Employer Liability

Value

Comp

Employer Expense

Value

Comp

And

Value

When

Contains

Empl Ded. Limit

0.00

Empl Wage Limit

0.00

Empr Wage Limit

0.00

Garn. %

25%

Minimum Amt

7.25

Minimum Hrs

30

Bond Denom

0.00

Bond Price

0.00

Premium Cost Per \$1000

0.00

DFI Account

00000000

Retire Code

Inquire Mode: Enter the Key Word for the Desired Record

Adding deduction to employee record:

Job Number

Employee Level Deductions

Employee Status: Active

Deduction Num SMALL

Calendar Year

Show/Hide Deductions

Employee Portions

Monthly Amount

Pay Periods

Quarters

☒ Active

☐ Future Status Change

Benefit Code

Division

Sheltered From

FWH - No

MC - No

GARN - No

SWH - No

CITY - No

SS - No

CNTY - No

RET - No

SUI - No

Limit

Total Ded.

Priority

Ref#

Plaintiff

DIRECT DEPOSIT ACCOUNTS

PR/DEDM: Deduction Master Maint (v3.12)

Deduction #700

Ded. Desc. US BANK

Short Desc US BANK

1. General

2. Deduction Parameters

3. Deduction Type Options

Ded TypeACH (Direct Deposit)

W2 Code 1

W2 Code 2

Min Ded Amount0.00

Ded Reference #

State Benefit Code

Employee Vendor #

Employer Vendor #

Ded Rep TypeACH Direct Deposit

Empl Liab CompAllButFund

Value202490000000000000000009900

OTHER PAYROLL WITHHO - Default Object Value - SYS

Change Mode: Enter the Data Fields to be Changed

Deduction # Ded. Desc. Short Desc

1. General2. Deduction Parameters3. Deduction Type Options

Sheltered From

- ☐ Federal Tax
- ☐ State Tax
- ☐ Social Security
- ☐ Medicare
- ☐ City Tax
- ☐ County Tax
- ☐ Retirement
- ☐ SUI Tax
- ☐ Garnishment

☒ Process Thru Payroll☐ Print Check☐ Round Ded Amount☐ Local Tax Fringe Benefit☒ Ded Maintainable☐ Qualify Retirement

Employee

DT Amt. \$ ☒ DT % ☐ ☐ Mandatory Deduction☐ Mandatory By Empl Type☐ Store Deduction Wages☒ Allow on Empl Master☐ Allow on Empl Job

Employer

DT Amt. \$ ☐ DT % ☐ ☐ Inactive

Wage Base Code

- ☒ Actual Pay Pd Earnings
- ☐ Full Time Earnings
- ☐ State Based Salary

Change Mode: Enter the Data Fields to be Changed

Deduction # 700

Ded. Desc. US BANK

Short Desc US BANK

1. General

2. Deduction Parameters

3. Deduction Type Options

Employer Liability Value

Comp

Employer Expense Value

Comp

And Value When Contains

Empl Ded. Limit 0.00 Empl Wage Limit 0.00 Empr Wage Limit 0.00 Garn. % 0%

Minimum Amt 0.00 Minimum Hrs 0 Bond Denom 0.00 Bond Price 0.00

Premium Cost Per \$1000 0.00 DEI Account 04210017 Retire Code

Bank routing number. Only first 8 digits are entered. The last digit is system generated.

Change Mode: Enter the Data Fields to be Changed

Adding direct deposit to employee record:

Job Number

Employee Level Deductions

Employee Status: Active

Deduction Num US BANK

Calendar Year

Show/Hide Deductions

Employee Portions

Monthly Amount

Pay Periods

Quarters

☒ Active

☐ Future Status Change

☐ Savings Acct

☒ ACH Notified

☒ Balance of Net

Sheltered From

FWH - No

MC - No

GARN - No

SWH - No

CITY - No

SS - No

CNTY - No

RET - No

SUI - No

Limit

Total Ded.

Priority

Ref#

Bank account number

Plaintiff

Best way to add a new account:
Find a similar deduction and copy it!

FileEditToolsToolbarWindowsFavoritesHelp

Enter

+

Add

↺

Change

🗑

Delete

💾

Save

↶

Back

✏

Clear

🔍

Search

🖨

PrtScr

🛑

Exit

PR/DEDM: Deduction Master Maint (v3.12)

Deduction #700Ded. Desc.USBANKShort DescUSBANK

1. General

2. Deduction Parameters

3. Deduction Type Options

Ded TypeACH (Direct Deposit)

W2 Code 1

W2 Code 2

Employee Vendor #

Employer Vendor #

Ded Rep TypeACHACH Direct Deposit

Empl Liab CompAllButFundValue2024900OTHER

PR/DEDM: Deduction Master Maint (v3.12)

Deduction #700Ded. Desc.USBANKShort DescUSBANK

1. General

2. Deduction Parameters

3. Deduction Type Options

Employer LiabilityCompValue

Employer ExpenseCompValue

AndValue

WhenContains

Empl Ded. Limit0.00Empl Wage Limit0.00Empr Wage Limit0.00Garn. %0%


Minimum Amt0.00Minimum Hrs0Bond Denom0.00Bond Price0.00

Premium Cost Per \$10000.00DFI Account04210017Retire Code

Add Mode: Enter a New Record

MANUALLY ADDING EMPLOYEE

<https://ess.rsa-al.gov>



The Retirement Systems of Alabama

Employer Self-Service Employer Home Report Services PEEHIP Account Admin Logout

TAUB - Jan Swiderski


Welcome to The Retirement Systems of Alabama (RSA) Employer Self-Service. From this site, employers are able to

- Reporting wages and contributions
- Processing EFT Payments
- Processing employee wage adjustments
- Adding or updating employer information
- Reviewing employer reports and invoices
- Verifying Personal Identification numbers (PIDs)
- Reviewing and verifying contribution rates
- Providing access to the secure message center

This tool is designed to improve the service that The Retirement Systems of Alabama (RSA) provides by offering secure

- Death Notice
- Employer Certification
- Employee Information
- Search Demographics**
- Employer Information
- Reports
- Message Center
- Question Center

employers w
ways, includ



The Retirement Systems of Alabama

Employer Self-Service Employer Home Report Services PEEHIP Account Admin Logout

TAUB - Jan Swiderski

Search Employee Demographics

Enter an employee SSN, or PID and click the Search button.

Note: Clicking the Show All button will display all employees for the logged in employer. If you would like to view employees who do not have an enrollment with your agency, use the search options.

Search Employee

Employee SSN:

PID:

Display Records:

50

Search

Show Active

Show All


Add New Employee


Search Employee


Employee SSN:

PID:

Display Records:


 Search

 Show Active


 Show All

 Add New Employee

Search Details

Action	<u>Last Name</u>	<u>First Name</u>	<u>Birth Date</u>	Employer
 Maintain ▼	SWIDERSKI	ELIZABETH	01/06/1994	




 Maintain ▼

Page Number:

1 ▼

Of 1

Next ►

 Demographics

 Enrollments

Enrollment LOA and Work Units History Validation Errors

There are no validation errors found for this enrollment record.

Add/Edit Enrollments

Personal Information

First Name:

ELIZABETH

SSN:

XXX-XX-0610

Middle Name:

P

PID:

XXXXXXXX

Last Name:

SWIDERSKI

Current Tier/Group:

Suffix:

Employee Details

Action	Contribution Group	Employer	Position Status	LOA Status	LOA Status Effective Date	Enrollment Begin Date	Enrollment End Date	Enrollment End Reason
--------	--------------------	----------	-----------------	------------	---------------------------	-----------------------	---------------------	-----------------------

No records to display.

LOA Status History

Action	LOA Status Effective Date	LOA Status *
No records to display.		

Enrollment Work Units History

Action	Scheduled Units Effective Date	Scheduled Units to Work per week *	Scheduled Full Time Units per week *	Scheduled Type of Units Worked *	Units Annually Contracted to Work	Number of Months Paid
No records to display.						

◀ Back

➕ Add New Enrollment

Enrollment Validation Errors

Current Tier/Group:

Employer: *

TAUB - AUBURN CITY BOI

Retirement Plan: *

Select Retirement Plan

Contribution Group: *

Select Retirement Plan

TRS T2 CONT FLC

TRS T2 CONT Regular

TRS NONP FLC

TRS NONP Regular

Position Status: *

Scheduled Units Effective Date: *

Scheduled Units to Work per week: *

Scheduled Type of Units Worked: *

Select Scheduled Type of U

Scheduled Full Time Units per week: *

Payroll Frequency: *

Select Payroll Frequency

Units Annually Contracted to Work: *

Number of Months Paid: *

Select Reporting Periods

Enrollment Begin Date: *

Enrollment End Date:

Enrollment End Reason:

Select Enrollment End Rea

LOA Status Effective Date: *

LOA Status: *

Not on Unpaid Leave

Cancel

Save Changes

Select Contribution Group

Select Contribution Group

Contributing Firefighter

Contributing Law Enforcement

Contributing FLC Dual

Contributing Other - Professional/Administrative

Contributing Teacher

Contributing Principal

Contributing Superintendent

Contributing Administrative

Contributing Clerical

Contributing Lunchroom

Contributing Maintenance

Contributing Bus Driver

Contributing Mechanic

Contributing Other - Support V

Contributing Nurse

Contributing Physician's Assis

Contributing Physician

Contributing FLC Dual

Non-Participating Firefighter

PR/ETPM: Employee Type Maintenance (v3.09)

1. Employee Type

2. Leave Information

3. Mandatory Ded

4. Substitute Info

Employee TypeTC9

Position DescTEACHER 9 MONTH

Active Employee Type

Certified CodeC

Contract Days187.00

Use Contract Date Range

Work Hrs/Day8.00

Work Months/Year12.0

Rate Code:

Salaried

Daily

Hourly

Sub's UnitsD

of Accrual Days23.42

Overtime Computation

Leave UnitsD

Work Comp Code

Exempt from Overtime

Pay Class Code

Work Comp Rate0%

State Based Salary

Sick Bank TypeS

Job Type

Elig For Sub

Egt Sub Days0

State Supp Type

Board Member

ACA OOC Code1A

Update Budget Max

Confirm?

