Eligibility Feed Specification 

**Truman Arnold Companies**

**Feed Effective Date: 3/1/21**

# Purpose of the Data Feed

The Standard uses data feeds to support telephonic intake, absence management and claim adjudication processes. This information contributes to a positive employee experience, reduces the burden on employer Human Resources departments, and allows more efficient plan administration.

# Ensuring a Successful Feed Implementation

We are most successful when we partner with people from the customer and file provider who:

* Understand the information available in the source system
* Actively participate in feed discussions
* Provide business decisions, when needed
* Provide prompt revisions to test files

# Implementation Timeline

|  |  |  |
| --- | --- | --- |
| **Activities** | **Deliverable from Customer/File Provider** | **Due** |
| **Feed and Data Specifications** |  |  |
| * Customer confirms desired service(s) * Understand and confirm agreement with file specification and connectivity requirements | **Review** Collaborate to confirm data needed to support the desired services  **Agreement** Confirm all parties agree to fileformat, structure, layout and expected data.  Connectivity is established | **12/7/20** |
| **File Quality Testing** |  |  |
| * File review focused on file quality * File revisions as needed * Transmitted through secure connection | * Use self-service tool to validate file format & layout * Test file aligning to specifications * Timely file revisions[[1]](#footnote-0) | **12/21/20** |
| **Data Quality Testing** |  |  |
| * File review focused on data quality * Data quality concerns addressed * Transmitted through secure connection * File processes through all test systems | * Participate in file feedback discussions * Address data quality issues, as needed * Timely file revisions1 | **1/4/21** |
| **Production Preview File** |  |  |
| * File generated from production system * Transmitted through secure connection * File processes through all test systems | * Production-ready file through test connection * Address remaining or new data quality concerns | **2/1/21** |
| **Initial Production File** |  |  |
| * First production file received through production connection * File processes through production systems |  Production file through production connection | **2/8/21** |



# Resources

## Implementation

**The Standard Truman Arnold Companies / Ultimate Software**

|  |  |
| --- | --- |
| **Project and Business Leads** |  |
| Keeshia Lasley, Implementation Manager | Click here to enter text. |
| Phone Click here to enter text. | Phone Click here to enter text. |
| Email Keeshia.Lasley@standard.com | Email Click here to enter text. |

|  |  |
| --- | --- |
| **File Development** |  |
| Hannah Bell, Customer Information Analyst |  |
| Phone 971.321.8809 | Phone |
| Email Hannah.Bell@standard.com | Email |

|  |  |
| --- | --- |
| **Connectivity** |  |
| Email invitation to a self-directed connectivity setup tool | Click here to enter text. |
|  | Email Click here to enter text. |

## Ongoing

**The Standard Ultimate Software**

|  |  |
| --- | --- |
| **Business Contact[[2]](#footnote-1)** |  |
| Audrey Rigsby, Account Manager | Click here to enter text. |
| Phone Click here to enter text. | Phone Click here to enter text. |
| Email Audrey.Rigsby@standard.com | Email Click here to enter text. |

Revision History

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date and Version** | | **Section** | **Description of Revision** | **Author** |
| 10/20/2020 | 1.0 | Document | Initial Draft | Hannah Bell |
|  |  |  |  |  |
|  |  |  |  |  |

# Outstanding Items

The following items are outstanding and could impact the file feed requirements.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **#** | **Subject Area** | **Description** | **Assigned To** | **Current State of Resolution** | **Status** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |

**Customer Specific Notes**

# File Delivery Specifications

**File Specifications**

**File Name** trumanarnoldco\_10152480\_1\_YYYYMMDD.txt

## Delivery Specifications

File transfer protocol & file delivery schedule will be confirmed as part of the connectivity setup process.

|  |  |
| --- | --- |
| **Transfer Protocol** | SFTP |
| **File Frequency** | ☒ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other: |
| **Schedule Date and Time** | Friday 5:30am EST |
| **Data Extraction Type** | ☒ Automated / Scheduled ☐ Manual |
| **Delivery Type** | ☒ Automated / Scheduled ☐ Manual |

**Failure to place the file on the server by the expected date/time may impact the services we are providing; we cannot guarantee a late file will be loaded before the next file is delivered.** 

# Email Subscriptions

Automated email notification based on the file status. Options include:

**File Received** Sent when we successfully receive a file

**File Received & Loaded** Sent when we successfully load a file

**File Not Received** Mandatory notification; sent when we do not receive a file by the expected date **Customer/File Provider Subscriptions**

Providing an email distribution list, rather than individual email addresses, provides the following benefits:

* You retain full control over who receives email notifications
* You may specify multiple email distribution lists and each address may subscribe to different notifications  Updates can be made immediately as personnel changes occur

☐ Received ☐ Received & Loaded ☒ Not Received Email: Click here to enter text. ☐ Received ☐ Received & Loaded ☐ Not Received Email: Click here to enter text.

