HSA Contributions

Interface Requirements Specification

# Versa Integrity Group

# Contact Information

## Customer Contact

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| --- | --- | --- |
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**Vendor Contact**

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| --- | --- | --- |
| **Name** | **Phone** | **Email** |
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## Integration Contact

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| --- | --- | --- |
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# Revision History

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Date | Version | Revision Description | Comments | Author |
| 1 | 03/03/2020 | 1.01 | Initial Draft |  | Lea King |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |

# Customer Confirmation

HSA

1. **Vendor Name:**HSA Bank
2. **Confirm Group or Plan Number:** VIG493
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)*:

Exclude eecemptype TES

1. **What kind of HSA Files would you like Ultimate Software to Create?**

|  |  |  |
| --- | --- | --- |
| **Type** | **Employees to Include** | **Notes** |
| ☒ **HSA Contribution** | Employees with Applicable Deduction Code | Send terms as long as there is a deduction amount to report. |
| *This file will typically sends payroll contribution amounts to vendor to confirm deduction amounts.* | | |

1. **Please include the applicable UltiPro Deduction/Earning Codes for each that apply:**

**UltiPro Deduction Code**

|  |
| --- |
| HSAFM |
| HSAFC |
| HSAEE |
| HSAEC |

1. **Open Enrollment Option = Ultimate will build two Open Enrollment Sessions – one Active and one Passive.**

**What type of enrollment will you be offering?**

☒ Active ☐ Passive

*An ACTIVE session requires all employees to go in and make an election. If an employee does not re-elect their benefit, they will be dropped from that benefit. Since this is a changes-only file, we need to know if to include the employee with a coverage stop date, or if they will be termed by omission from the file. We do not need to worry about the passive file since this is a full file, and we will send a coverage stop date automatically.*

**If an employee stops their current benefits during an ACTIVE Open Enrollment, would you like to include them on the file with a stop date?**

☒ No ☐ Yes

# Notes to Developer

Comma delimited text file