Regular

Supplemental Pay

OVT

Substitute Pay

Pay Adj

Leave Adjustments

Exempt From Matching Insurance

Exempt From Retirement

Build RSA Enroll Record

Summer Position

Report Units From IPAY

Payment Reason00

Regular Pay

RSA Contribution Group011

Teacher

RSA Position Status01

Regular

Work Schedule Code187

187 work days

Type of Rate of Pay03

Yearly

Type of Units Worked00

Days

FT Units Per Week5.00

Days

Annual Units to Work187

Days

MANUALLY CHANGING EMPLOYEE

Search Employee

Employee SSN:



PID:

Display Records:

50



Search

Show Active

Show All

Add New Employee

Search Details

Action

[Last Name](#)

[First Name](#)

[Birth Date](#)

[Employer](#)

WEEDEN

BETTY

01/12/1980

AUBURN CITY BOE
ENTERPRISE CITY BOE
LEE COUNTY BOE

Maintain



Demographics

Enrollments

Page Number:

1



Of 1

Next

Employee Information

SSN: * XXX-XX-5629



Date of Birth: * 01/12/1980

Personal Information

First Name: *

BETTY

Suffix:

Select Suffix ▼

Middle Name:

Gender: *

Female ▼

Last Name: *

WEEDEN

Address Information

Address Line 1: *

313 LIGHTNESS DR

Use for actual street address or post office box.

State: *

Alabama ▼

Address Line 2:

Use for Apartment, Building, Unit, Floor, Suite, etc.

Zip Code: *

36832

(optional)

City: *

AUBURN

Address Effective
Date: *

10/22/2013

Foreign Address:

☐

[Display Future Addresses](#)

[← Back](#)

[Go to Enrollments](#)

[Save Changes](#)

Enrollment LOA and Work Units History Validation Errors

There are no validation errors found for this enrollment record.

Add/Edit Enrollments

Personal Information

First Name: BETTY **SSN:** XXX-XX-5629

Middle Name: **PID:**

Last Name: WEEDEN **Current Tier/Group:** Tier 1

Suffix:

Employee Details

Action	Contribution Group	Employer	Position Status	LOA Status	LOA Status Effective Date	Enrollment Begin Date	Enrollment End Date	Enrollment End Reason
<input checked="" type="radio"/> ⚙ Edit	Contributing Teacher	AUBURN CITY BOE	Regular	Not on Unpaid Leave	08/13/2012	08/13/2012		
<input type="radio"/> ⚙ Edit	Contributing Teacher	LEE COUNTY BOE	Regular	Not on Unpaid Leave	08/10/2011	08/10/2011	05/25/2012	Voluntary Termination
<input type="radio"/> ⚙ Edit	Contributing Teacher	ENTERPRISE CITY BOE	Regular	Not on Unpaid Leave	01/03/2011	08/06/2007	06/13/2011	Voluntary Termination

LOA Status History

Action	LOA Status Effective Date	LOA Status *
⚙ Action ▾	08/13/2012	Not on Unpaid Leave
💾 Save ▾	<input type="text"/>	<input type="text"/>

Enrollment Work Units History

Action	Scheduled Units Effective Date	Scheduled Units to Work per week *	Scheduled Full Time Units per week *	Scheduled Type of Units Worked *	Units , Contra Work
⚙ Action ▾	08/13/2012	5.00	5.00	Days	187
⚙ Action ▾	07/01/2014	40.00	40.00	Hours	187

Edit Enrollment

Enrollment Validation Errors

Current Tier/Group:

Tier 1

Employer: *

TAUB - AUBURN CITY BOE

Retirement Plan: *

TRS T1 CONT Regular

Contribution Group: *

Contributing Teacher

Position Status: *

Regular

Scheduled Units Effective Date: *

02/01/2018

Scheduled Units to Work per week: *

5.00

Scheduled Type of Units Worked: *

Days

Scheduled Full Time Units per week: *

5.00

Payroll Frequency: *

Monthly

Units Annually Contracted to Work: *

187

Number of Months Paid: *

12

Enrollment Begin Date: *

08/13/2012

Enrollment End Date:

06/30/2019

Enrollment End Reason:

Change in Contrib Group

LOA Status Effective Date: *

08/13/2012

LOA Status: *

Not on Unpaid Leave

✕ Cancel

💾 Save Changes

Enrollment Validation Errors

Override Warnings: ☐

Error Code	Error Message	Severity	Category
ER0244	The employee has an Enrollment End Reason which requires a new enrollment. Please verify the Enrollment End Reason; if it is valid, please create a new enrollment for the employee.	Warning	GENERAL

Edit Enrollment

Record updated successfully.

Enrollment Validation Errors

Override Warnings: ☒

Error Code	Error Message	Severity	Category
ER0244	The employee has an Enrollment End Reason which requires a new enrollment. Please verify the Enrollment End Reason; if it is valid, please create a new enrollment for the employee.	Warning	GENERAL

New Enrollment

Record created successfully.

Enrollment Validation Errors

There are no validation errors found for this enrollment record.

Current Tier/Group:

Tier 1

Employer: *

TAUB - AUBURN CITY BOI

Retirement Plan: *

TRS T1 CONT Regular

Contribution Group: *

Contributing Administrative

Position Status: *

Regular

Scheduled Units Effective Date: *

07/02/2019

Scheduled Units to Work per week: *

5.00

Scheduled Type of Units Worked: *

Days

Scheduled Full Time Units per week: *

5.00

Payroll Frequency: *

Monthly

Units Annually Contracted to Work: *

238

Number of Months Paid: *

12

Enrollment Begin Date: *

07/02/2019

Enrollment End Date:

Enrollment End Reason:

Select Enrollment End Rea:

LOA Status Effective Date: *

07/02/2019

LOA Status: *

Not on Unpaid Leave

PR/ETPM: Employee Type Maintenance (v3.09)

1. Employee Type

2. Leave Information

3. Mandatory Ded

4. Substitute Info

Employee TypeADMN

Position DescADMINISTRATION

☒ Active Employee Type

Certified CodeC

Contract Days238.00

☐ Use Contract Date Range

Work Hrs/Day8.00

Work Months/Year12.0

Rate Code:

Sub's UnitsD

of Accrual Days2.51

☒ Salaried☐ Daily☐ Hourly

Leave UnitsD

Work Comp Code

☐ Overtime Computation

Pay Class Code

Work Comp Rate0%

☐ Exempt from Overtime

Sick Bank TypeS

Job Type

☐ State Based Salary

Ext Sub Days0

State Supp Type

☒ Elig For Sub

ACA OOC Code1A

☐ Update Budget Max☐ Confirm?

☐ Board Member

☐ Exempt From Matching Insurance

☐ Regular☐ Supplemental Pay☐ OVT☐ Substitute Pay☐ Pay Adj☐ Leave Adjustments

☐ Exempt From Retirement

☒ Build RSA Enroll Record

☐ Summer Position

☐ Report Units From IPAY

Payment Reason00Regular Pay

RSA Contribution Group014Administrative

RSA Position Status01Regular

Work Schedule Code238238 work days

Type of Rate of Pay03Yearly

Type of Units Worked00Days

FT Units Per Week5.00Days

Annual Units to Work238Days

PEEHIP PROCESS

- Download reports from The Retirement Systems of Alabama, Employer Self-Service website
 - <https://ess.rsa-al.gov>
 - Interface monthly deductions to Nextgen
- Balancing payroll withholdings to PEEHIP invoice
 - PEEHIP online correction invoice
 - How to find discrepancies

PEEHIP PROCESS

<https://ess.rsa-al.gov>



The Retirement Systems of Alabama

Employer Self-Service

Employer Home

Report

Services

PEEHIP

Account

Admin

Logout

TAUB - Jan Swiderski

PEEHIP Invoice Correction

PEEHIP Payroll Deduction File

PEEHIP Employer W-2 Reporting for Box 12 code DD

Welcome to The Retirement Systems of Alabama (RSA) Employer Self-Service web site. This site provides employers with a number of resources to accurately and efficiently report employee data to The Retirement Systems of Alabama (RSA). From this site, employers are able to interact with us in a number of ways, including:

- Reporting wages and contributions
- Processing EFT Payments
- Processing employee wage adjustments
- Adding or updating employer information
- Reviewing employer reports and invoices
- Verifying Personal Identification numbers (PIDs)
- Reviewing and verifying contribution rates
- Providing access to the secure message center

This tool is designed to improve the service that The Retirement Systems of Alabama (RSA) provides by offering secure online access to your account information.