**Email notifications are sent on weekends and holidays. If your normal file schedule coincides with a holiday and a file is not received on that day, please send the file on the following business day.** 

## The Standard Subscriptions

☐ Received ☐ Received & Loaded ☒ Not Received Email: DATSupport@standard.com

☐ Received ☐ Received & Loaded ☒ Not Received Email: AMConsultants@standard.com

# Data Specifications

## Source System Information

Who will provide your data in production? ☐ Customer ☒ Third Party, Ultimate Software

Name of source system Ultipro

Type of system ☒ Enrollment ☒ HRIS ☒ Payroll ☐ Time Tracking

What type of environment will your test data come from? Production

Refresh Date When each file is sent

|  |  |
| --- | --- |
| **Coverage Records** |  |
| **Effective Dates** |  |
| Effective dates are stored based on… | Original Coverage Effective  Date |
| Are future coverage effective dates stored? | Yes, but do not send |
| Can future effective dates be withheld until equal/past the current system date? | Yes |
| If no, can a coverage termination date equal to scheduled effective date be sent if an employee’s coverage does not become effective as originally planned? | N/A |
| **Termination Dates** |  |
| Are future coverage termination dates stored? | Yes |
| Can future termination dates be withheld until equal/past the current system date? | Yes |

|  |  |
| --- | --- |
| **Employment Terminations** |  |
| How long will terminations be sent on the file (min 2 times or 30 days) | 30 days from eecdateof termination |

**The Standard’s system does not terminate coverage or employment by omission on a subsequent file. Explicit termination dates must be provided.** 

|  |
| --- |
| **Additional Information** |
| We do not need a special enrollment file annually because The Standard does not produce ID cards |
| Our system records information on a transaction basis; any changes to coverage due to annual enrollment should be included on the file *after* the effective date of enrollment |
| We do not expect new coverage effective dates if an employee’s coverage does not change from one plan year to the next |

# Detailed File Layout Specifications

## File and Data Rules

|  |  |
| --- | --- |
| Employee Population | All employees (including part time and temporary) - |
| File Content | Full File |
| File Format | Pipe Delimited, | |
| File Layout | All fields must be represented in the file   * Fields marked as Required are required for all members on the file; those marked with an ‘x’ are expected for all members with this information in the source system; those marked with an open checkbox should be sent as null fields * If data will not be included for a field, it must be included as a null/empty position (two delimiters next to each other) - No pipe delimiter after the last field in the file |
| Character Format | All characters in the file should be base ASCII format/mode |
| Format Rules | Format rules are noted by field, where applicable |
|  | If no format/data rule is listed, Alpha or Numeric is accepted, including other characters within base ASCII format/mode |
| Domain Values | If listed, values on the inbound files must exactly match one of the values listed including case and spacing |

## Employee Demographic Information

Supports all feed-supported services, provides basic information about the employee.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and**  **Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 1 | Organization ID Code | Number | 8 |  | Identifier provided by The Standard | Required | **10152480** |
| 2 | Sub Org Text |  | 50 |  |  | ☐ | Leave blank |
| 3 | Social Security Number | 999999999 | 9 |  | United States Social Security Number  **Do not send foreign IDs or employee IDs** | Required | eepssn |
| 4 | Employee ID |  | 20 |  | Employee IDs must be unique; foreign IDs are acceptable  **Do not send Social Security Number** | ☒ | eecempno |
| 5 | Name Prefix |  | 20 | Doctor Dr. Miss Mr.  Mrs.  Ms.  Professor |  | ☐ | Leave blank |
| 6 | First Name |  | 40 |  |  | Required | eepnamefirst |
| 7 | Middle Name |  | 40 |  |  | ☒ | eepnamemiddle |
| 8 | Last Name |  | 40 |  |  | Required | eepnamelast |
| **Field** | **Attribute** | **Format and**  **Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 9 | Name Suffix |  | 10 |  |  | ☐ | Leave blank |
| 10 | Date of Birth | YYYYMMDD | 8 |  |  | Required | eepdateofbirth |
| 11 | Date of Death | YYYYMMDD | 8 |  |  | ☐ | If eecemplstatus = T and eectermreason = 203 send eecdateof termination or if eecdeceaseddate is not blank send eecdeceaseddate else leave blank |
| 12 | Gender |  | 1 | M  F  U | M .................................................................... Male F ................................................................. Female U ..................................... Unknown / Not Indicated | Required | If eepgender = blank send U else send eepgender |
| 13 | Marital Status |  | 16 | Common Law  Divorced  Domestic Partner  Married  Separated  Single  Unknown  Widowed |  | ☐ | Leave blank |
| 14 | Address Line 1 |  | 50 |  |  | Required | Eepaddressline1 |
| 15 | Address Line 2 |  | 50 |  |  | ☒ | Eepaddressline2 |
| 16 | Address Line 3 |  | 50 |  |  | ☐ | Leave blank |
| 17 | City |  | 50 |  |  | Required | Eepaddresscity |
| 18 | State/Province |  | 6 |  | **Required for addresses in US or Canada** | Required | Eepaddressstate |
| 19 | Postal Code |  | 20 |  |  | Required | Eepaddresszip |
| 20 | Country | ISO standards | 50 |  |  | Required | EepAddressCountry |
| 21 | Non-Work Phone | 9999999999 | 15 |  | Phone number where an employee can be reached after normal business hours | ☒ | If EepPhoneHomeNumber is not blank send EepPhoneHomeNumber  Else if efoPhoneType is CEL, send efoPhoneNumber from table EmpMPhon |

