

**Fleet-Net® for Windows**  
**Product of Avail Technologies, Inc.**  
**Human Resources**  
Prepared By  
Fleet-Net Corporation®

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## About This Guide

This guide contains standard procedures for operation and a description of each feature released with the module. The module description provides the intended application or use of the module and any comments that relate to this specific module.

Below are features that are used through FNW applications.



To correctly exit a form click on the Avail® Icon always located in the upper right of every form.



\*\*When the binoculars search function is not available, nor a drop-down list, select 'Ctrl F' as a search tool.

When using this button to search the following sample form will open. Use any of the search item criteria to find your item select it and it will populate at the bottom of this form. To populate the previous form with the selected item simply hover over the item # and double click it. Close the search form.



Throughout Fleet-Net® modules, there are Green Check marks that will appear next to specific fields. These Green Checkmarks when selected will open the Misc. List Codes form allowing the user to set up the necessary codes and their value for the associated field.



The clock button allows for changing the time entry.



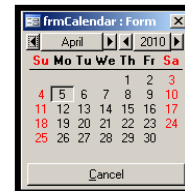
The question mark button opens the search option.



The Stop button aborts the current selection process.



The calendar button allows for quick selection of a specific date via a calendar. Calendar defaults to current date.



The calculator button allows for quick simple calculations on the fly. It opens up your systems calculator.



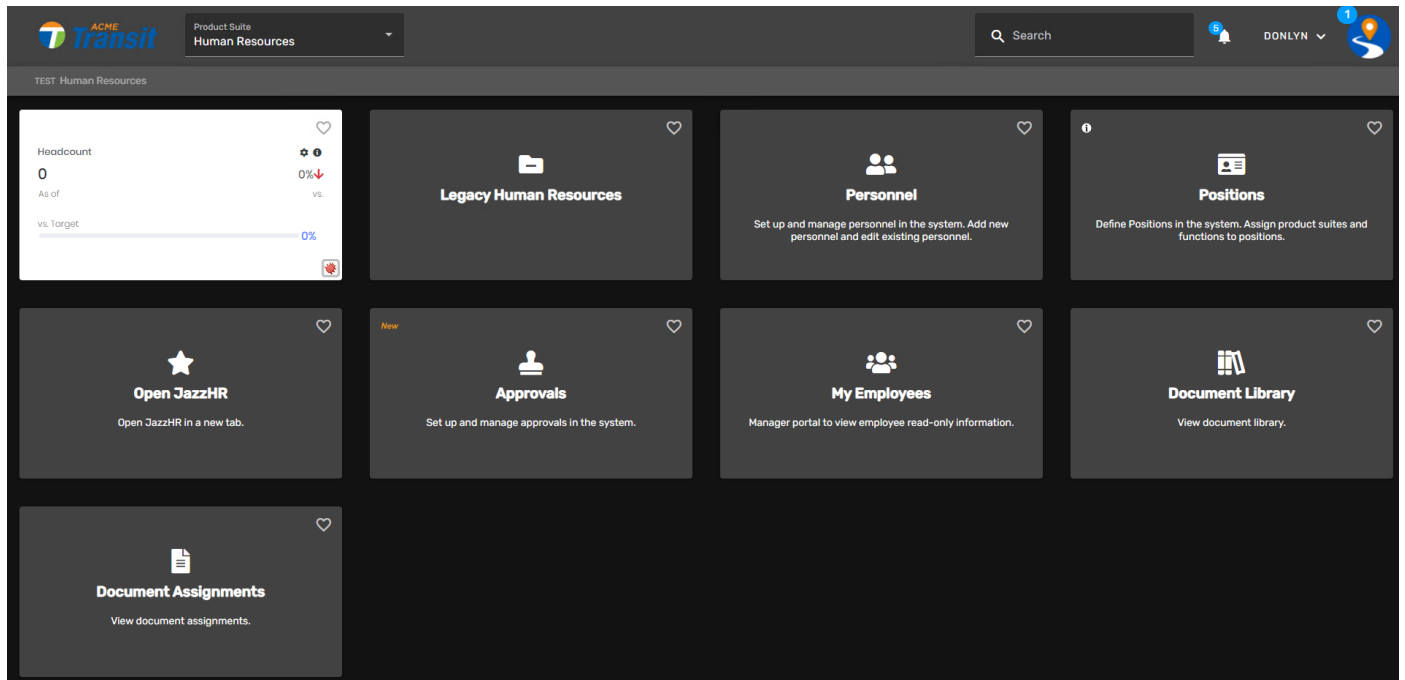
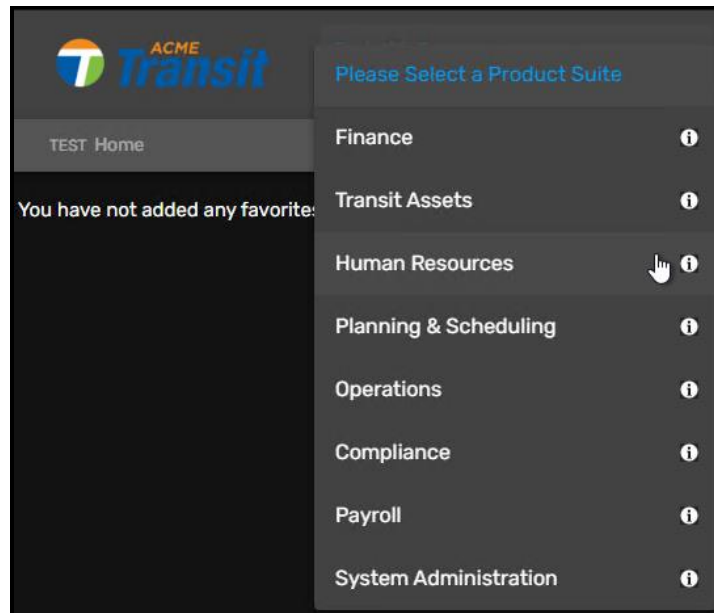
## Human Resources Implementation

It is understood that the Systems Administration Guide had been followed completely and that all other modules are working prior to the Human Resources installation.