The Retirement Systems of Alabama

[Employer Self-Service](#)[Employer Home](#)[Report](#)[Services](#)[PEEHIP](#)

Payroll Deduction File

From:

August 2019 ▼

ESS PIN: *

Generate

PEEHIP15188 - Notepad

File Edit Format View Help

H,AUBURN CITY BOE,TAUB,09-01-2019,09-30-2019,08-15-2019,1091

M,01,1,2,800.00,852

M,02,1,2,0.00,1092

M,03,1,2,0.00,1092

M,04,1,2,0.00,1092

M,05,1,2,0.00,1092

M,06,1,2,0.00,1092

M,07,1,2,0.00,1092

M,08,1,2,0.00,1092

M,09,1,2,0.00,1092

M,10,1,2,0.00,1092

M,11,1,2,0.00,1092

M,01,1,5,800.00,105

M,02,1,5,0.00,105

M,03,1,5,0.00,105

M,04,1,5,0.00,105

M,05,1,5,0.00,105

M,06,1,5,0.00,105

M,07,1,5,0.00,105

M,08,1,5,0.00,105

M,09,1,5,0.00,105

M,10,1,5,0.00,105

M,11,1,5,0.00,105

M,01,1,9,800.00,969

M,02,1,9,307.00,969

M,03,1,9,0.00,109

H,Auburn City Board of Education,TAUB,08-01-2018,08-31-2018,07-05-2018,967
M,01,101502834,800.00,101502834
M,02,101502834,30.00,101502834
M,03,101502834,0.00,101502834
M,04,101502834,0.00,101502834
M,05,101502834,0.00,101502834
M,06,101502834,38.00,101502834
M,07,101502834,0.00,101502834
M,08,101502834,0.00,101502834
M,09,101502834,0.00,101502834
M,10,101502834,0.00,101502834
M,11,101502834,0.00,101502834
M,01,111865105,800.00,111865105
M,02,111865105,0.00,111865105
M,03,111865105,0.00,111865105
M,04,111865105,0.00,111865105
M,05,111865105,0.00,111865105
M,06,111865105,0.00,111865105
M,07,111865105,0.00,111865105
M,08,111865105,0.00,111865105
M,09,111865105,0.00,111865105
M,10,111865105,0.00,111865105
M,11,111865105,0.00,111865105
M,01,115489862,800.00,115489862
M,02,115489862,30.00,115489862
M,03,115489862,0.00,115489862
M,04,115489862,0.00,115489862
M,05,115489862,0.00,115489862
M,06,115489862,38.00,115489862
M,07,115489862,0.00,115489862
M,08,115489862,0.00,115489862
M,09,115489862,0.00,115489862

****Save this file on your computer for future use.
This is the file that will be interfaced into
Nextgen for current month's payroll
processing.****



The Retirement Systems of Alabama

[Employer Self-Service](#)[Employer Home](#)[Report](#)[Services](#)[PEEHIP](#)[Account](#)[Admin](#)[Logout](#)[TAUB - Jan Swiderski](#)

View Reports

Report Name: ***Description:****Invoice
Date *****Format:****ESS PIN: ***[Refresh](#)[Death Notice](#)[Employer Certification](#)[Employee Information](#)[Search Demographics](#)[Employer Information](#)[Reports](#)[Message Center](#)[Question Center](#)

- Demographic Errors
- Non-Participating Part-Time Status
- Leave Without Pay
- Annual Checklist Report for TRS
- Exception Report for TRS
- Post-Retirement Employment
- Enrollment Submission Summary Report
- Current Enrollment Summary
- Error Summary
- Overtime Limit
- Current Enrollment Detail
- Temporary Employment
- Current Contribution Submission
- Outstanding Load Errors
- Contribution Adjustment
- Employer Invoice Report
- Employer Invoice Comparison
- Monthly Invoice
- Monthly Coverage

[Generate](#)

Employer Invoice

Public Education Employees Health Insurance Plan, July Month Invoice for August, 2018

School : Auburn City Board of Education School Code: TAUB Insurance Coverage Date: 8/01/2018 - 08/31/2018 Flex Coverage Date: 7/2018

Current Month Effective Section

Name	SSN	Inv Mo	Empl Class	Send / Rec	Allocation	Hosp / Med	Discount	Net Hosp / Med	Tobacco Surcharge	Wellness Surcharge	Cancer	Dental	Indemnity	Vision	Health	Dependent	Tot Prem	Tot System
ABNEY, V		8	1		800.00							50.00					50.00	850.00
ADAMS, B		8	1		800.00	307.00		307.00	50.00			50.00					407.00	1207.00
ADAMS, L		8	1		800.00	307.00		307.00				50.00					357.00	1157.00
ADAMSON, J		8	1		800.00	307.00		307.00	50.00			50.00					407.00	1207.00
Adcock, E		8	1		800.00													800.00
ADRIAN, T		8	1		800.00	207.00		207.00										1007.00
AGERTON, J		8	1		800.00													800.00
AGLAN, M		8	1		800.00	307.00		307.00										1157.00
AISTRUP, J		8	1		800.00													800.00
AKASHEH, S		8	1		800.00	307.00		307.00										1157.00
ALDRIDGE, J		8	1		800.00	30.00		30.00				38.00					68.00	868.00
ALEXANDER, J		8	1		800.00	307.00		307.00	50.00			50.00					407.00	1207.00
Allen, Bra		8	1		800.00												0.00	800.00
ALLEN, C		8	1		800.00	207.00		207.00				38.00					245.00	1045.00
ALLEN, JE		8	1		800.00	282.00		282.00									282.00	1082.00
ALLEN, K		8	1		800.00	307.00		307.00									307.00	1107.00
Allen, Mic		8	1		800.00	307.00	153.50	153.50									153.50	953.50
ALLISON, J		7	1												100.00		100.00	100.00
ALLISON, J		8	1		800.00	307.00		307.00				50.00		38.00			395.00	1195.00
ALLISON, J		8	1		800.00	207.00		207.00				38.00					245.00	1045.00
Alsobrook, J		7	1												100.00		100.00	100.00
Alsobrook, J		8	1		800.00	207.00		207.00									207.00	1007.00
Anderson, J		8	1		800.00												0.00	800.00
ANDERSON, J		8	1		800.00	30.00	12.00	18.00									18.00	818.00
ANDERSON, J		8	1		800.00	207.00		207.00				50.00					257.00	1057.00
ANDERSON, J		8	1		800.00	207.00		207.00				50.00					257.00	1057.00
ANTOINETTE, J		8	1		800.00	307.00		307.00				50.00					357.00	1157.00
ANTONIA, J		8	1		800.00	307.00		307.00				50.00		38.00			395.00	1195.00
ARANDA, J		8	1		800.00	282.00		282.00				50.00					332.00	1132.00
ARMSTRONG, J		8	1		800.00	307.00		307.00				50.00					357.00	1157.00
ARNOLD, J		8	1		800.00												0.00	800.00
ASHER-M, J		8	1		800.00	307.00		307.00									307.00	1107.00
AUGSBURY, J		8	1		800.00	307.00		307.00				50.00					357.00	1157.00
...	

Save this file on your computer for future use. This file will be beneficial when balancing payroll deductions with the PEEHIP invoice.

PEEHIP INVOICE UPLOAD TO NEXTGEN

Menu

MCAI

Budget Work

Human Resources

Payroll

PR Setup

Employee Maintenance

Position Control Interface

PR Check Processing

Monthly Procedures

Employer Paid Benefits

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Application or Transaction Name

Ap

Employer Paid Benefits

AEA Procedures

Retirement Procedures

Bank Statement Reconciliation

Insurance Procedures

Third-Party Deduction Import

Time & Attendance Import

Time & Attendance Ex

MTD Check Register

MTD Deduction Repo

MTD Combined Dedu

MTD Matching Deduc

MTD Wage Base % De

Bond & Limit Deducti

New Hire Report

PR/PHIP: Third-Party Deduction Import (v3.08)

File Definition Name

PEEHIP

Alabama PEEHIP Interface (Import)

Processing Month

July

Pay Periods

☒ Monthly

Payroll Run Id

july312018a

july312018a, Ded Cycle 1

☐ Semi-Monthly

☐ Bi-Weekly

☐ Weekly

File Location \Name

\\tsclient\p\PEEHIP\PEEHIP.TXT

Browse

View

Enter Selection Criteria, Click Enter(F1) To Generate Report

PR/PHIP: Third-Party Deduction Import (v3.08)

File Definition Name: Alabama PEEHIP Interface (Import)

Error Listing

Employee	SSN	Employee Name	Code	Ded	Amt/Pct	Limit	Message
0	4	,	01		800.00	0	Employee Number Does Not Ex
0	4	,	02		0.00	0	Employee Number Does Not Ex
0	4	,	03		0.00	0	Employee Number Does Not Ex
0	4	,	04		0.00	0	Employee Number Does Not Ex
0	4	,	05		0.00	0	Employee Number Does Not Ex
0	4	,	06		0.00	0	Employee Number Does Not Ex
0	4	,	07		0.00	0	Employee Number Does Not Ex
0	4	,	08		0.00	0	Employee Number Does Not Ex
0	4	,	09		0.00	0	Employee Number Does Not Ex
0	4	,	10		0.00	0	Employee Number Does Not Ex
0	4	,	11		0.00	0	Employee Number Does Not Ex
3278	4	AISTRUP, SHELLEY A.,	01		800.00	0	Employee Is Terminated
3278	4	AISTRUP, SHELLEY A.,	02		0.00	0	Employee Is Terminated
3278	4	AISTRUP, SHELLEY A.,	03		0.00	0	Employee Is Terminated
3278	4	AISTRUP, SHELLEY A.,	04		0.00	0	Employee Is Terminated
3278	4	AISTRUP, SHELLEY A.,	05		0.00	0	Employee Is Terminated
3278	4	AISTRUP, SHELLEY A.,	06		0.00	0	Employee Is Terminated
3278	4	AISTRUP, SHELLEY A.,	07		0.00	0	Employee Is Terminated

Close Error Listing

Review /Print Error Listing, then Click the Close Button to Continue
Click Clear to ReEnter Selection Criteria or Exit to End

What caused upload error for the entries listed?

- Employee is terminated:
 - Have you previously withheld for allocations earned? Amounts will need to be removed from your PEEHIP invoice.
 - Allocations earned but not previously withheld? Additional check to PEEHIP is needed,
- Employee does not exist:
 - New employee not in Nextgen yet? Additional check to PEEHIP is needed.
 - No record of this social security number with your district? Amounts will need to be removed from your PEEHIP invoice.