## Basic Employment Information

Supports reduction of the employer’s administrative burden during the claim process and allows for faster claim decisions. If necessary information cannot be provided on the feed, it will be gathered through employer outreach.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 22 | Current Hire Date | YYYYMMDD | 8 |  | Date of Hire associated with current employment period  *Used for eligibility determination* | Required | eecdateoflasthire |
| 23 | Original Hire Date | YYYYMMDD | 8 |  | Date of Hire associated with employee’s original employment period | ☒ | eecdateoforiginalhire |
| 24 | Adjusted Hire Date | YYYYMMDD | 8 |  | Current hire date adjusted to include prior periods of employment. Often called Credited Service Date. | ☐ | Leave blank |
| 25 | Employment Termination Date | YYYYMMDD | 8 |  | Date employment is terminated | ☒ | eecdateoftermination |
| 26 | Work State |  | 2 |  | State/Province where an employee works; this may be different than the state where they reside.  **Absence Management**: Applicable state leave is determined by this value.  **Disability-only customers**:Notification related to state income tax is determined by this value. | Required | LocAddressState where LocCode = eeclocation |
| 27 | Job Title |  | 50 |  |  | ☒ | JbcDesc where JbcCode = EecJobCode |
| 28 | Employment Status |  | 26 | Active  Active Military - Overseas  Active Military - USA Deceased  Inactive  Leave of Absence  Leave of Absence FMLA  Leave of Absence Military  Paid Leave of Absence  Retired  Suspended  Temporary Layoff  Terminated  Unpaid Leave of Absence |  | ☒ | if eecemplstatus = L send Leave of Absence  else send Coddesc from EMPLOYEESTATUS codtable for eecemplstatus |
| 29 | Scheduled Work Hours | If fraction of hour, include decimal, i.e. 80.25 | 8 | format #####.## | Hours an employee is scheduled to work during the period provided in the Scheduled Work Hours Frequency field | ☒ | EecScheduledWorkHrs |
| 30 | Scheduled Work Hours Frequency |  | 12 | Weekly  Bi-Weekly  Monthly  Semi-Monthly  Annual  Ratio to FTE  Percent to FTE | Period of time an employee works the hours provided in the Scheduled Work Hours field | ☒ | Coddesc in PAYGROUP table for PgrPayFrequency |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 31 | Employee Pay Type |  | 11 | Hourly  Salary  Commission  Salary + OT | How an employee receives their pay | ☒ | If EecSalaryOrHourly = H send Hourly  If EecSalaryOrHourly = S send Salary |
| 32 | Full/Part Time |  | 9 | Full Time  Part Time | Full/Part time status of an employee  **Required for Absence Management** | Required | If EecFullTimeOrPartTime = F send Full Time  If EecFullTimeOrPartTime = P send Part Time |
| 33 | Employment Type |  | 9 | Regular  Temporary  Seasonal | **Required for Absence Management** | Required | If eecemptype = TMP send Temporary  If eecemptype = SUM send Seasonal  else send Regular |
| 34 | Work Email Address |  | 100 |  | Employee work email address  **Required for Absence Management for employees who are HR Users, or Manager/Supervisor Users so email notifications can be sent from the system.** | Required | eepAddressEMail |