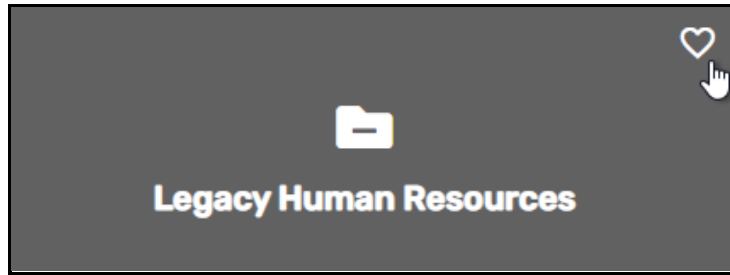
As with all Fleet-Net® for Windows modules, the module must first be installed as directed in the System Administration Guide. Briefly, this includes (1) copying the data files, program files, server database, and the client master database, (2) running the configuration program, (3) copying the client master for individual use, (4) utilizing the HR/PR import tool.

## Human Resources Suite

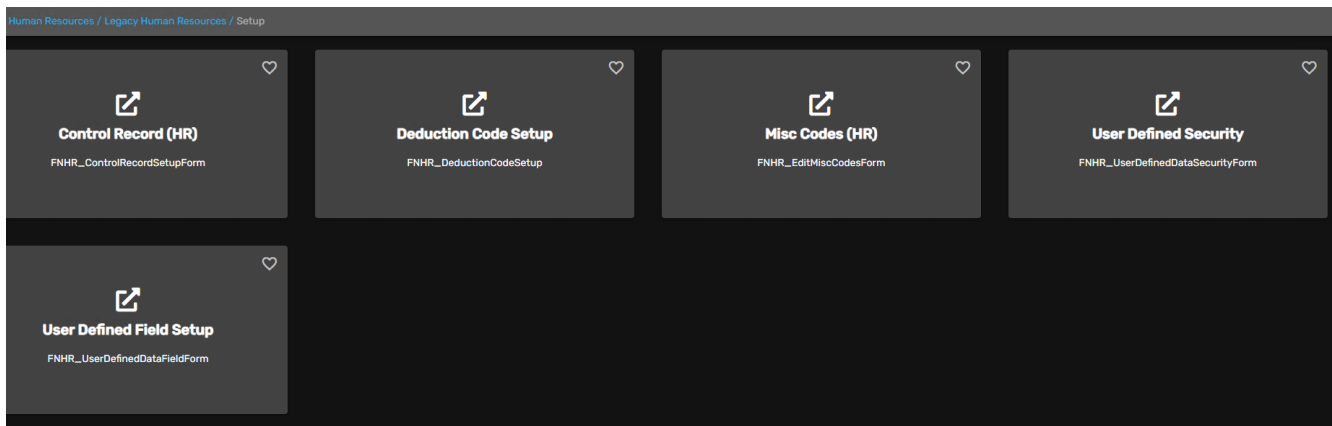
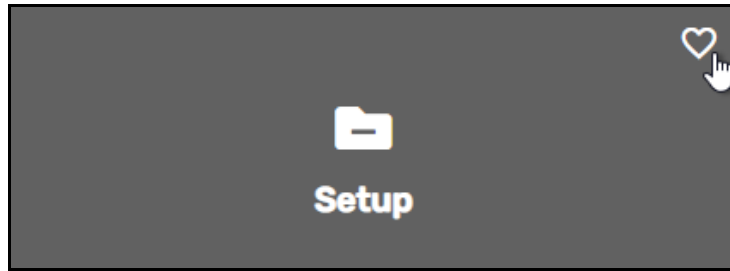
The **Human Resources Product Suite** contains several human resources cards. The **Legacy Human Resources Card** can be your starting point for locating other Human Resources forms. The titles on the cards are category descriptions that allow the user to find a particular section of the Human Resources application.



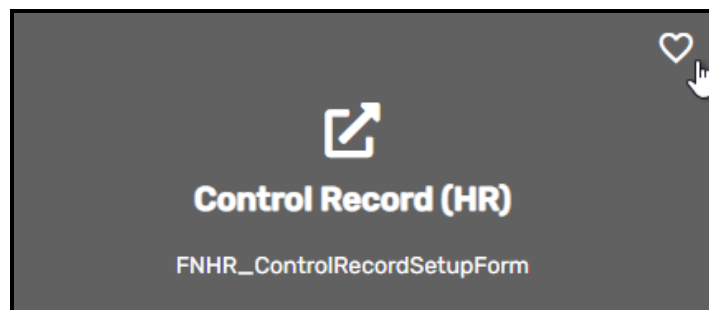
## Legacy Human Resources Card



## Setup Card



## Control Record (HR) Card



This form is used for assigning the next sequential number to the Record Types listed in the first column.



Control Record Setup Form				
Record Type	Value	Maximum Value	Max Digits	Add Leading Zeros
DOTPhysTranNo	954			<input type="checkbox"/>
FmlalncidentFormNo	241	0		<input type="checkbox"/>
FmlalncidentHistNo	26	0		<input type="checkbox"/>
FmlalncidentNo	304	0		<input type="checkbox"/>
JobApplicationNo	6290	0		<input checked="" type="checkbox"/>
				<input type="checkbox"/>

Field Name	Description
Record Type	This field is <b>case sensitive</b> and must be entered as shown above.
Value	For JobApplicationNo, this is the last application number used. In the example above, the next application number that will be generated will be 7.
Maximum Value	Enter the maximum value that will allowed. If the Max Digits is 5, the maximum value would be 99999.
Max Digits	Leading zeros 'pads' the number with zeros; if Job Application number is 6 and max digits is 5 and add leading zeros field is check the job application will be 00006.
Add Leading Zeros	Check this box to add leading zeros to the sequential numbering.

Deduction Code Setup Card



Adding a Deduction Code here will allow you to choose this option from the drop-down list when entering benefits on the Employee Master Form.

**\* DO NOT DELETE ANY DEDUCTION CODES FROM THIS LIST\***

Deduction Code Setup			NTD Fringe Benefit Object Class
Code	Description		
00	LIFE INS.-BILL VOLK		✓
01	EMPLOYER SPONSORED HEALTH CARE		✓
06	MED INS-FLEX FAM PREM CATCH UP		✓
10			✓
19	CHILD SUPPORT		✓
20	HOLIDAY SHOPPING TRIP		✓
21	CREDIT UNION		✓
22	A. R.		✓
23	MED.INS.-FLEX FAMILY PREMIUMS		✓
24	MED.INS.-FLEX EE PREMIUMS	50203	✓
25	CCC		✓
26	UNIFORMS		✓
27	IMRF		✓

Miscellaneous Codes (HR) Card



Click **Miscellaneous Codes** to define all codes used throughout the Human Resources module. Each application includes a list of miscellaneous codes that are used within the system. Some of these codes are preset by Avail (Specific) while others are user defined.