File Definition Name

PEEHIP

Alabama PEEHIP Interface (Import)

Deduction Records Selected to Update

Uncheck any change you do not want to occur

Employee	SSN	ERR...	Ded	Job	Employee	Employer	Limit	Message	St...
<input checked="" type="checkbox"/> 2487	41		20	0	N/A	800.00	0	Change	Ac
<input checked="" type="checkbox"/> 3710	14		21	0	30.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 3923	59	RIE,	21	0	282.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 4005	41		21	0	30.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 4022	62	NN ...	21	0	30.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 4022	62	NN ...	25	0	38.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 4144	49		20	0	N/A	0.00	0	Change	Ac
<input checked="" type="checkbox"/> 4144	49		21	0	0.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 4144	49		23	0	0.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 4149	41	ANE,	20	0	N/A	0.00	0	Change	Ac
<input checked="" type="checkbox"/> 4149	41	ANE,	21	0	0.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 4149	41	ANE,	25	0	0.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 4154	42		20	0	N/A	0.00	0	Change	Ac
<input checked="" type="checkbox"/> 4154	42		21	0	0.00	N/A	0	Change	Ac
<input checked="" type="checkbox"/> 4257	41		21	0	0.00	N/A	0	Change	Ac
<input type="checkbox"/> 1000	25		20	0	N/A	800.00	0	No Change	Ac
<input type="checkbox"/> 1000	25		21	0	282.00	N/A	0	No Change	Ac

Click on message to sort by message type

File Definition Name

PEEHIP

Alabama PEEHIP Interface (Import)

Updated Deductions

Employee	SSN	Employee Name	Ded	Job	Employee	Employer	Message
2487	41	NE...	20	0	N/A	800.00	Deduction Changed
3710	14		21	0	30.00	N/A	Deduction Changed
3923	59	E ...	21	0	282.00	N/A	Deduction Changed
4005	41	YK...	21	0	30.00	N/A	Deduction Changed
4022	62	LE...	21	0	30.00	N/A	Deduction Changed
4022	62	LE...	25	0	38.00	N/A	Deduction Changed
4144	49		20	0	N/A	0.00	Deduction Changed
4144	49		21	0	0.00	N/A	Deduction Changed
4144	49		23	0	0.00	N/A	Deduction Changed
4149	41	A ...	20	0	N/A	0.00	Deduction Changed
4149	41	A ...	21	0	0.00	N/A	Deduction Changed
4149	41	A ...	25	0	0.00	N/A	Deduction Changed
4154	42	,	20	0	N/A	0.00	Deduction Changed
4154	42	,	21	0	0.00	N/A	Deduction Changed
4257	41	,	21	0	0.00	N/A	Deduction Changed

Fi

15 Deductions Updated Sucessfully!

0 Deduction Adjustments Generated.

Click Print to Print List View, Clear to ReEnter Selection Criteria, or Exit to End

PEEHIP INVOICE CORRECTIONS



The Retirement Systems of Alabama

[Employer Self-Service](#)[Employer Home](#)[Report](#)[Services](#)[PEEHIP](#)[Account](#)[Admin](#)[Logout](#)[TAUB - Jan Swiderski](#)[PEEHIP Invoice Correction](#)[PEEHIP Invoice Correction](#)[PEEHIP Payroll Deduction File](#)[PEEHIP Employer W-2 Reporting for Box 12 code DD](#)

Please Select Invoice Date.

Invoice Date:

Aug 2019 - Regular (PR2019TAUB08F0009)

Jul 2019 - Regular (PR2019TAUB07F0008)

Jun 2019 - Regular (PR2019TAUB06F0007)

May 2019 - Regular (PR2019TAUB05F0006)

The Retirement Sys

ms of Alabama

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Effective month of coverage.
For premiums August pay is
for September coverage.
Dependent care or flex
spending effective month is
same month as payroll.

PEEHIP Invoice Correction

August for September 2019 Regular Invoice (PR2019TAUB08F0009)

Invoice Date:

Aug 2019 - Regular (PR2019TAUB08F0009) ▾

[View Corrections Report](#)

Name SSN PID	Original Total Allocation	Original Total Premium	Adjusted Total Allocation	Adjusted Total Premium	Allocation Difference	Premium Difference	Explanation for change	Effective Y/M
Originally billed:	835,200.00	206,330.33	0.00	0.00	835,200.00	206,330.33		
Expected Check Amount:					835,200.00	206,330.33		
					1,041,530.33			

SSN:

Or

PID:

Add Correction

Effective Year:

2019 ▾

Effective Month:

Sep ▾



PEEHIP Invoice Detail



SSN: [REDACTED]

PID: [REDACTED]

Name: BETTY WEEDEN

Original Totals

System: 800.00

Premium: 0.00

Corrected Amounts

Effective Year:

2019 ▼

Effective Month:

Sep ▼

Allocation: 800.00

Cancer:

Hosp/Med:

Dental:

Discount:

Indemnity:

Net

Hosp/Med:

Vision:

Tobacco:

Health:

Wellness:

Dependent:

Explanation:

Save

Cancel

PEEHIP Invoice Detail



SSN: [REDACTED]

PID: 1 [REDACTED]

Name: BETTY WEEDEN

Original Totals

System: 800.00

Premium: 0.00

Corrected Amounts

Effective Year:

2019 ▼

Effective Month:

Sep ▼

Allocation: 800.00

Cancer:

Hosp/Med: 307.00

Dental: 50.00

Discount:

Indemnity:

Net

Hosp/Med: 307.00

Vision:

Tobacco:

Health:

Wellness:

Dependent:

Explanation:

new employee. family coverage added

Save

Cancel

August for September 2019 Regular Invoice (PR2019TAUB08F0009)

Invoice Date: Aug 2019 - Regular (PR2019TAUB08F0009) ▾

[View Corrections Report](#)

Name	SSN	PID	Original Total Allocation	Original Total Premium	Adjusted Total Allocation	Adjusted Total Premium	Allocation Difference	Premium Difference	Explanation for change	Effective Y/M
Originally billed:			835,200.00	206,330.33	0.00	0.00	835,200.00	206,330.33		
Edit Delete	BETTY WEEDEN		800.00	0.00	800.00	357.00	0.00	357.00	new employee. family coverage added.	2019/9
							835,200.00	206,687.33		
Expected Check Amount:							1,041,887.33			

SSN:

[illegible]

Or

PID:

[illegible]

Add Correction

Effective Year:

2019 ▼

Effective Month:

Sep ▼

Unit Code:	TAUB
School:	AUBURN CITY BOE
Invoice:	August for September, 2019

Invoice Type:	Regular
Invoice Number:	PR2019TAUB08F0009

Name	PID	Eff Date	Contrib.	Out of Pocket	Hosp/M	Disc	Net Hos	Tobac	Wellness	Cancer	Dental	Indem	Vision	Health	Dep	Tot Change	Exp. for Change	
Originally Billed			835,200.00	206,330.33													1,041,530.33	
WEEDEN, BETTY	11037551	2019 / 9	0.00	357.00	307.00	0.00	307.00	0.00	0.00	0.00	50.00	0.00	0.00	0.00	0.00	357.00	new employee. family coverage added.	
Total Adjustments			0.00	357.00														
Exp Check Tot:			835,200.00	206,687.33													1,041,887.33	



The Retirement Systems of Alabama

[Employer Self-Service](#)[Employer Home](#)[Report](#)[Services](#)[PEEHIP](#)[Account](#)[Admin](#)[Logout](#)[TAUB - Jan Swiderski](#)

Invoices

The Invoices module allows employers to manage invoices and the invoice will open in a new browser window.

Select the invoices and click **Pay Invoice**. To view an individual invoice, click the appropriate link

Invoices

☒ Show all

☐ Recent Invoices:

--Select--

☐ Date Range:

to

[Show](#)

Employer:

TAUB - AUBURN CITY BOE

Type:

Select Invoice Type

☐ Show Paid Invoices

Invoice	Employer	Invoice Type	Date	Due Date	Amount	Balance Due	Status
<input type="checkbox"/> PR2019TAUB08F0009	TAUB - AUBURN CITY BOE	PEEHIP	08/12/2019	09/12/2019	\$1,041,887.33	\$1,041,887.33	Unpaid

[Pay Invoice](#)

BALANCING PAYROLL TO PEEHIP INVOICE

- Run combined vendor deductions report for PEEHIP deductions; save in Excel
- Combine in Excel combined deductions report with PEEHIP invoice
- Add formula to show differenced

The screenshot displays a payroll software interface. On the left, a tree view shows the menu structure under 'MCAI', with 'Payroll' and 'Monthly Procedures' highlighted. The 'Monthly Procedures' sub-menu is expanded, showing various reports, with 'MTD Combined Deduction Report' selected. On the right, the 'MTD Combined Deduction Report (v3.03)' window is open. It features a date range selector set to '06/30/2018' through '06/30/2018', with 'Mask SSN on Report' checked. The 'Report Columns' section lists six columns with descriptions: Column 1 (PHPEMPR), Column 2 (PHPEMPL), Column 3 (TOBAC/wellnes), Column 4 (PHP DENTAL), Column 5 (indem/flex/dc/c), and Column 6 (PHP VISION). The 'Ded Types' section has 'Both' selected. The 'Deductions To Use For Selected Column' table lists various deductions, with 'PEEHIP - EMPLOYER' (Ded # 20) checked. The 'Report Destination' section has 'To Report Viewer' selected. A 'Setup' button is located at the bottom right. The text 'Report Criteria Loaded' is displayed in red at the bottom of the window.

Application or Transaction Name

Employer Paid Benefits

AEA Procedures

Retirement Procedures

Bank Statement Reconciliation

Insurance Procedures

Third-Party Deduction Import

Time & Attendance Import

Time & Attendance Export

MTD Check Register

MTD Deduction Report

MTD Combined Deduction Report

MTD Matching Deductions by Job

MTD Wage Base % Ded Report

Bond & Limit Deduction Report

New Hire Report

PR/MEND: MTD Combined Deduction Report (v3.03)

☒ Check Date ☐ Post Date

Check Date From: 06/30/2018 Thru 06/30/2018 ☐ Mask SSN on Report

Report Columns

☒ Column 1 Desc 1 PHPEMPR

☐ Column 2 Desc 2 PHPEMPL

☐ Column 3 Desc 3 TOBAC/wellnes

☐ Column 4 Desc 4 PHP DENTAL

☐ Column 5 Desc 5 indem/flex/dc/c

☐ Column 6 Desc 6 PHP VISION

Ded Types

☐ Mandatory

☐ Non-Mand

☒ Both

☐ Employee

☒ Employer

Deductions To Use For Selected Column

Ded #	Description
<input type="checkbox"/> 3	SOCIAL SECURITY W/H...
<input type="checkbox"/> 4	MEDICARE WITHHOLDI...
<input type="checkbox"/> 7	UNEMPLOYMENT COMP...
<input type="checkbox"/> 11	RETIREMENT
<input checked="" type="checkbox"/> 20	PEEHIP - EMPLOYER
<input type="checkbox"/> 121	UNREIM MEDICAL
<input type="checkbox"/> 134	AM FID DEPENDANT C...
<input type="checkbox"/> 135	PEEHIP REFUND
<input type="checkbox"/> 136	ADPTL PEEHIP EMPLO...