## Additional Employment Information

Supports additional information that may be required based on policy language. If information cannot be provided on the feed, it will be gathered through employer outreach when needed.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 35 | Exempt Status |  | 10 | Exempt  Non-Exempt |  | ☐ | If EjhFLSACategory = E send Exempt else send Non-Exempt |
| 36 | Union Flag |  | 1 | Y  N |  | ☐ | Leave blank |
| 37 | Union Name |  | 50 |  |  | ☐ | Leave blank |
| 38 | Employer Affiliate |  | 50 |  |  | ☒ | cmpcompanyname from COMPANY Table where eeccoid = cmpcoid |
| 39 | Employer Location Code |  | 50 |  |  | ☒ | eeclocation |
| 40 | Employer Location Name |  | 50 |  |  | ☒ | LocDesc where LocCode = EecLocation |
| 41 | Department Code |  | 50 |  |  | ☒ | Eecorglvl1 |
| 42 | Department Name |  | 50 |  |  | ☒ | OrgDesc where OrgCode = EecOrgLvl1 |
| 43 | Occupation Code |  | 50 |  |  | ☐ | Leave blank |
| 44 | User Specific 1 |  | 50 |  | The Standard will provide instructions, if needed | ☐ | Leave blank |
| 45 | User Specific 2 |  | 50 |  | The Standard will provide instructions, if needed | ☐ | Leave blank |
| 46 | User Specific 3 |  | 50 |  | The Standard will provide instructions, if needed | ☐ | Leave blank |
| 47 | User Specific 4 |  | 50 |  | The Standard will provide instructions, if needed | ☐ | Leave blank |
| 48 | User Specific 5 |  | 50 |  | The Standard will provide instructions, if needed | ☐ | Leave blank |