**Modify / Add Misc List Codes**

Module: HR

Type:


- AbsenceType
- AcaCoverageCode
- AcaSafeHarborCode
- AffordableCareAct
- Attachments
- BenefitCode
- BenefitType
- Citation
- CitationDisposition
- CitationLocation
- ContactPhoneType
- ContactRelationship
- Department
- DependentCode
- Disposition
- DispositionCode

Print

**Modify / Add Misc List Codes**

Module:

Type:




Code	Value
AF	Active - Full Time
AP	Active - Part Time
AT	Active - Temp
IQ	Inactive
TS	Test
▶	

Field	Description
Type	Select from the drop-down options.
Code	Code used to identify the type of code.
Value	Definition of code.

The Print button will print a listing of all Miscellaneous Codes. The report will display the TYPE, CODE and VALUE.

Human Resources Misc Values		
Module: HR		
Type	Code	Value
PayrollStatus	AF	Full Time Active
PayrollStatus	AP	Part Time Active
PayrollStatus	IN	Inactive

User Defined lists can be updated "on the fly" by clicking the green checkmark (  ) next to the field. Below is a list of user defined lists and the character limit.

List Code Type	Character Limit
AbsenceType	1
AffordableCareAct	User will specify file location and zip code coverage codes/Avail will provide software ID each year and vendor contact information
BenefitType	10
Certifying Physician Form	50
Citation	10
CitationDisposition	10
CitationLocation	10
ContactPhoneType	10
ContactRelationship	20
Department	5
DependentCode	2
DocumentCode	25
EducationType	15
EEOCode	3
EmploymentStatus	5
FMLAFormType	10
FMLAReason	5


GenderCode	1
Grade	5
HealthCareFacility	50
InjuryIllness	20
JobCategory	5
JobClass	5
JobPosition	5
Occupation	5
PayrollStatus	2 – Must begin with “A” for active and “I” for inactive
Reason	8
Results	15
Step	5
TestedFor	20
TestReason	30
Title	4
Union	5
UserDefinedFormName	50

The following are specific:

ACACoverageCode - The coverage codes should be reviewed/updated each year using the tax year instructions from the IRS. <https://www.irs.gov/pub/irs-pdf/i109495c.pdf>

### Modify / Add Misc List Codes

Module:

Type:  

Code	Value
▶ 1A	
1B	Minimum Essential Coverage Providing Minimum Value Offered to Employee Only
1C	Minimum Essential Coverage Providing Minimum Value to Employee + Dependent(s)
1D	Minimum Essential Coverage Providing Minimum Value to Employee + Spouse
1E	Minimum Essential Coverage Providing Minimum Value to Employee + Spouse + Dependent(s)
1F	Minimum Essential Coverage NOT Providing Minimum Value to Employee/Spouse/Dependents
1G	Offer of Coverage to Part Time Employee enrolled in Self-Insured Coverage
1H	No Offer of Coverage
1I	Qualifying Offer Transition Relief: 2015
1J	Minimum Essential/Providing Min Value to Employee + Spouse Conditionally
1K	Minimum Essential/Providing Min Value to Employee + Spouse + Dependent(s) Conditionally
1L	HRA Employee Only Affordability by Zip
1M	HRA Employee + Dependents Affordability by Zip
1N	HRA Employee + Spouse + Dependents Affordability by Zip


Record: 1 No Filter Search

ACASafeHarborCode

**Modify / Add Misc List Codes**

Module:

Type:




Code	Value
▶ 2A	Not Employed During the Month
2B	Employee Not a Full Time Employee During the Month
2C	
2D	
2E	
2F	
2G	
2H	
2I	
*	

FMLATypes

**Modify / Add Misc List Codes**

Module:

Type:



Code	Value
▶ F	Federal
S	State
*	

User Defined Security Card



Select this form to set up user rights to access the User created forms.

**User Defined Form Security**


User Id:



Select a User ID from the drop-down list.

### User Defined Form Security

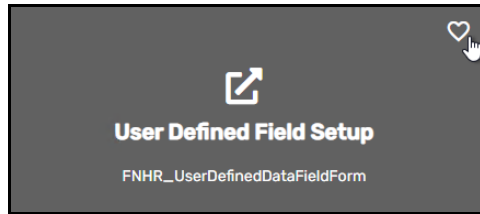
User Id:



Form Name	Description
<input type="text" value="Company Property"/>	<input type="text" value="Company Property"/>
<input type="text"/>	<input type="text"/>

Select the forms the employee should have access to under Form Name.

### User Defined Field Setup Card



Select this form to create the user defined data to be captured.

### User Defined Forms



**Data Fields**

Form Restrictions


Field Restrictions

Rename Fields

### Data Fields

Click the Data Fields Button

### User Defined Forms



Field Name	Field Type	History
<input type="text" value="Access Card"/>	<input type="text" value="Text"/>	<input checked="" type="checkbox"/>
<input type="text" value="Added"/>	<input type="text" value="Date"/>	<input checked="" type="checkbox"/>
<input type="text" value="Cell Phone"/>	<input type="text" value="Text"/>	<input checked="" type="checkbox"/>
<input type="text" value="Garage Key"/>	<input type="text" value="Text"/>	<input checked="" type="checkbox"/>
<input type="text" value="Laptop"/>	<input type="text" value="Text"/>	<input checked="" type="checkbox"/>
<input type="text" value="Permit #"/>	<input type="text" value="Text"/>	<input checked="" type="checkbox"/>
<input type="text" value="Stopped"/>	<input type="text" value="Date"/>	<input checked="" type="checkbox"/>
<input type="text" value="Teledriver #"/>	<input type="text" value="Text"/>	<input checked="" type="checkbox"/>
<input type="text" value="Year of Employee Review"/>	<input type="text" value="Date"/>	<input checked="" type="checkbox"/>
* <input type="text"/>	<input type="text"/>	<input type="checkbox"/>

**Data Fields**

Form Restrictions

Field Restrictions

Rename Fields

Field Name	Description
Field Name	Enter the field name.
Field Type	Select the format for the field from the drop-down.
History	Check this box if you want to see historical information in reports.

### Form Restrictions

Click the **Form Restrictions** button to create the form name and location assignment.