Report Destination

☒ To Report Viewer ☐ To Grid ☐ To File

☐ To Printer Jans HP LaserJet M606 PCL 6 (redirected)

Setup

Report Criteria Loaded

EMPLOYEE NAME	EMP#	SOC.SEC.#	TOTAL	Name	SSN	Tot System	Difference
ABNEY		9	850.00	ABNEY		850.00	0.00
ADAM		87	1,207.00	ADAMS		1207.00	0.00
ADAM		77	1,157.00	ADAMS		1157.00	0.00
ADAM		23	1,207.00	ADAMS		1207.00	0.00
FULLER		00	830.00	FULLER		830.00	0.00
GARCIA		31	830.00	GARCIA		830.00	0.00
GARCIA		01	1,157.00	GARCIA		1157.00	0.00
GARDNER		32	800.00	GARDNER		800.00	0.00
GARLIN		47	980.20	GARLIN		800.00	-180.20
HARRIS		41	1,496.00	CERIO		868.00	-628.00
				MORRIS		1095.00	1095.00
OSWALD		54	868.00	OSWALD		1132.00	264.00
OTOOL		88	1,057.00	OTOOL		1057.00	0.00
OWEN		57	800.00	OWEN,		800.00	0.00
OZMENT		28	868.00	OZMENT		868.00	0.00
PACE		56	1,195.00	PACE,		1195.00	0.00
TERHUNE		4	1,373.66	TERHUNE		1373.66	0.00
TERRY		26	880.00	TERRY		880.00	0.00
THOMAS		79	1,134.67	THOMAS		868.00	-266.67
THOMAS		96	868.00	THOMAS		868.00	0.00
THOMAS		53	1,107.00	THOMAS		1107.00	0.00
THOMAS		27	868.00	THOMAS		868.00	0.00
THOMAS		66	868.00	THOMAS		868.00	0.00
WILLIAM		45	1,107.00	WILLIAM		1107.00	0.00
WILLIAM		24	1,157.00	WILLIAM		1157.00	0.00
WILLIAM		20	830.00	WILLIAM		830.00	0.00
WILLS		09	830.00	WILLS,		830.00	0.00
WILSON		50	830.00	WILSON		830.00	0.00
WILSON		41	1,132.00	WILSON		1132.00	0.00
WILSON		71	1,157.00	WILSON		1157.00	0.00
WILSON		37	830.00	WILSON		830.00	0.00
WINE		34	800.00	Wine, H		800.00	0.00

Differences should be addressed on the invoice correction or by issuing an additional payment to PEEHIP

TEACHERS RETIREMENT MANDATORY DEDUCTION

- How does your system handle deductions for Tier 1 and Tier 2
 - One deduction: Master deduction set to one tier, manually change deduction percentages for employees on different tier.
 - Two deductions: Select correct deduction number when entering deductions for new employee.
- Verify correct retirement tier through Employer ESS
- One monthly remittance after end of month payroll is process. Due by 10th day of following month.
 - Generate contribution report through the Application Center in Nextgen
 - Upload contribution report through Employer ESS
 - <https://ess.rsa-al.gov/>
 - User Name and Password will be unique to each employee

RETIREMENT DEDUCTION SET UP

The screenshot shows a software application window titled 'Menu'. On the left is a tree view of the application's menu structure. The 'PR Setup' folder is expanded, and 'Deduction Master Maint' is highlighted. On the right is a list of application or transaction names, with 'Deduction Master Maint' also highlighted.

Application or Transaction Name	PR/I
PR Parameter Reports	
HR Parameter Maintenance	P
HR Code Maintenance I	P
HR Code Maintenance II	P
HR Code Maintenance III	P
Payroll Code Maintenance I	
Payroll Code Maintenance II	
Payroll Code Maintenance III	
PR Parameter Maintenance I	
PR Parameter Maintenance II	
Tax Table Maintenance	
Deduction Master Maint	
Employee Type Maintenance	
Leave Code Maintenance	
Salary Schedule Maintenance	
Component Mask Maintenance	
Check Validation Tables	

PR/DEDM: Deduction Master Maint (v3.12)

Deduction # Ded. Desc. Short Desc

1. General **2. Deduction Parameters** **3. Deduction Type Options**

Ded Type Retirement Min Ded Amount

W2 Code 1 Section 414(h) Plan Ded Reference #

W2 Code 2

State Benefit Code

Employee Vendor # RETIREMENT SYSTEMS OF ALA P O BOX 302150

Employer Vendor # RETIREMENT SYSTEMS OF ALA (No Address 2)

Ded Rep Type State Retirement Reporting MONTGOMERY, AL 36130-2150

Empl Liab Comp Value

RETIREMENT WITHHOLDI - Default Object Value - SYST

Inquire Mode: Enter the Key Word for the Desired Record

PR/DEDM: Deduction Master Maint (v3.12)

Deduction # 11 Ded. Desc. RETIREMENT Short Desc RET

1. General 2. Deduction Parameters 3. Deduction Type Options

Sheltered From

- ☒ Federal Tax
- ☐ State Tax
- ☐ Social Security
- ☐ Medicare
- ☐ City Tax
- ☐ County Tax
- ☐ Retirement
- ☐ SUI Tax
- ☒ Garnishment

☒ Process Thru Payroll ☐ Mandatory Deduction ☐ Inactive

☒ Print Check ☐ Mandatory By Empl Type

☐ Round Ded Amount ☒ Store Deduction Wages

☐ Local Tax Fringe Benefit ☒ Allow on Empl Master

☐ Ded Maintainable ☐ Allow on Empl Job

☐ Qualify Retirement

Employee DT Amt \$ ☐ 0.00 DT % ☒ 7.5%

Employer DT Amt \$ ☐ 0.00 DT % ☒ 12.24%

Wage Base Code

☒ Actual Pay Pd Earnings

☐ Full Time Earnings

☐ State Based Sale

Inquire Mode: Enter the Key Word for the Desired Record

Using one deduction - choose which Tier to populate. Using two deductions you will set up each Tier on separate deduction numbers.

PR/DEDM: Deduction Master Maint (v3.12)

Deduction # 11 Ded. Desc. RETIREMENT Short Desc RET

1. General 2. Deduction Parameters 3. Deduction Type Options

Employer Liability AllButFund Value 2021300000000000000000009011

Comp

Employer Expense Object Value 220

Comp

And Value

When Contains

Empl Ded. Limit 0.00 Empl Wage Limit 0.00 Empr Wage Limit 0.00 Garn. % 0%

Minimum Amt 0.00 Minimum Hrs 0 Bond Denom 0.00 Bond Price 0.00

Premium Cost Per \$1000 0.00 DEI Account 00000000 Retire Code RET

Inquire Mode: Enter the Key Word for the Desired Record

ADDING RETIREMENT DEDUCTION TO EMPLOYEE

Job Number Employee Level Deductions Employee Status: Active

Deduction Num RET Calendar Year

Employee Portions

Monthly	<input type="text" value="6%"/>	Percent	<input type="button" value="View Board Portions"/>		
Pay Periods	<input type="text" value="6%"/>	<input type="text" value="6%"/>	<input type="text" value="6%"/>	<input type="text" value="6%"/>	<input type="text" value="6%"/>
Quarters	271.78	277.70	56.28	0.00	605.76

☒ Active ☐ Future Status Change

Benefit Code

Division

Sheltered From

FWH - Yes	MC - No	GARN - Yes
SWH - No	CITY - No	
SS - No	CNTY - No	
RET - No	SUI - No	

Limit
Total Ded.
Priority
Ref#
Plaintiff

Job Number Employee Level Deductions Employee Status: Active

Deduction Num RET Calendar Year

Board Portions

Monthly	<input type="text" value="11.01%"/>	Percent	<input type="button" value="View Employee Portions"/>		
Pay Periods	<input type="text" value="11.01%"/>	<input type="text" value="11.01%"/>	<input type="text" value="11.01%"/>	<input type="text" value="11.01%"/>	<input type="text" value="11.01%"/>
Quarters	498.70	509.58	103.27	0.00	1,111.55

☒ Active ☐ Future Status Change

Benefit Code

Division

Sheltered From

FWH - Yes	MC - No	GARN - Yes
SWH - No	CITY - No	
SS - No	CNTY - No	
RET - No	SUI - No	

Limit
Total Ded.
Priority
Ref#
Plaintiff

DETERMINING TIER STATUS



The Retirement Systems of Alabama

[Employer Self-Service](#)[Employer Home](#)[Report](#)[Services](#)[PEEHIP](#)[Account](#)[Admin](#)[Logout](#)[TAUB - Jan Swiderski](#)[Enrollment LOA and Work Units History Validation Errors](#)

There are no validation errors found for this enrollment record.

[Add/Edit Enrollments](#)[Personal Information](#)[Death Notice](#)[Employer Certification](#)[Employee Information](#)[Search Demographics](#)[Employer Information](#)[Reports](#)[Message Center](#)[Question Center](#)

First Name: ELIZABETH

Middle Name: P

Last Name: SWIDERSKI

Suffix:

SSN: XXX-XX-0610

PID: XXXXXXXX

Current Tier/Group:

PR/EMNT Name: SWIDERSKI, ELIZABETH PAULINE SSN: 423-41-0610 HQ: Not Approved Cert: Non-Certified (v3.94)

Employee #	Name (Last, First M)	SSN	Person Id	Current Form	Document
4095	SWIDERSKI, ELIZABETH PAULINE		2910	Employee Data	

Employee Status: Active

Employee Hire Date: 8 / 2 / 2019

Reporting Loc.: 0075 RICHLAND ELEMENTARY SCHOOL

Check Location: 0075 RICHLAND ELEMENTARY SCHOOL

Default Pay Period: M Monthly

Retirement

- Retirement Withheld
- Do Not Withhold
- Use Default

RSA Flag

- Contributing
- Non-Participating
- Do Not Report

Retire Tier: 02

Comments

PR/EMNT Name: SWIDERSKI, ELIZABETH PAULINE SSN: 423-41-0610 HQ: Not Approved Cert: Non-Certified (v3.94)

Employee #	Name (Last, First M)	SSN	Person Id	Current Form	Document
4095	SWIDERSKI, ELIZABETH PAULINE		2910	Deduction Data	

Job Number: Employee Level Deductions

Deduction Num: 11 RET Calendar Year: 2019

Employee Status: Active

Show/Hide Deductions

Limit: 0

Total Ded.: 0.00

Priority: 0

Ref#

Plaintiff

Employee Portions

Monthly: 6% Percent View Board Portions

Pay Periods: 6% 6% 6% 6% 6%

Quarters: 0 0 0 0 0

☒ Active ☐ Future Status Change 12/27/2001

Benefit Code

Division: 0

Sheltered From

FWH - Yes	MC - No	GARN - Yes
SWH - No	CITY - No	
SS - No	CNTY - No	
RET - No	SUI - No	

Add/Update Item

LEAVE TYPES

- Sick Leave
 - As mandated by the State of Alabama, sick leave can only be taken for reasons outlined Title 16, Chapter 1, Section 16-1-18.1 of the Code of Alabama.
- Personal Leave
 - 2 Free personal leave days given to full time employees.
 - If not used may be converted to sick leave or paid to certified employees if requested
- Vacation Leave
 - The local board of education may adopt policies and procedures to provide paid vacations to employees
- Sick Leave Bank
 - Membership is optional
 - Must request to borrow days
 - Must repay borrowed days as sick leave is earned
 - Withhold any days owed from last pay
- Catastrophic Sick Leave
 - Must be a member of the sick leave bank to request catastrophic leave
 - Must qualify for catastrophic leave
 - Must exhaust all leave prior to receiving donated days
- FMLA
 - Employee may request or Employer may mandate FMLA
 - Conditions must meet FMLA requirements
 - Develop policy to cover if FMLA and employee's leave runs concurrently

****It is very important for your system to have policies governing each leave type****

ENTERING LEAVE

- Nextgen will allow an employee to use the sick leave day that is earned during the current month
- If manually keying leave in Input pay, the system will not allow you to key more days than employee has accrued
- If employee is members of the Sick Leave Bank, you will be prompted to “borrow from the bank”
 - Only answer “yes” if employee has requested to borrow days
- If leave is imported, system will convert days not covered to leave without pay
- Depending on your policy, you may need to make corrections to the without pay conversion

INPUT LEAVE

Job Number Employee Type: 13TC

TEACHER - 13 MONTH

Job Status: Active

Leave Information

Leave Yr Leave Type

Leave Units: Day

Allowed Max at EOY

Accrual Date ☒ Active

Add/Update Leave Item

Beg. Bal. Accrued YTD Taken YTD Balance

Type	Description	All...	Beg Bal	Accrued	Taken	Max.	Balance	Active	Acc. Date	Adjust...	
1	Sick Leave	9.00	6.00	0.00	0.00	999.00	1.00	Yes	08/03/20...	-5	
2	Certified P...	3.00	0.00	3.00	0.00	3.00	3.00	Yes	8/3/2017	0.00	
SB	Sick Bank	0.00	0.00	0.00	0.00	0.00	5.00	Yes	08/07/20...	5	

View Fringe Benefit Data



Record Changed

Menu			
MCAI		Application or Transaction Name	
Budget Work		Payroll Run ID Maintenance	PR
Human Resources		Input Pay and Leave	PR
Payroll		Input Pay & Leave Edit Report	PR
+ PR Setup		Pre- Compute Exceptions	PR
+ Employee Maintenance		Compute Payroll	PR
+ Position Control Interface		Payroll Register	PR
- PR Check Processing		Print Payroll Checks	PR
+ Regular Checks		Payroll Check Register	PR
Supplemental Checks		Generate ACH Direct Deposit	PR
Vendor Deduction Checks		Post Payroll to GL	PR
Offline Checks		PR Check Update	PR
Void Checks		Computed Reports	
Miscellaneous PR Procedures			
PR Check Reports			
Salary Transfer			
- Monthly Procedures			

PR/IPAY: Input Pay and Leave (v4.29)

Payroll Id: july312018a Employee Number: 4022 Job Number: 1 13TC - TEACHER - 13 MONTH
 Personnel Hire Date - 08/03/2017
 july312018a SSN: XXX-XX-0721

1. Leave 2. Hourly/Daily 3. Pay Adjust 4. Ex Substitute 5. Supplemental

Date: 6 / 5 / 2018 Type: 1 Lv Days: 1 Member of Sick Bank

Sub # Sub Job Sub Rate Sub Days Adj. Code Adj. Rate Add

Date	Type	U...	Adj. ...	Adj. ...	Subst...	J...	Rate	Un...	Trans Id	Emp ...	Sub ...
6/4/...	1 - Sick Leave	1...	0.00						20180807...	D	D

Answer "yes" to the prompt, Nextgen allows you to add the sick leave day.

Input Pay Maintenance

? Would You Like To Use Sick Bank Withdrawal?

Yes No

PR/IPAY: Input Pay and Leave (v4.29)

Payroll Id: july312018a Employee Number: 4022 Job Number: 1 13TC - TEACHER - 13 MONTH
 Personnel Hire Date - 08/03/2017
 july312018a SSN: XXX-XX-0721

1. Leave 2. Hourly/Daily 3. Pay Adjust 4. Ex Substitute 5. Supplemental

Date: 6 / 6 / 2018 Type: 1 Lv Days: 1 Member of Sick Bank

Sub # Sub Job Sub Rate Sub Days Adj. Code Adj. Rate Add

Date	Type	U...	Adj. ...	Adj. ...	Subst...	J...	Rate	Un...	Trans Id	Emp ...	Sub ...
6/4/...	1 - Sick Leave	1...	0.00						20180807...	D	D
6/5/...	SB - Sick Bank	1...	0.00						20180807...	D	D

PR/IPAY: Input Pay and Leave (v4.29)

Payroll Id: july312018a Employee Number: 4022 Job Number: 1 13TC - TEACHER - 13 MONTH
 Personnel Hire Date - 08/03/2017
 july312018a SSN: XXX-XX-0721

1. Leave 2. Hourly/Daily 3. Pay Adjust 4. Ex Substitute 5. Supplemental

Date: 6 / 5 / 2018 Type: 1 Lv Days: 1 Member of Sick Bank

Sub # Sub Job Sub Rate Sub Days Adj. Code Adj. Rate

Add

Date	Type	U...	Adj. ...	Adj. ...	Subst...	J...	Rate	Un...	Trans Id	Emp ...	Sub ...
6/4/...	1 - Sick Leave	1...	0.00						20180807...	D	D

Answer "no" to the prompt, Nextgen will require you to change leave type to take

Input Pay Maintenance

? Would You Like To Use Sick Bank Withdrawal?

Yes No

PR/IPAY: Input Pay and Leave (v4.29) Browse to the Previous Record (F8)

Payroll Id: july312018a Employee Number: 4022 Job Number: 1 13TC - TEACHER - 13 MONTH
 Personnel Hire Date - 08/03/2017
 july312018a SSN: XXX-XX-0721

1. Leave 2. Hourly/Daily 3. Pay Adjust 4. Ex Substitute 5. Supplemental

Date: 6 / 6 / 2018 Type: 1 Lv Days: 1 Member of Sick Bank

Sub # Sub Job Sub Rate Sub Days Adj. Code Adj. Rate

Add

Date	Type	U...	Adj. ...	Adj. ...	Subst...	J...	Rate	Un...	Trans Id	Emp ...	Sub ...
6/4/...	1 - Sick Leave	1...	0.00						20180807...	D	D
6/5/...	SB - Sick Bank	1...	0.00						20180807...	D	D

This Leave Can Not Be Entered at This Time - Check Leave Balance

PERSONAL LEAVE

- Each full time employee is given 2 free personal leave days per year
- Each system can allow up to an addition 3 purchased personal leave days per year
- Personal leave days not taken are converted to sick leave at the end of the leave year
 - Certified employees can request to be paid for their unused free personal leave days
- Personal leave days entered as personal leave. The system will determine free or purchased.
 - Set personal leave dock amount in Nextgen

SET PERSONAL LEAVE DOCK AMOUNT

The screenshot shows the MCAI application menu on the left and a list of applications on the right. The 'Employee Maintenance' folder is expanded, and 'Payroll Code Maintenance II' is highlighted. The application list on the right also has 'Payroll Code Maintenance II' highlighted.

Menu

- MCAI
 - Budget Work
 - Human Resources
 - Payroll
 - PR Setup
 - Employee Maintenance**
 - Position Control Interface
 - PR Check Processing
 - Regular Checks
 - Supplemental Checks
 - Vendor Deduction Checks
 - Offline Checks
 - Void Checks
 - Miscellaneous PR Procedures
 - PR Check Reports
 - Salary Transfer
 - Monthly Procedures

Application or Transaction Name

- PR Parameter Reports
- HR Parameter Maintenance
- HR Code Maintenance I
- HR Code Maintenance II
- HR Code Maintenance III
- Payroll Code Maintenance I
- Payroll Code Maintenance II**
- Payroll Code Maintenance III
- PR Parameter Maintenance I
- PR Parameter Maintenance II
- Tax Table Maintenance
- Deduction Master Maint
- Employee Type Maintenance
- Leave Code Maintenance
- Salary Schedule Maintenance
- Component Mask Maintenance
- Check Validation Tables

If you have different amounts for Certified and Classified employees, you will need to establish two separate adjustment codes

The screenshot shows the 'PR/PDC2: Payroll Code Maintenance II (v3.05)' form. The 'Adjustment Code' field is set to 'CPD'. The 'Adj Code Description' field contains 'Cert Personal Dockin'. The 'Flat Rate' checkbox is checked, and the 'Value' field is set to 90.20.