## Earnings

Supports the claim payment process. If information cannot be provided on the feed, it will be gathered through employer outreach.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 49 | Earnings Category 1 |  | 9 | Scheduled  Actual | **Required if sending Earnings Category 1** | ☒ | **Actual** |
| 50 | Earnings Type 1 |  | 18 | Bonus  Commission  Shift Differential  PDE  Base Rate  Frozen Pay  Mileage  Cash Allowance  Life Earnings | **Required if sending Earnings Category 1**    PDE ......................................... Predisability Earnings | ☒ | **W-2** |
| 51 | Earnings Amount 1 | 9999999999.99 | 13 |  | **Required if sending Earnings Category 1**  Prior w2 earnings – Box 5 | ☒ | YesUSMEDEETaxableWages |
| 52 | Earnings Amount Expression 1 |  | 22 | Annual  Weekly  Monthly  Hourly  Bi-Weekly  Semi-Monthly  Irregular  Semi-Monthly/10 Months | The period the Earnings Amount represents  **Required if sending Earnings Category 1**  Bi-Weekly *..................................................* 26 Periods  Semi-Monthly ............................................ 24 Periods Semi-Monthly/10 Months .......................... 20 Periods | ☒ | Annual |
| 53 | Earnings Effective Date 1  OR  Earnings Pay Date 1 | YYYYMMDD | 8 |  | Earnings Effective Date: Effective date of the earnings sent in Earnings Amount (if sending Scheduled). *If date is unavailable, leave null. When a change in earnings is detected, The Standard will default to file date.*    Earnings Pay Date: Date the earnings sent in Earnings Amount were paid (if sending Actual)  **Pay date is required if sending Actual Earnings** | ☒ | Last calendar day of prior year  Example 20191231 |
| 54 | Pay Frequency 1 |  | 22 | Annual  Weekly  Monthly  Hourly  Bi-Weekly  Semi-Monthly  Irregular  Semi-Monthly/10 Months | How often this type of earnings are paid  Bi-Weekly *..................................................* 26 Periods  Semi-Monthly ............................................ 24 Periods Semi-Monthly/10 Months .......................... 20 Periods | ☐ | Leave blank |
| 55 | Pay Start Date 1 | YYYYMMDD | 8 |  | Used for ‘Actual’ Earnings only  Pay Period beginning date | ☐ | 1st calendar day of prior year  Example 20190101 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 56 | Pay End Date 1 | YYYYMMDD | 8 |  | Used for ‘Actual’ Earnings only  Pay Period ending date | ☐ | Last calendar day of prior year  Example 20191231 |
| 57 | Pay Period Hours 1 | 9999999999.99 | 10 |  | Used for ‘Actual’ Earnings only  This is where hours worked during the pay period would be included if appropriate based on Earnings  Category  *If sending Pay Period Hours, the Pay Start Date and Pay End Dates are also required.* | ☐ | Leave blank |
| 58 | Earnings Category 2 |  | 9 | Scheduled  Actual | **Required if sending Earnings Category 2** | ☐ | Leave blank |
| 59 | Earnings Type 2 |  | 18 | Bonus  Commission  Shift Differential  PDE  Base Rate  Frozen Pay  Mileage  Cash Allowance  Life Earnings | **Required if sending Earnings Category 2**    PDE ......................................... Predisability Earnings | ☐ | Leave blank |
| 60 | Earnings Amount 2 | 9999999999.99 | 13 |  | **Required if sending Earnings Category 2** | ☐ | Leave blank |
| 61 | Earnings Amount Expression 2 |  | 22 | Annual  Weekly  Monthly  Hourly  Bi-Weekly  Semi-Monthly  Irregular  Semi-Monthly/10 Months | The period the Earnings Amount represents  **Required if sending Earnings Category 2**  Bi-Weekly *.................................................* 26 Periods  Semi-Monthly *...........................................* 24 Periods Semi-Monthly/10 Months ......................... 20 Periods | ☐ | Leave blank |
| 62 | Earnings Effective Date 2  OR  Earnings Pay Date 2 | YYYYMMDD | 8 |  | Earnings Effective Date: Effective date of the earnings sent in Earnings Amount (if sending Scheduled). *If date is unavailable, leave null. When a change in earnings is detected, The Standard will default to file date.*    Earnings Pay Date: Date the earnings sent in Earnings Amount were paid (if sending Actual)  **Pay date is required if sending Actual Earnings** | ☐ | Leave blank |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 63 | Pay Frequency 2 |  | 22 | Annual  Weekly  Monthly  Hourly  Bi-Weekly  Semi-Monthly  Irregular  Semi-Monthly/10 Months | How often this type of earnings are paid  Bi-Weekly *.................................................* 26 Periods  Semi-Monthly *...........................................* 24 Periods  Semi-Monthly/10 Months ......................... 20 Periods | ☐ | Leave blank |
| 64 | Pay Start Date 2 | YYYYMMDD | 8 |  | Used for ‘Actual’ Earnings only  Pay Period beginning date | ☐ | Leave blank |
| 65 | Pay End Date 2 | YYYYMMDD | 8 |  | Used for ‘Actual’ Earnings only  Pay Period ending date | ☐ | Leave blank |
| 66 | Pay Period Hours 2 | 9999999999.99 | 10 |  | Used for ‘Actual’ Earnings only  This is where hours worked during the pay period would be included if appropriate based on Earnings  Category  *If sending Pay Period Hours, the Pay Start Date and Pay End Dates are also required.* | ☐ | Leave blank |
| 67 | Earnings Category 3 |  | 9 | Scheduled  Actual | **Required if sending Earnings Category 3** | ☐ | Leave blank |
| 68 | Earnings Type 3 |  | 18 | Bonus  Commission  Shift Differential  PDE  Base Rate  Frozen Pay  Mileage  Cash Allowance  Life Earnings | **Required if sending Earnings Category 3**    PDE ......................................... Predisability Earnings | ☐ | Leave blank |
| 69 | Earnings Amount 3 | 9999999999.99 | 13 |  | **Required if sending Earnings Category 3** | ☐ | Leave blank |
| 70 | Earnings Amount Expression 3 |  | 22 | Annual  Weekly  Monthly  Hourly  Bi-Weekly  Semi-Monthly  Irregular  Semi-Monthly/10 Months | The period the Earnings Amount represents  **Required if sending Earnings Category 3**  Bi-Weekly *.................................................* 26 Periods  Semi-Monthly *...........................................* 24 Periods Semi-Monthly/10 Months ......................... 20 Periods | ☐ | Leave blank |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 71 | Earnings Effective Date 3  OR  Earnings Pay Date 3 | YYYYMMDD | 8 |  | Earnings Effective Date: Effective date of the earnings sent in Earnings Amount (if sending Scheduled). *If date is unavailable, leave null. When a change in earnings is detected, The Standard will default to file date.*    Earnings Pay Date: Date the earnings sent in Earnings Amount were paid (if sending Actual)  **Pay date is required if sending Actual Earnings** | ☐ | Leave blank |
| 72 | Pay Frequency 3 |  | 22 | Annual  Weekly  Monthly  Hourly  Bi-Weekly  Semi-Monthly  Irregular  Semi-Monthly/10 Months | How often this type of earnings are paid  Bi-Weekly *.................................................* 26 Periods  Semi-Monthly *...........................................* 24 Periods  Semi-Monthly/10 Months ......................... 20 Periods | ☐ | Leave blank |
| 73 | Pay Start Date 3 | YYYYMMDD | 8 |  | Used for ‘Actual’ Earnings only  Pay Period beginning date | ☐ | Leave blank |
| 74 | Pay End Date 3 | YYYYMMDD | 8 |  | Used for ‘Actual’ Earnings only  Pay Period ending date | ☐ | Leave blank |
| 75 | Pay Period Hours 3 | 9999999999.99 | 10 |  | Used for ‘Actual’ Earnings only  This is where hours worked during the pay period would be included if appropriate based on Earnings Category  *If sending Pay Period Hours, the Pay Start Date and Pay End Dates are also required.* | ☐ | Leave blank |