User Form Name	Fleet-Net Form Name
Company Property	FNPR_EmployeeMasterForm
Employee Evaluations	FNHR_EmployeeInformationForm
Employee Evaluations	FNHR_UserDefinedDataEntryForm
Employee Evaluations	FNPR_EmployeeMasterForm
New Form	FNPR_EmployeeMasterForm
Parking Permit	FNPR_EmployeeMasterForm
Teledriver	FNPR_EmployeeMasterForm
*	

Field Name	Description
User Form Name	Select the form name from the drop-down
Green Check Mark	If the form name does not exist, click the green check to add it. Once added, you can select it from the drop-down for User Form Name.
Form Name	Select the form (location) you want users to be able to enter the requested information.

### Field Restrictions

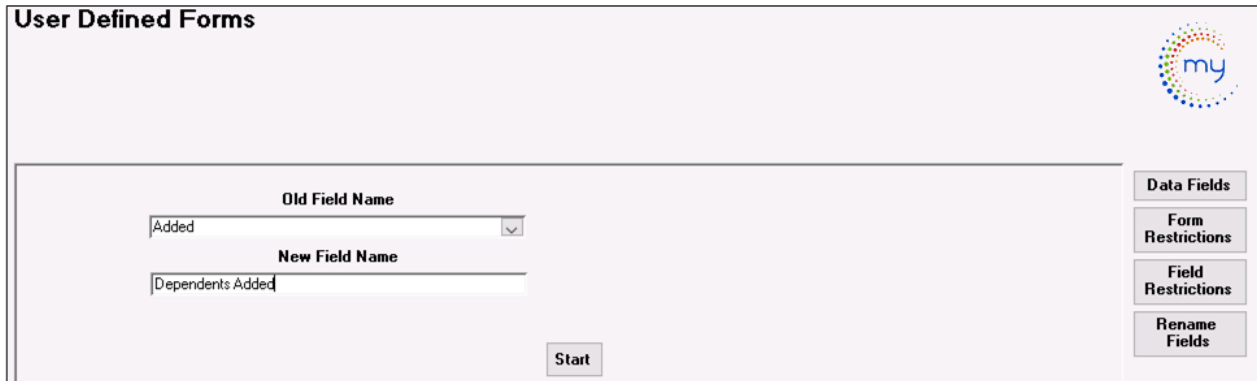
Click the **Field Restrictions** button and select the form name from the drop-down.

Field Name
Access Card
Cell Phone
Garage Key
Laptop

Using the drop-down under Field Name, select what field(s) should show on the form for data entry.

### Rename Field

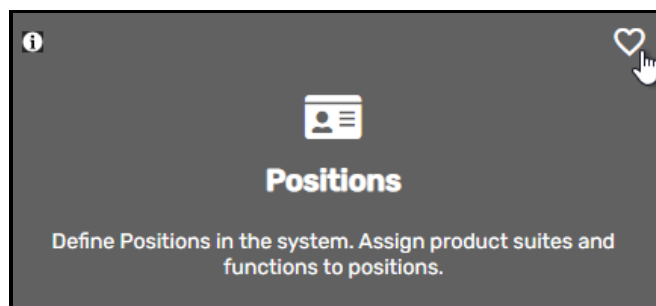
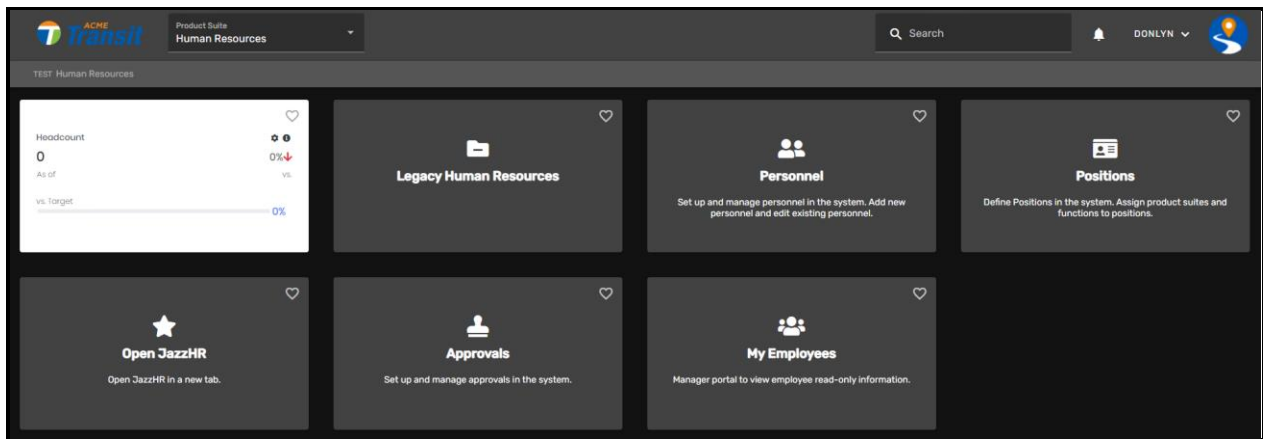
Click the **Rename Field** button to rename a field on the form.



Select the existing name from Old Field Name. Enter the new name in New Field Name. Click Start.

### Positions Card

From the Product Suite Human Resources, choose the Positions Card



### Positions Overview

System administrators set up positions that aggregate myAvail functionality in a manner that allows users to perform their jobs. After the administrators define the positions, they can assign positions to the users. This process allows users to access functions that are set up within their position.

Each agency defines their set of positions and determines the suites and functions accessible to each position. Some functions have additional rights, such as View/Edit, that can be applied at the position level. While agencies can use their unique set of job titles to create and define positions that map to our suites and functions, the product comes with a predefined (default) set of positions that the agency can use and modify as needed.