PR/PDC2: Payroll Code Maintenance II (v3.05)

1. Termination Code	2. Pay Period Code	3. Summer Pay Flag	4. Position Tenure Code
9. Hourly/Daily Code	10. Work Sched Code	11. Work Sched Units	
5. Contract Month Code	6. Fringe Benefit Type	7. Input Pay Type	8. Adjustment Code

Adjustment Code: **CPD**

Adj Code Description: **Cert Personal Dockin**

☒ Retirement Wage ☐ Employee's Rate

☐ Charge Back ☐ Substitute's Rate

☒ Flat Rate **90.20**

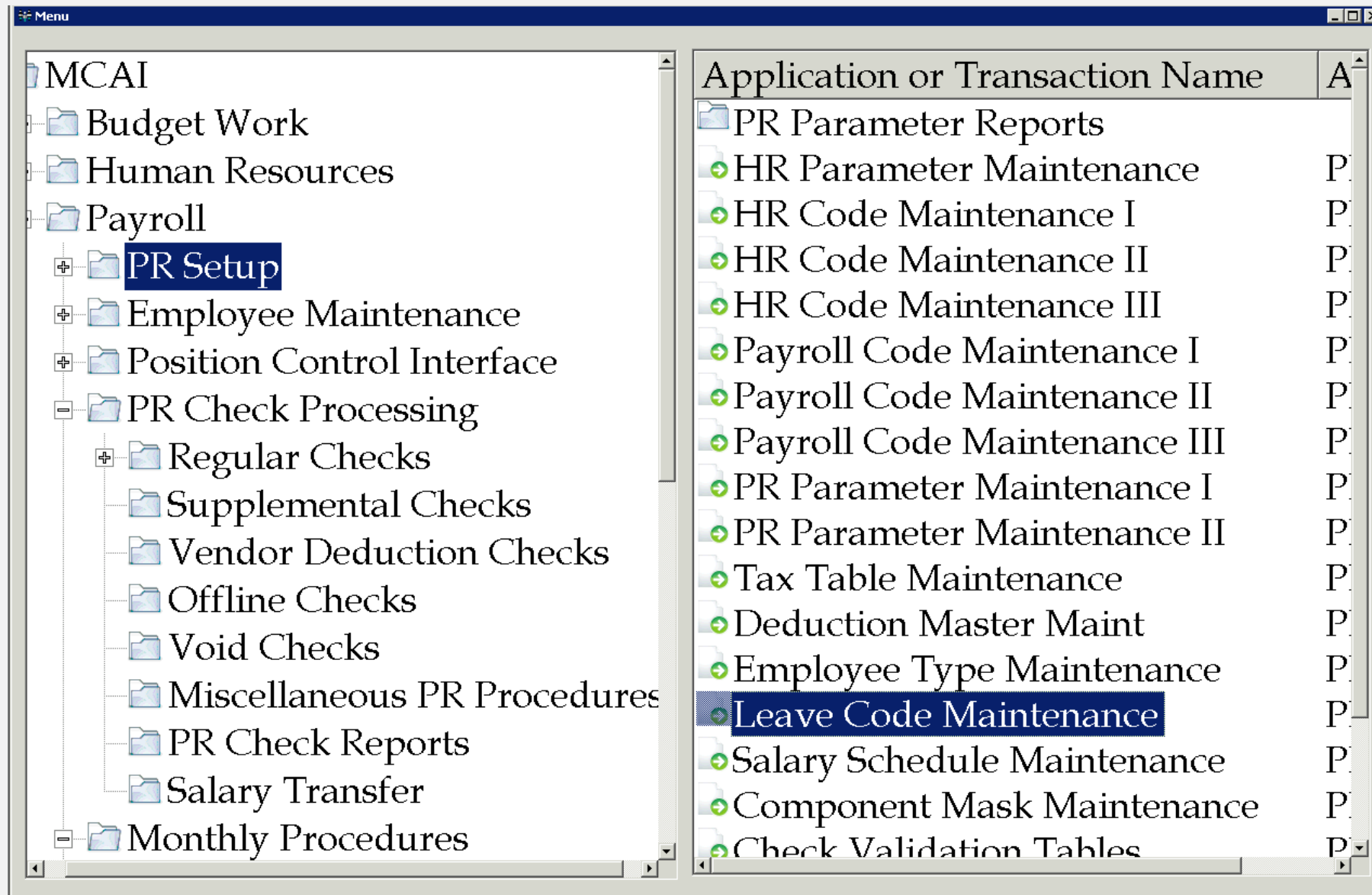
☐ Percent Rate

Component Name:

Value:

Inquire Mode: Enter the Key Word for the Desired Record

SET WORK RULE GOVERNING FREE/PURCHASED PERSONAL LEAVE



1. Category 2. Type Code 3. Business Code 4. Business Rule 5. Empl Type

Leave Type Code 2 Leave Descriptor Certified Personal Leave

Overriding Sub Comp Object Value 180
SUBSTITUTE

Category Code Leave Type to Adjust Default Adjustment Code CPD

Roll into 1st Type 1 Roll into 2nd Type Third Party Leave Type 2

☐ Sick Bank ☒ Print Leave Bal on Check Stub (Pending Check Format) ☐ Advance Leave Method

☐ Comp Time ☐ Advance Allowed ☐ Advance Thru EOY

☐ Include in Accrual Cutoff Calc. ☐ Allow Negative Balance ☐ Advance One Unit

Inquire Mode: Enter the Key Word for the Desired Record

1. Category 2. Type Code 3. Business Code 4. Business Rule 5. Empl Type

Leave Business Code CPER Certified Personal Leave

Lv Bus ...	From # ...	Up To Y...	Accr Units	M
CPER	0	3	3.00	
CPER	3	99	5.00	
NCPER	0	3	3.00	
NCPER	3	99	5.00	
PTS12	0	99	0.50	
PTS9	0	99	0.50	
SBANK	0	99	0.00	
SCK090	0	99	1.00	
SCK095	0	99	1.00	

From Years 0 Up To Years 3 Units to Accrue 3 Annual Allowed 3

Max to Take YTD 3 Max Balance at EOY 3 Max Paid Leave Units 0

Max To Take w/o Dock 2

Inquire Mode: Enter the Key Word for the Desired Record

PERSONAL LEAVE CONVERSION

- Unused personal leave is converted to sick leave during new year leave initialization
- Certified employees may choose to receive pay for unused free personal leave days
- Request must be in writing prior to new leave year initialization
- Converted days must be adjusted from leave balance prior to initialization
- Pay for unused free personal leave days is made through input pay
 - Develop input pay adjustment code for personal leave compensation



AUBURN CITY SCHOOLS

PERSONAL LEAVE CONVERSION

A **Certified Employee** may choose to convert all unused personal leave days to sick leave days or to be compensated for the **first 2 available personal leave days** if not used at the end of the school year.

Personal leave compensation will be reimbursed at \$57.00 per day, the substitute rate, for the first 2 unused Personal Leave days.

Choose one of the following options.

Check One:

Convert my unused Personal Leave to Sick Leave _____

Do not convert my unused Personal Leave to Sick Leave _____

SIGNATURE _____

DATE _____

This form is due each year **before June 15 in order to choose to receive compensation** for unused days.

If an employee does not submit a form, the unused Personal Leave days will automatically be converted to Sick Leave.

Menu

MCAI

- Budget Work
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Application or Transaction Name

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- Tax Table Maintenance
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- Leave Code Maintenance
- Salary Schedule Maintenance
- Component Mask Maintenance
- Check Validation Tables

PR/PDC2: Payroll Code Maintenance II (v3.05)

1. Termination Code	2. Pay Period Code	3. Summer Pay Flag	4. Position Tenure Code
9. Hourly/Daily Code	10. Work Sched Code	11. Work Sched Units	
5. Contract Month Code	6. Fringe Benefit Type	7. Input Pay Type	8. Adjustment Code

Adjustment Code

Adj Code Description

☐ Retirement Wage ☐ Employee's Rate

☐ Charge Back ☐ Substitute's Rate

☒ Flat Rate

☐ Percent Rate

Component Name

Value

Change Mode: Enter the Key Word for the Record to be Changed

GL Distribution - Adjustment Pay \$ 114.00 To Be Distributed: \$ 0.00

Fiscal Year Fd-C-Func-Obj-CCtr-SFnd-Y-Prog-Spec GL Amount GL Percent

2018 No Account Selected

INSTRUCTION, REGULAR TEACHER

Fd-C-Func-Obj-CCtr-SFnd-Y-Prog-Spec	Amount	Description
11-5-1100-010-0080-1110-0-1200-0000	114.00	INSTRUCTION, REGULAR TE...

Menu			
MCAI		Application or Transaction Name	
+	Budget Work	Employee Check & Input Queries	
+	Human Resources	Employee Maintenance	PR
-	Payroll	Employee Maint Audit Trail	PR
+	PR Setup	ACH Ded Changes	PR
+	Employee Maintenance	Test Compute for An Employee	PR
+	Position Control Interface	Mass Change Deduction	PR
-	PR Check Processing	Mass Change Deduction Status	PR
+	Regular Checks	Mass Change GL Distribution	PR
	Supplemental Checks	Mass Change Employee Jobs	PR
	Vendor Deduction Checks	Input Leave Adj to History	PR
	Offline Checks	Employee Leave Allocation	PR
	Void Checks	Move Job Leave/Pay Data	PR
	Miscellaneous PR Procedure	Mass Create Job Records	PR
	PR Check Reports	Mass Create Deduction Records	PR
	Salary Transfer		
+	Monthly Procedures		

File Edit Tools Toolbar Windows Favorites Help

Enter Add Change Delete Save Inquire Next Back Clear Search PrtScr Exit

PR/ILVA: Input Leave Adj to History (v3.12)

Payroll Id

Input Leave

Employee No.