## Absence Management

Supports our Absence Management Service offering.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 76 | Hours Worked in the Last 12 Months | 99999.99 | 8 |  | FMLA regulation definition:  Includes: hours actually worked for the employer; regular, shift differential, overtime, paid volunteer, etc.  Excludes: sick leave, vacation, paid time off, paid and unpaid leave.  **Required for Absence Management services.** | Required | sum (PehCurHrs) where Peherncode = (REG, OT) for per controls for last 12 months |
| 77 | Hours Worked in the Last 12 Months **THRU DATE** | YYYYMMDD | 8 |  | Represents the date that the Hours Worked in Last 12 Months were calculated/updated.  **Required for Absence Management services.** | Required | Most recent pgrpaydate |
| 78 | Supervisor/Manager Employee ID |  | 20 |  | May be required based on configuration for system access and correspondence. | ☒ | Eecempno of EecSupervisorID |
| 79 | Future use field |  | 1 |  | Placeholder for future capability | ☐ | Leave blank |
| 80 | AMS Reporting Group 1 |  | 50 |  |  | ☐ | Leave blank |
| 81 | AMS Reporting Group 2 |  | 50 |  |  | ☐ | Leave blank |
| 82 | AMS Reporting Group 3 |  | 50 |  |  | ☐ | Leave blank |
| 83 | AMS Reporting Group 4 |  | 50 |  |  | ☐ | Leave blank |
| 84 | AMS Reporting Group 5 |  | 50 |  |  | ☐ | Leave blank |
| 85 | AMS Reporting Group 6 |  | 50 |  |  | ☐ | Leave blank |
| 86 | AMS Reporting Group 7 |  | 50 |  |  | ☐ | Leave blank |
| 87 | AMS Reporting Group 8 |  | 50 |  |  | ☐ | Leave blank |
| 88 | AMS Reporting Group 9 |  | 50 |  |  | ☐ | Leave blank |

## Disability Claim Outreach Information

Supports the Telephonic Claim Intake Service. Includes information for the Human Resources personnel responsible for completing employer portion of the claim process.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 89 | HR Contact Recipient |  | 50 |  | Name of area receiving Employer Notification | ☐ | Leave blank |
| 90 | HR Contact Email Address |  | 100 |  | Distribution list for Disability Employer Notifications | Required | hrpay@tacenergy.com |
| 91 | HR Contact Work Phone | Number | 15 |  |  | ☐ | Leave blank |

## Claim Reporting

Supports reporting breakouts for disability or life coverages when necessary.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 92 | Reporting Category 1 |  | 50 |  |  | ☐ | Leave blank |
| 93 | Reporting Category 2 |  | 50 |  |  | ☐ | Leave blank |
| 94 | Reporting Category 3 |  | 50 |  |  | ☐ | Leave blank |
| 95 | Reporting Category 4 |  | 50 |  |  | ☐ | Leave blank |
| 96 | Reporting Category 5 |  | 50 |  |  | ☐ | Leave blank |

## Disability Coverage

Information in this section supports claim eligibility process and reflects products for which the employee is currently enrolled and covered or being implemented.

*Do not send pending coverage elections in these sections.*

**STD 1 Coverage - deduction code**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 97 | Policy | Number | 6 |  | Provided by The Standard | ☒ | If eeddedcode = DISA or DISB send 759706 |
| 98 | Plan |  | 2 |  | Provided by The Standard | ☒ | If eeddedcode = DISA or DISB send A |
| 99 | Product |  | 4 |  | Provided by The Standard | ☒ | If eeddedcode = DISA or DISB send ST |
| 100 | Employer Plan Code |  | 50 |  | Uniquely identifies the plan in which the employee is enrolled. | ☐ | Leave blank |
| 101 | Benefit Waiting Period | Number | 50 |  | Waiting period in which employee is enrolled | ☐ | Leave blank |
| 102 | Benefit Percent | Number | 20 |  | Percent of benefit for which the employee is enrolled | ☐ | Leave blank |
| 103 | Selected Amount | 9999999.99 | 10 |  | Benefit amount for which the employee is enrolled | ☐ | Leave blank |
| 104 | AM Class | Number | 10 |  | Provided by The Standard; used by the Absence Management System | ☐ | Leave blank |
| 105 | Class Name |  | 50 |  |  | ☐ | Leave blank |
| 106 | Effective Date | YYYYMMDD | 8 |  | The date the coverage begins. Populate immediately prior to, or on, the effective date. | ☒ | If eeddedcode = DISA or DISB send eedbenstartdate |
| 107 | Termination Date | YYYYMMDD | 8 |  | The last day this coverage is in effect; the coverage terminates at the end of this day.  *If coverage was never in force and coverage Effective Date was previously sent, Termination Date needs to be the same as the Effective Date* | ☒ | If eeddedcode = DISA or DISB send eedbenstopdate |

