COBRA

Interface Requirements Specification

[**Institute Of Nuclear Power Operations**](https://tekpartnersap2pcompany-a4f866.pipedrive.com/organization/114)

# Contact Information

## Customer Contact

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| --- | --- | --- |
| **Name** | **Tel** | **Email** |
| Sheri Dillinger |  | [DillingerSL@INPO.org](mailto:DillingerSL@INPO.org) |

## Integration Contact

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| --- | --- | --- |
| **Name** | **Tel** | **Email** |
| Lea King | 515-480-4262 | Lea\_king@ultimatesoftware.com |

# Customer Confirmation

General

1. **Vendor Name:**Infinisource
2. **Confirm Group or Plan Number:** CN99136
3. **Will you have employees that are active in multiple component companies?**

☒ No ☐ Yes

1. **Are there any Employee Types, Pay Groups, Org Levels, etc. that need to be excluded?**

☒ No ☐ Yes

If Yes, please list field and values to exclude or include *(whichever is a shorter list)*:

Do not exclude TES emptype for this one as we will need to test different scenarios

1. **Which Employees would you like to include on this export?**X Employees Active on Applicable Deduction Code

☐ Active Only Employees

☐ All Employees with YTD Earnings

☐Other: Click or tap here to enter text.

1. **When did you start coverage with this provider:**01/01/2020
2. **Confirm the applicable UltiPro Deduction Codes for each that apply:**

|  |  |
| --- | --- |
| Deduction/Benefit Code | Description |
| DEN | Dental |
| FSA | FSA - Medical |
| FSADC | FSA - Dependent Care |
| FSAL | FSA Limited |
| CDHP | CDHP |
| OAPN | OAP In-Network |
| OAP | OAP |
| VIS | Vision |

1. **Post Live Only: Interface Decommissioning (are there current/other interfaces that this interface is replacing?)**

X No ☐Yes, *Customer must open a Support Ticket to request that current interface is turned off.*

# Mapping/Notes to Developer

The following COBRA events are required – these are separate files.

Initial/General Rights Events

* NEW HIRE – when a new employee is enrolling in benefits for the first time.
* NEW MEMBER – when a current employee has elected COBRA-eligible benefits for the first time or for the addition of new child or spouse that have elected COBRA-eligible benefits.

Qualifying Events

* CEASE-A – when a child turns age 26 and is no longer eligible for COBRA.
* DEATH – when the employee has the event of death and there are dependents with COBRA coverage to be offered COBRA.
* DIVORCE – when there is a divorce and the spouse is being taken off the COBRA coverage.
* TERM – for an employee involuntary or voluntary termination.