Job Number

TEACHER - 13 MONTH

Enter Leave Adjustment Data

Input Date # Units (+/-) Leave Type Uom Adjustment Description

Leave Year: 2019

Certified Personal Leave

Input Date	Leave T...	Units	Uom	Adjustment Description		
08/07/2018	1	5.00	D	donated days		

Click Save(F

Enter Leave Adjustment Data

Input Date # Units (+/-) Leave Type Uom Adjustment Description

Leave Year: 2019

Certified Personal Leave

Input Date	Leave T...	Units	Uom	Adjustment Description		
08/07/2018	1	5.00	D	donated days		
08/08/2018	2	-2.00	D	converted to pay		

Records Updated

CATASTROPHIC LEAVE

- MUST be a member of the sick leave bank to request catastrophic leave
- Must be approved for catastrophic leave before donated days can be requested
 - Employee must request catastrophic leave in writing
 - Employee must provide proof of catastrophic nature; physician documentation typically required
- All accrued leave must be used prior to receiving donated days
- Donated days are requested through the sick leave bank
- Donated days can be used to repay the 15 sick leave days required to borrow prior to receiving donated days
- Any donated days not used is returned to the donating employee
- Employee must belong to the sick leave bank to donate days
- Employee can donate up to 30 days per catastrophic event

PROCESSING DONATED DAYS

CATASTROPHIC SICK LEAVE TRANSFER AUTHORIZATION

Donating Employee Information

1. Employee Name:	
2. 4 Digit Employee Number:	
3. Employee Address:	
4. Employee Telephone (s):	
5. Employer:	

Beneficiary Employee Information

6. Receiving Employee Name:	
7. 4 Digit Employee Number:	
8. Beneficiary's Employer:	

Days to be Donated to Beneficiary (not to exceed 30 days)

9. Number of days to be donated:	
----------------------------------	--

Certification of Donating Employee

10. I certify that I hereby donate the above noted number of my sick leave days to the beneficiary employee listed above. My employer has my permission to transfer the indicated number of sick leave days to the employer of the beneficiary for his or her use due to a catastrophic illness/injury as defined by Act 93-753. It is my understanding that my sick leave balance will be reduced by the specified number of days hereon and that the donated days will not be returned to me.

Donating employee's signature: _____ Date: _____

Witness: _____ Date: _____

Certification of Donating Employer

11. I hereby certify that the donating employee's information listed above is correct to the best of my knowledge.

Authorized signature: _____ Date: _____

Receipt of Beneficiary Employer

12. The above noted number of sick leave days have been credited to the sick leave account of the beneficiary employee.

Authorized signature: _____ Date: _____

Title: _____

****If sending donated days to another system I recommend calling system to determine if employee has been awarded catastrophic leave and if employee is in need.**

TRANSFERRING DONATED DAYS

The screenshot shows a software menu with a tree view on the left and a list view on the right. The tree view shows the following structure:

- MCAI
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The list view on the right shows the following items:

Application or Transaction Name	Ap
Employee Check & Input Queries	
Employee Maintenance	PR
Employee Maint Audit Trail	PR
ACH Ded Changes	PR
Test Compute for An Employee	PR
Mass Change Deduction	PR
Mass Change Deduction Status	PR
Mass Change GL Distribution	PR
Mass Change Employee Jobs	PR
Input Leave Adj to History	PR
Employee Leave Allocation	PR
Move Job Leave/Pay Data	PR
Mass Create Job Records	PR
Mass Create Deduction Records	PR

File Edit Tools Toolbar Windows Favorites Help

Enter Add Change Delete Save Inquire Next Back Clear Search PrtScr Exit

PR/ILVA: Input Leave Adj to History (v3.12)

Payroll Id july312018a july312018a

Input Leave Taken Accrued Adjusted

Employee No. 4022

Job Number 1 2018

TEACHER - 13 MONTH

Enter Leave Adjustment Data

Input Date # Units (+/-) Leave Type Uom Adjustment Description

8 / 7 / 2018 5.00 1 D donated days

Leave Year: 2019 Sick Leave

Input ...	Lea...	U..	Uom	Adjustment Description		

Click Save(F5) To Add Leave Adjustment Record

Enter Leave Adjustment Data

Input Date # Units (+/-) Leave Type Uom Adjustment Description

8 / 7 / 2018 0.00 1 D donated days

Leave Year: 2019 Sick Leave

Input Date	Leave T...	Units	Uom	Adjustment Description		
08/07/2018	1	5.00	D	donated days		

Click Save(F5) To Add Leave Adjustment Record

File Edit Tools Toolbar Windows Favorites Help

Enter Add Change Delete Save Inquire Next Back Clear Search PrtScr Exit

PR/ILVA: Input Leave Adj to History (v3.12)

Payroll Id

Employee No.

Job Number

Input Leave

TEACHER - 13 MONTH

Enter Leave Adjustment Data

Input Date # Units (+/-) Leave Type Uom Adjustment Description

Leave Year: 2019 Sick Leave

Input Date	Leave T...	Units	Uom	Adjustment Description		

Click Save(F5) To Add Le

Enter Leave Adjustment Data

Input Date # Units (+/-) Leave Type Uom Adjustment Description

Leave Year: 2019 Sick Leave

Input Date	Leave T...	Units	Uom	Adjustment Description		
08/07/2018	1	-5.00	D	donated days		

Records Updated

RUN DATE: 08/12/2020

RUN TIME: 03:22PM

MCAI PAYROLL SYSTEM

EMPLOYEE LEAVE DETAIL REPORT

AUBURN CITY BOARD OF EDUCATION

DATE RANGE 07/01/2019 THRU 06/30/2021 SORTED BY EMPLOYEE NO

EMPLOYEE NO & NAME

3709

MONEY

DEBRA

<u>TRANSACTION DATE</u>	<u>LEAVE TYPE TAKEN</u>	<u>UNITS TAKEN</u>			
2019-12-09	Sick Leave		D	30.00	donated days
2019-12-09	Sick Leave	1.00	D		X
2019-12-10	Sick Leave	1.00	D		X
2019-12-11	Sick Leave	1.00	D		X
2019-12-12	Sick Leave	1.00	D		X
2019-12-13	Sick Leave		D	11.00	donated days
2019-12-13	Sick Leave	1.00	D		X
2019-12-16	Sick Leave	1.00	D		X

RUN DATE: 08/12/2020

RUN TIME: 03:25PM

MCAI PAYROLL SYSTEM

EMPLOYEE LEAVE DETAIL REPORT

AUBURN CITY BOARD OF EDUCATION

DATE RANGE 07/01/2019 THRU 06/30/2021 SORTED BY EMPLOYEE NO

EMPLOYEE NO & NAME

3452

CLARK

CHARLES

<u>TRANSACTION DATE</u>	<u>LEAVE TYPE TAKEN</u>	<u>UNITS TAKEN</u>			
2019-10-15	NonCert Personal Lea	.50	D		X
2019-10-29	NonCert Personal Lea	.50	D		X
2019-12-03	Sick Leave	.50	D		X
2019-12-13	Sick Leave		D	-5.00	donated to D Money

NO LEAVE TAKEN FOR THIS EMPLOYEE JOB FOR THE DATES SELECTED

EMPLOYEE JOB LEAVE TOTALS =====> 1.50 -5.00

FMLA

- FMLA regulations can be found at <https://www.dol.gov/whd/fmla/>
- FMLA can be requested by employee or required by employer
 - Supporting documentation is required
- FMLA and accrued leave can be required to run concurrently; your systems policy will dictate how you handle this
- FMLA mandated job security and benefits – not pay
- Change status in PEEHIP portal to FMLA
 - PEEHIP status will not automatically change after FMLA is exhausted; must remember to change status back to active
- Leave processed as normal. Once accrued leave is depleted, employee absences will then be leave without pay
 - You may have to pull from accrued earnings to cover docked days and deductions

YOUR RIGHTS UNDER THE FAMILY AND MEDICAL LEAVE ACT OF 1993

FMLA requires covered employers to provide up to **12 weeks of unpaid, job-protected** leave to "eligible" employees for certain **family and medical reasons**. Employees are eligible if they have worked for a covered employer for **at least one year, and for 1,250 hours** over the previous 12 months, and if there are at least 50 employees within 75 miles.

REASONS FOR TAKING LEAVE: Unpaid leave must be granted for any of the following reasons:

- * to care for the employee's child after birth, or placement for adoption or foster care;
- * to care for the employee's spouse, son or daughter, or parent, who has a serious health condition;
- * for a serious health condition that makes the employee unable to perform the employee's job.

At the employee's or employer's option, certain kinds of paid leave may be substituted for unpaid leave.

ADVANCE NOTICE AND MEDICAL CERTIFICATION: The employee may be required to provide advance leave notice and medical certification. Taking of leave may be denied if requirements are not met.

- * The employee ordinarily must provide **30 days** advance notice when leave is "foreseeable".
- * An employer may require medical certification to support a request for leave because of a serious health condition, and may require second or third opinions (at the employer's expense) and a fitness for duty report to return to work.

JOB BENEFITS AND PROTECTION:

- * For the duration of FMLA leave, the employer must maintain the employee's health coverage under any "group health plan."
- * Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.
- * The use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee's leave.

UNLAWFUL ACTS BY EMPLOYERS: FMLA makes it unlawful for any employer to:

- * interfere with, restrain, or deny the exercise of any right provided under FMLA;
- * discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

ENFORCEMENT:

- * The U.S. Department of Labor is authorized to investigate and resolve complaints of violations.
- * An eligible employee may bring a civil action against an employer for violations.

FMLA does not affect any Federal or State law prohibiting discrimination, or supersede any State or local law or collective bargaining agreement which provides greater family or medical leave rights.

**** Note****

Under Section 108 of the FMLA, special rules are applicable to periods of leave near the conclusion of an academic term in the case of any eligible employee employed principally in an instructional capacity by any such educational agency or school.