**STD 2 Coverage**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 108 | Policy | Number | 6 |  | Provided by The Standard | ☐ | Leave blank |
| 109 | Plan |  | 2 |  | Provided by The Standard | ☐ | Leave blank |
| 110 | Product |  | 4 |  | Provided by The Standard | ☐ | Leave blank |
| 111 | Employer Plan Code |  | 50 |  | Uniquely identifies the plan in which the employee is enrolled. | ☐ | Leave blank |
| 112 | Benefit Waiting Period | Number | 50 |  | Waiting period in which employee is enrolled | ☐ | Leave blank |
| 113 | Benefit Percent | Number | 20 |  | Percent of benefit in which the employee is enrolled | ☐ | Leave blank |
| 114 | Selected Amount | 9999999.99 | 10 |  | Benefit amount for which the employee is enrolled | ☐ | Leave blank |
| 115 | AM Class | Number | 10 |  | Provided by The Standard; used by the Absence Management System | ☐ | Leave blank |
| 116 | Class Name |  | 50 |  |  | ☐ | Leave blank |
| 117 | Effective Date | YYYYMMDD | 8 |  | The date the coverage begins. Populate immediately prior to, or on, the effective date. | ☐ | Leave blank |
| 118 | Termination Date | YYYYMMDD | 8 |  | The last day this coverage is in effect; the coverage terminates at the end of this day.  *If coverage was never in force and coverage Effective Date was previously sent, Termination Date needs to be the same as the Effective Date* | ☐ | Leave blank |

**LTD 1 Coverage – deduction code DISA or DISB**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 119 | Policy | Number | 6 |  | Provided by The Standard | ☒ | If eeddedcode = DISA or DISB send 759703 |
| 120 | Plan |  | 2 |  | Provided by The Standard | ☒ | If eeddedcode = DISA or DISB send B |
| 121 | Product |  | 4 |  | Provided by The Standard | ☒ | If eeddedcode = DISA or DISB send LT |
| 122 | Employer Plan Code |  | 50 |  | Uniquely identifies the plan in which the employee is enrolled. | ☐ | Leave blank |
| 123 | Benefit Waiting Period | Number | 50 |  | Waiting period in which employee is enrolled | ☐ | Leave blank |
| 124 | Benefit Percent | Number | 20 |  | Percent of benefit for which the employee is enrolled | ☐ | Leave blank |
| 125 | Selected Amount | 9999999.99 | 10 |  | Benefit amount for which the employee is enrolled | ☐ | Leave blank |
| 126 | Class Name |  | 50 |  |  | ☐ | Leave blank |
| 127 | Effective Date | YYYYMMDD | 8 |  | The date the coverage begins. Populate immediately prior to, or on, the effective date. | ☒ | If eeddedcode = DISA or DISB send eedbenstartdate |
| 128 | Termination Date | YYYYMMDD | 8 |  | The last day this coverage is in effect; the coverage terminates at the end of this day.  *If coverage was never in force and coverage Effective Date was previously sent, Termination Date needs to be the same as the Effective Date* | ☒ | If eeddedcode = DISA or DISB send eedbenstopdate |

**LTD 2 Coverage**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 129 | Policy | Number | 6 |  | Provided by The Standard | ☐ | Leave blank |
| 130 | Plan |  | 2 |  | Provided by The Standard | ☐ | Leave blank |
| 131 | Product |  | 4 |  | Provided by The Standard | ☐ | Leave blank |
| 132 | Employer Plan Code |  | 50 |  | Uniquely identifies the plan in which the employee is enrolled. | ☐ | Leave blank |
| 133 | Benefit Waiting Period | Number | 50 |  | Waiting period in which employee is enrolled | ☐ | Leave blank |
| 134 | Benefit Percent | Number | 20 |  | Percent of benefit for which the employee is enrolled | ☐ | Leave blank |
| 135 | Selected Amount | 9999999.99 | 10 |  | Benefit amount for which the employee is enrolled | ☐ | Leave blank |
| 136 | Class Name |  | 50 |  |  | ☐ | Leave blank |
| 137 | Effective Date | YYYYMMDD | 8 |  | The date the coverage begins. Populate immediately prior to, or on, the effective date. | ☐ | Leave blank |
| 138 | Termination Date | YYYYMMDD | 8 |  | The last day this coverage is in effect; the coverage terminates at the end of this day.  *If coverage was never in force and coverage Effective Date was previously sent, Termination Date needs to be the same as the Effective Date* | ☐ | Leave blank |