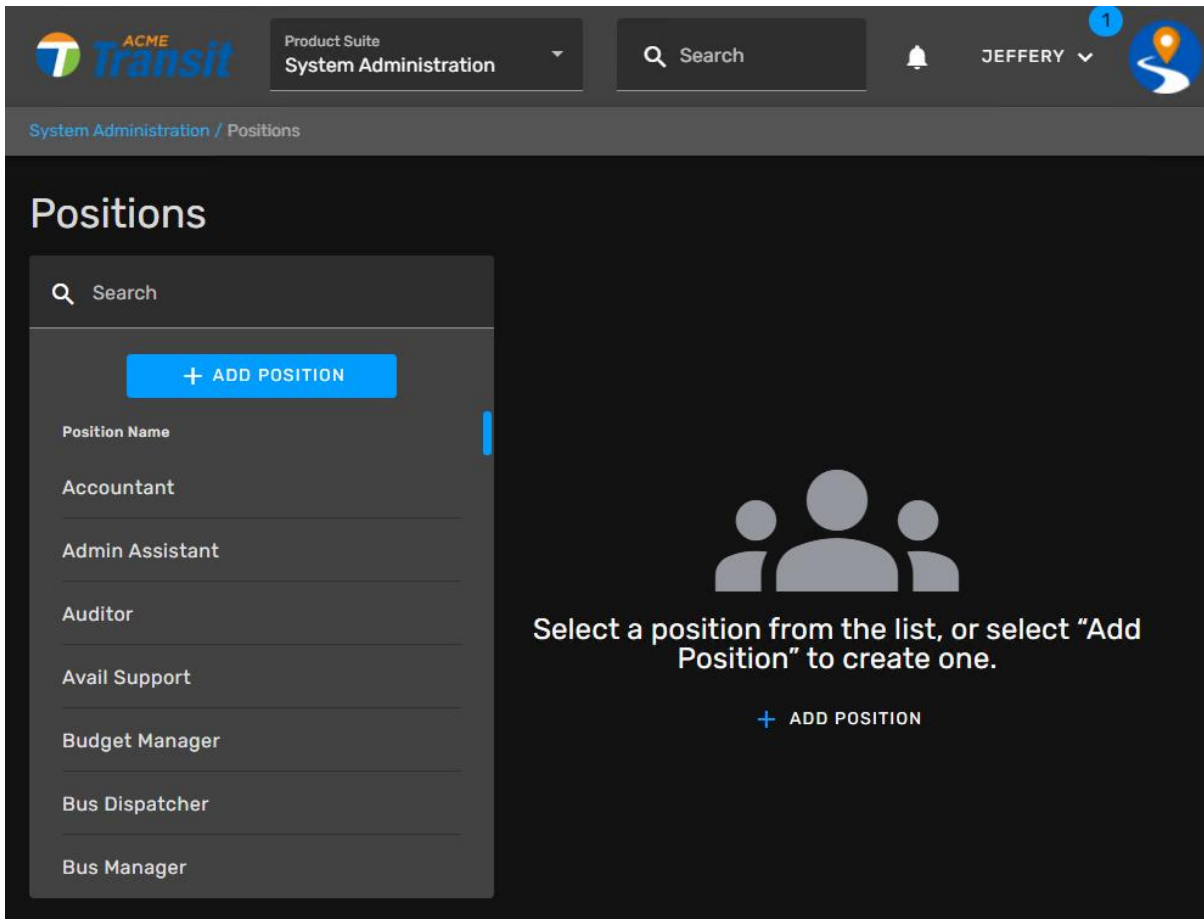
Administrators can assign users to only one position. When considering the positions that an agency requires, consider the various job titles/descriptions within the agency. Some positions will apply to many personnel (e.g. drivers, mechanics, dispatchers, road supervisors). Other positions apply to only one person (e.g. Executive Director, Operations Director, etc.).

For each of these positions, the agency defines the set of available suites and functions. For example, a Dispatcher position would include selected functions within the myAvail Operations suite.

After the agency hires a new Dispatcher, a system administrator creates a new user and assigns them to the Dispatcher position. That process allows the new hire to access all the functions and rights for that position.

## Adding a New Position

To add a new position, click the Add Position button.

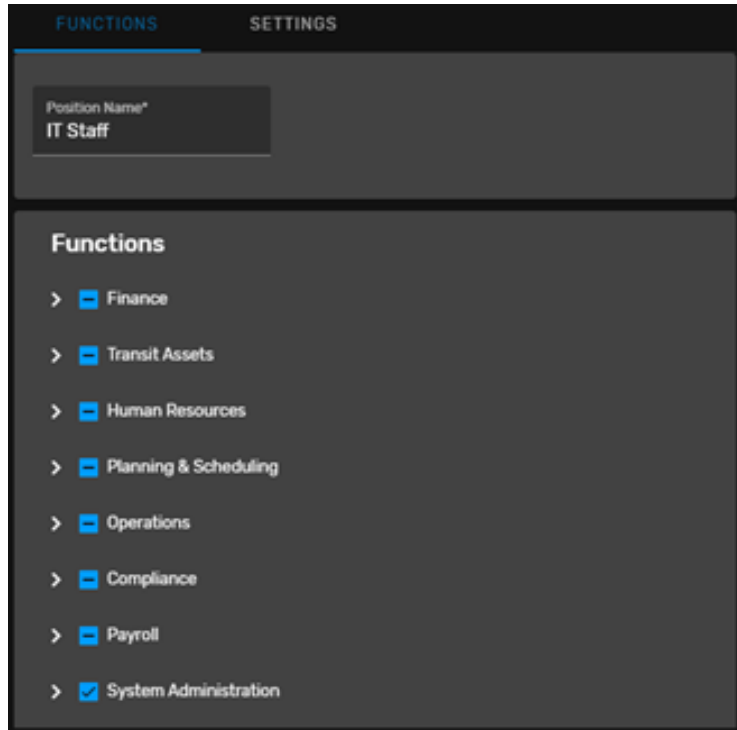


ETMS displays a form for entering the position name and specifying functions that this position can access. To learn how to enter information into this form, read the next section about editing positions.

## Functions Tab

You can define a new position or edit existing position. To define a new position, click the Add Position button and the system displays a blank form. For existing positions, click the position in the list. This list displays positions alphabetically. Use the search box to avoid scrolling through a long list.

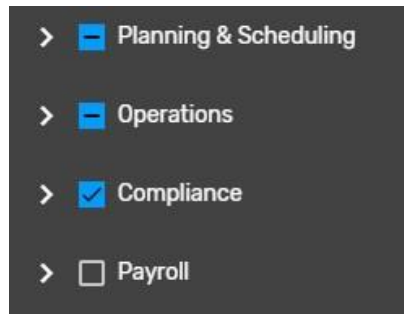
After creating a new position or selecting an existing position, ETMS displays the form below.



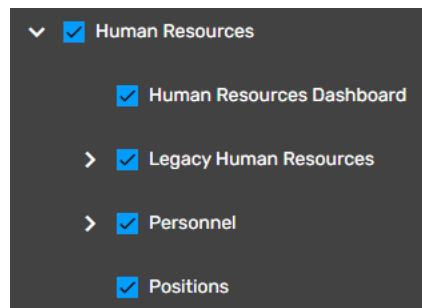
This form has two tabs for entering information - Functions and Settings. However, most positions only use the Functions tab. When editing an existing position, the form displays the functions that the position can access.

In the list of functions, you can expand each function that has a > view subfunctions. To change the position's functions, check or uncheck the functions, and then click Save.

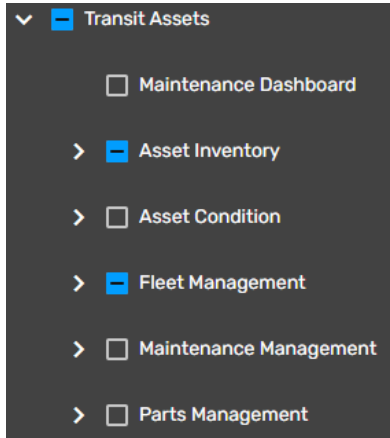
While assigning functions to a position, it is crucial to understand the distinction between functions in the list that have a dash, a checkmark, or are unchecked.



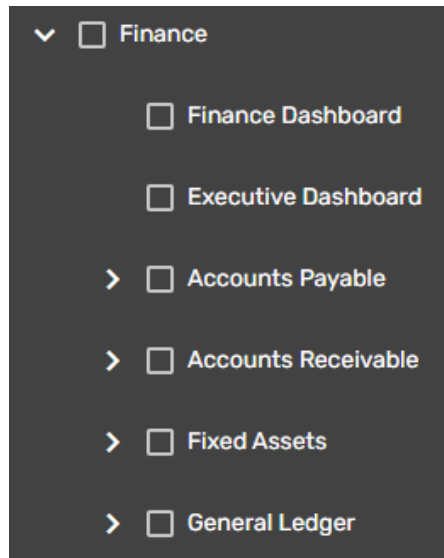
A function that has a checkmark indicates that the position can access all the subfunctions. For example, the HR Supervisor position has a checkmark for the Human Resources function. When you expand that function, all the subfunctions are checked.



However, when a function has a dash, the position can access some but not all the subfunctions, as shown below with the Transit Assets functions.



Finally, unchecked functions indicate the position cannot access any of the subfunctions.



Carefully consider which functions and subfunctions each position requires. A position might not require the ability to access all subfunctions. In those cases, the best practice is to deselect the unnecessary functions and subfunctions.

For most positions, after specifying its functions, click Save and you are done. However, if the position can view and edit other users' information, you must also use the Settings tab.

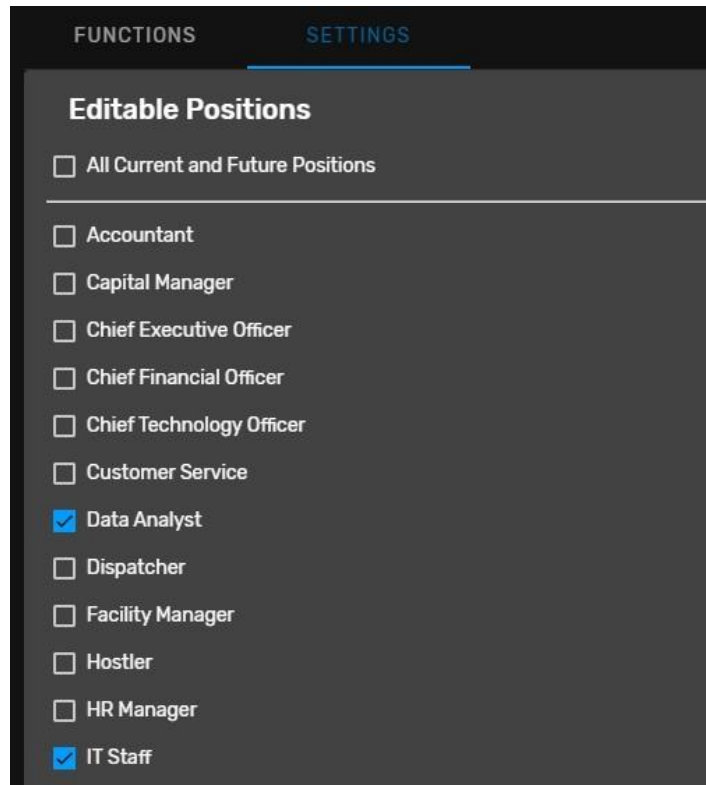
**NOTE:** If a position needs to log on to a vehicle, you must assign the Operator functions to that position. For example, mechanics, supervisors, and managers might need to log on to vehicles.

### Settings Tab

The Settings tab is active only for positions that have functionality checked under the System Administration section in the Functions tab. Users in these positions can view and edit other users' data in the Users section of ETMS. Use this checklist to limit the user data that users in the selected position can view and edit. This feature also limits the permission changes they can grant.

A user in the selected position can view and edit other users in the Users section of ETMS only when those users are assigned to the editable positions that are checked in the Settings tab.

Additionally, a user in the selected position can assign users only to the checked editable positions. For example, an agency might want to allow a manager to view, edit, and assign users only to positions that the manager directly oversees.



In the example above, the settings impose the following restrictions. The current position can do the following:

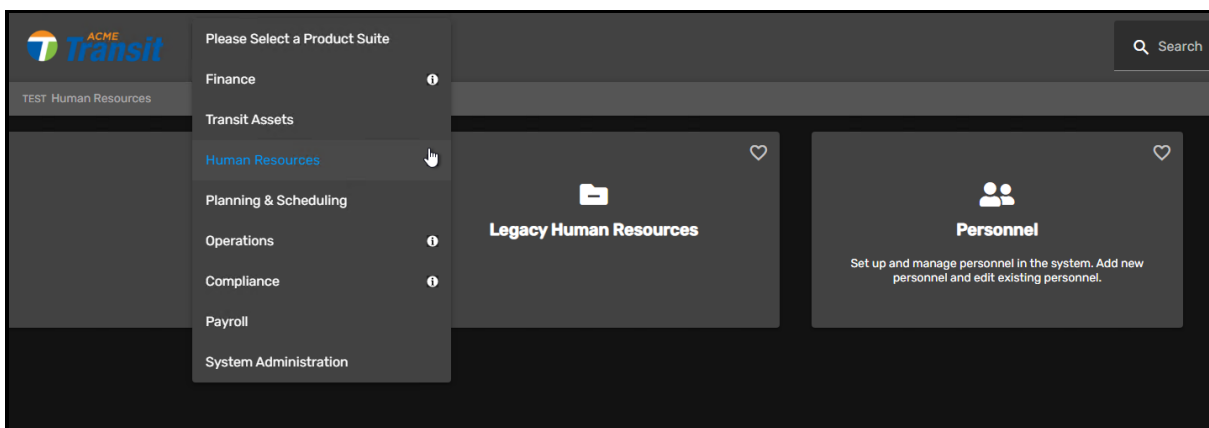
- View and edit only users whose positions are either Data Analyst or IT Staff.
- Assign users only to a position of either Data Analyst or IT Staff.

When restricting editable positions, many agencies do not want users to be able to change their own information. To prevent that possibility, do not check the editable box for the position you are currently changing. For example, if you are assigning functionality for the Data Analyst position, do not check the Editable Position box for Data Analyst.

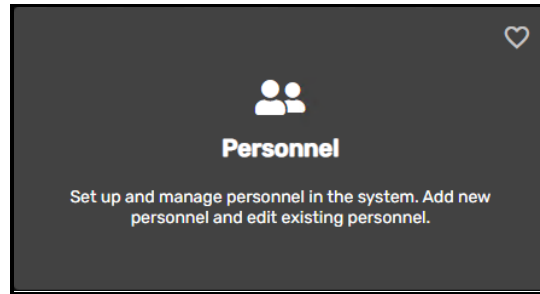
If you check the All Current and Future Positions checkbox, it is equivalent to checking all the positions. Additionally, if system administrators add new positions to the system in the future, they will also be checked. This setting allows users in the selected position to view all other users and to assign all positions to them.

## Personnel Card

From the Product suite drop-down choose Human Resources.

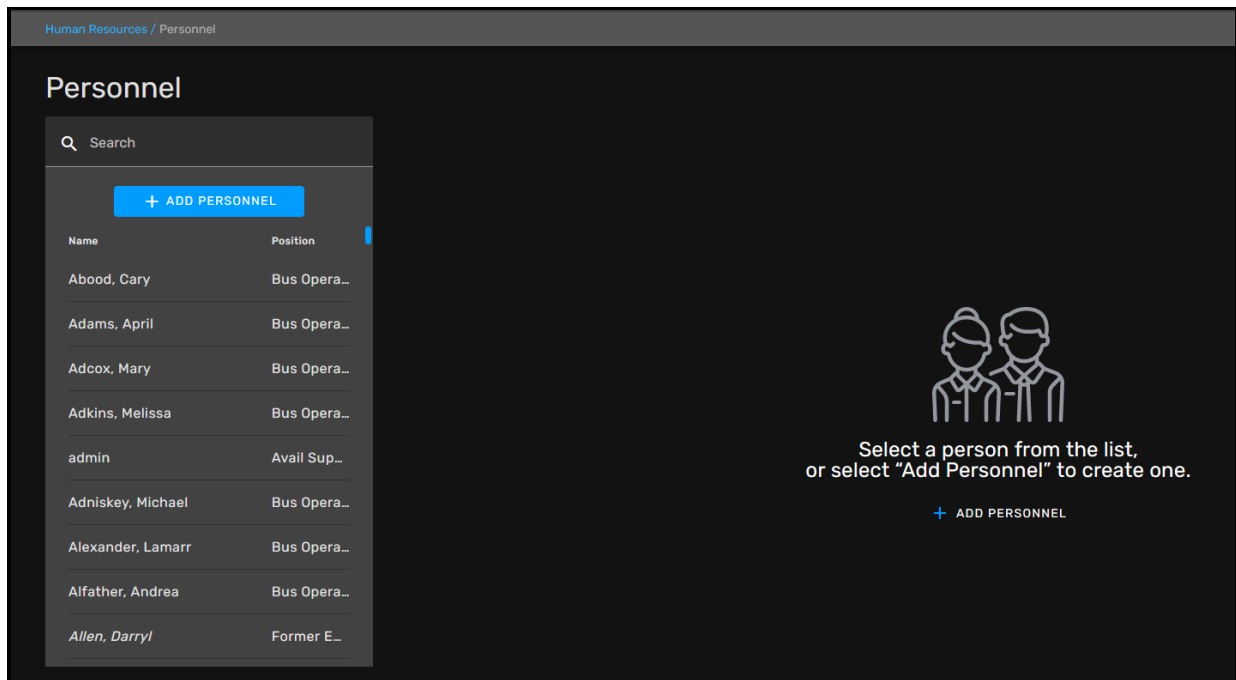


Click on the Personnel Card.



## Search and Add

To search for an employee, enter their name in the Search field or choose their name from the list. If adding a new employee click the Add Personnel button.



This form has six tabs for entering information: Basic Info, User Settings, Employment Info, Personal Info, Position Settings and Audit.

## Basic Info Tab

This is the tab where the user can enter basic information.

First Name, Last Name, Display Name and Position are required fields.

**Display Name** - This defaults to "Last Name, First Name", but it can be changed by the user. The display name must be unique because it identifies the user on all reports and screens.

**Is Active** - This button will default to checked when entering in a new employee. To make a user inactive, uncheck the Is Active checkbox, a popup will ask you to confirm the selection because the user will not be able to log on.

**User Type** - Pick a user type from this drop-down, etc. an Employee, Contractor, Consultant, or a Board Member. This field is used for Employee and non-ERP customers. If a non-employee is chosen, the Employment Info, Personal Info, and Position Settings tabs will not need to be filled out and will be greyed out/disabled.

**Position** - This drop-down contains the list of possible positions to assign to a user. This choice defines the system functionality the user can access, this field is required.

Enter the user's address, City, State, and zip code.

For email and mobile phone numbers, enter the information for where myAvail should send email and text alert messages. Click Next/Save.

## User Settings Tab

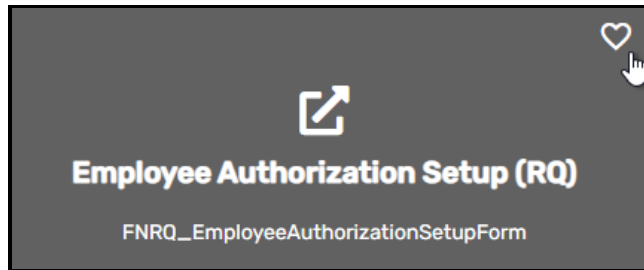
This tab allows the user to enter a password. It must be at least 8 characters, have at least one non alphanumeric character and at least one digit.

The screenshot shows the 'USER SETTINGS' tab in a dark-themed interface. At the top, there are navigation tabs: BASIC INFO, USER SETTINGS (highlighted), EMPLOYMENT INFO, PERSONAL INFO, POSITION SETTINGS, and AUDIT. On the right, there are 'CANCEL' and 'SAVE' buttons. Below the tabs, a section titled '\*Required' contains several input fields: 'User Name\*' with the value 'admin', a 'Password' field, two checkboxes for 'Purchase Order Access' and 'Requisitions Access' (both unchecked), an 'Email Password' field, and a 'Default Facility' dropdown menu.

If the user needs to login to myAvail, they must enter a password. Passwords are not required for Operators who will not be logging in to myAvail. Use the checkboxes if the user will be accessing Purchase Orders or Requisitions, additional setup is required. The Email Password field will be used by all employees and will be the password for their Agency Domain Email address. Click Save.

### If an Employee Needs RQ Authorization Permission

If the employee needs RQ authorization permission, the parameters for this permission need to be set up in the legacy RQ Employee Authorization Setup screen accessed via ETMS.



1. Select the employee’s ID in the Authorization ID drop-down in the RQ screen. If the employee is not in the drop-down, then the RQ access checkbox needs to be checked for this employee in the User Settings tab in their Personnel card. New employees must be added by Human Resources.

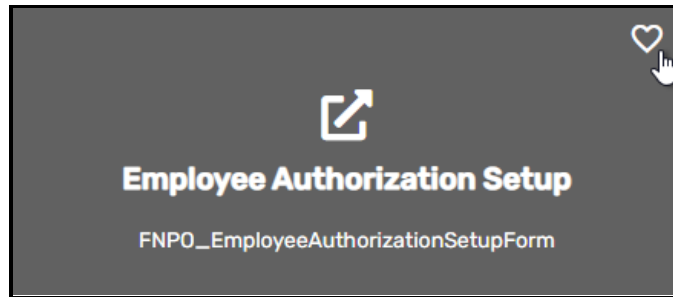
This screenshot is similar to the one above, but the 'Requisitions Access' checkbox is now checked. The 'Purchase Order Access' checkbox remains unchecked. All other elements, including the tabs and buttons, are the same.

2. Fill in the fields on the Employee Authorization Setup screen
3. Pin setup is disabled because employees set up their own Pin Number via their profile.
4. Select the departments this employee will be authorizing for and their limits.
5. Select the Roles button to choose each department and assign the appropriate role for this employee.

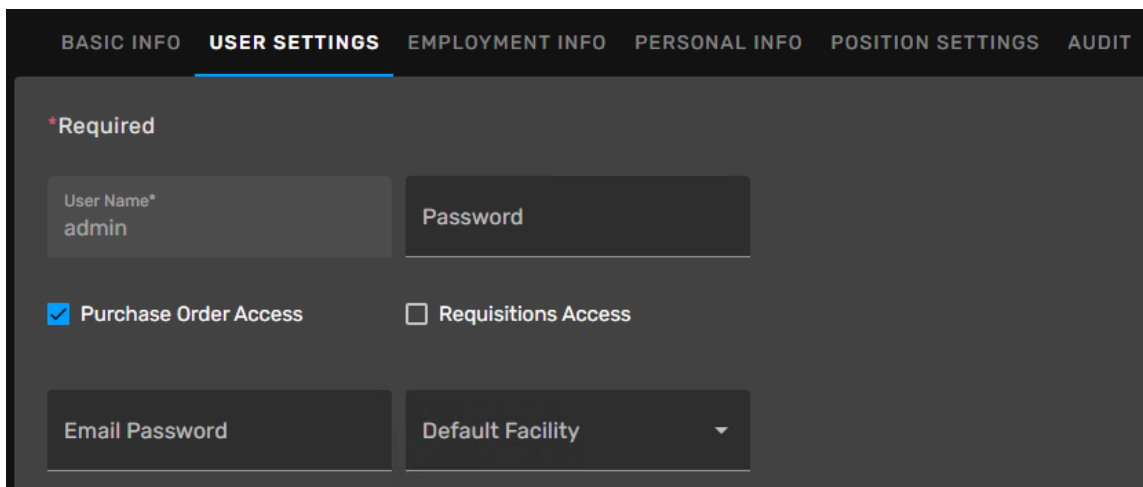
**NOTE:** Authorizers are no longer deleted through the RQ Employee Authorization Setup screen. To remove RQ Authorization permission from an employee uncheck the RQ Access checkbox for this employee in their Personnel card.

## If an Employee Has PO Authorization Permission

If an employee has PO authorization permission, the parameters for this permission need to be set up in the legacy PO Employee Authorization Setup screen accessed via ETMS.



1. Select the employee’s ID in the Employee Id drop-down in the PO screen. If the employee is not in the drop-down, then the PO Access checkbox needs to be checked for this employee in the User Settings tab in their Personnel card. New employees must be added by Human Resources.



2. Fill in the fields on the Employee Authorization Setup screen
3. Pin setup is disabled because employees set up their own Pin Number via their profile.
4. Select the Departments button to set up the departments for this employee.

**NOTE:** Authorizers are no longer deleted through the PO Employee Authorization Setup screen. To remove PO Authorization permission from an employee, uncheck the PO Authorization checkbox for this employee in their Personnel screen.

## Employment Info Tab

Employee Id, Payroll Status, and Hire Date are required fields on this tab.



The Employee Id is 8-character max and is alpha/numeric. If it's not auto populated the Last Employee ID at the top of the form shows what ID was used last time a new user was created in order to know what ID to assign this time.

**\*Required** \* Last Employee ID: AV-224

Choose the Payroll Status, Employment Status, Manager, Department, Job Class, Job Category and Job Position from the drop-down. The options in the dropdowns are pre-determined by the transit during initial setup.

Enter the Hire Date, this field is required. Enter the Full Time Date, Termination Date, Seniority Date, Dept Seniority Date, Job Class Seniority Date, Union/Local, Seniority #, Job App #, and Export Path if needed. Click Save.

**NOTE:** If using payroll, set up Additional Employee Information in Legacy Screens.

The following employee information will be set up through legacy PR screens accessed via ETMS cards:

- