



## **Add or update staff insurance data**



# Table of Contents



# Add or update staff insurance data

[Personnel](#) > [Maintenance](#) > [Staff Demo](#) > [Insurance](#)

Add or update insurance data for all applicable employees.

Since ACA is reported over a calendar year, some employees may have multiple rows if they changed insurance companies during the last enrollment period and you added insurance codes for each plan.

## Retrieve an existing record

Begin typing the employee name or number. As you type the data, a drop-down list of corresponding data is displayed. Select an employee and click **Retrieve**. Or, click **Directory** to perform a search in the [Employees Directory](#).

**Note:** The employee autosuggest field includes employees whose records were created in Personnel but do not have a Pay Info or Job Info record.

If the employee number does not exist in the system, a message is displayed prompting you to create a new employee. Click **Yes**.

☐ Click **+Add** to add a row.

Field	Description
<b>Company</b>	Click  to select an insurance company.
<b>Plan Number</b>	Type or click  to select a plan number for the selected insurance company. Or, press the SPACEBAR to view a list of available plan numbers.
<b>Plan Type</b>	Click  to select a plan type to include the appropriate family members.
<b>Employee Insurance ID</b>	Type the insurance ID for the employee. The field can be a maximum of 20 digits. This field is optional.

Under **Individuals Covered By:**

☐ Click **+Add** to add a row for each individual (including the employee) covered by the selected plan in the top grid.

<b>SSN</b>	Type the nine-digit social security number of the family member covered by the employee's insurance policy.
<b>DOB</b>	Type the family member's date of birth in the MMDDYYYY format.

<b>Relation</b>	Click ▼ to select the relationship of the dependent to the employee.
<b>First Name</b>	Type the first name of the dependent. The field can be a maximum of 17 characters.
<b>Middle Name</b>	Type the middle name of the dependent. The field can be a maximum of 14 characters.
<b>Last Name</b>	Type the last name of the dependent. The field can be a maximum of 25 characters.
<b>Gen</b>	Click ▼ to select a generation code for the covered individual.
<b>Coverage Begin</b>	Type the date that the insurance coverage begins in the MMDDYYYY format.
<b>Coverage End</b>	Type the date that the insurance coverage was terminated in the MMDDYYYY format.  If the insurance coverage is still active, leave this field blank.

☐ Click **Save**.



## Back Cover