**Other Disability 1**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 139 | [Other Disability] Policy | Number | 6 |  | Provided by The Standard | ☐ | Leave blank |
| 140 | [Other Disability] Plan |  | 2 |  | Provided by The Standard | ☐ | Leave blank |
| 141 | [Other Disability] Product |  | 4 |  | Provided by The Standard | ☐ | Leave blank |
| 142 | [Other Disability] Employer  Plan Code |  | 50 |  | Uniquely identifies the plan in which the employee is enrolled. | ☐ | Leave blank |
| 143 | [Other Disability] Benefit  Waiting Period | Number | 50 |  | Waiting period in which employee is enrolled | ☐ | Leave blank |
| 144 | [Other Disability] Benefit  Percent | Number | 20 |  | Percent of benefit for which the employee is enrolled | ☐ | Leave blank |
| 145 | [Other Disability] Selected  Amount | 9999999.99 | 10 |  | Benefit amount for which the employee is enrolled | ☐ | Leave blank |
| 146 | [Other Disability] AM Class | Number | 10 |  | Provided by The Standard; used by the Absence Management System | ☐ | Leave blank |
| 147 | [Other Disability] Class  Name |  | 50 |  |  | ☐ | Leave blank |
| 148 | [Other Disability] Effective  Date | YYYYMMDD | 8 |  | The date the coverage begins. Populate immediately prior to, or on, the effective date. | ☐ | Leave blank |
| 149 | [Other Disability] Termination Date | YYYYMMDD | 8 |  | The last day this coverage is in effect; the coverage terminates at the end of this day.  *If coverage was never in force and coverage Effective Date was previously sent, Termination Date needs to be the same as the Effective Date* | ☐ | Leave blank |

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## State Disability Coverage

Information in this section is used to apply logic to create coverage records for New Jersey TDB and/or New York DBL products. The logic is based on the Work State and the Current Hire Date provided in the Employment Information section.

**In order for this logic to function, information must be provided as noted for *all* employees on the file.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Field** | **Attribute** | **Format and Data Rule(s)** | **Max**  **Length** | **Domain Values** | **Definition of Value** | **Include in File** | **Customer Specific Comments** |
| 150 | NJ TDB Policy | Number | 6 |  | Provided by The Standard | ☐ | Leave blank |
| 151 | NJ TDB Plan |  | 2 |  | Provided by The Standard | ☐ | Leave blank |
| 152 | NJ TDB Employer Plan Code |  | 50 |  |  | ☐ | Leave blank |
| 153 | NJ TDB Policy Begin Date | YYYYMMDD | 8 |  | Provided by The Standard | ☐ | Leave blank |
| 154 | NY DBL Policy | Number | 6 |  | Provided by The Standard | ☐ | Leave blank |
| 155 | NY DBL Plan |  | 2 |  | Provided by The Standard | ☐ | Leave blank |
| 156 | NY DBL Employer Plan Code |  | 50 |  |  | ☐ | Leave blank |
| 157 | NY DBL Policy Begin Date | YYYYMMDD | 8 |  | Provided by The Standard | ☐ | Leave blank |

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# Services to be Supported by the Data Feed

**Service Description Key Data Elements Supported**

|  |  |  |  |
| --- | --- | --- | --- |
| **Leave and Disability Claim Administration** | |  |  |
|  | **Telephonic Intake**  Employees call in to submit a Disability claim and/or leave with minimal employer outreach | * Employee demographic information (name, address, etc.) * Current Hire and termination date(s) * HR contact email * Basic coverage information * Adjusted Hire Date (Absence customers only) * Hours worked in the last 12 months (Absence customers only) | Claim Intake  ☒  Absence  ☒ |
|  | **Eligibility**  Determine employee eligibility for benefits |  Basic employment information based on plan design and may include: o Job titleo Employment statuso Scheduled hours | ☒ |
| **Payment**  Claim decisioning and/or claim payment with minimal employer outreach | * Earnings information aligning to the earnings definition * Coverage details based on plan options and may include: o Benefit percent or amount o Benefit waiting period   *NOTE: We may require validation of earnings before using the feed exclusively for claim payment purposes. This validation is handled separate from the feed implementation.* | ☒ |

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1. Multiple files will be required during this phase until test file meets The Standard’s requirements

   [↑](#footnote-ref-0)
2. Contact for questions about data in the file [↑](#footnote-ref-1)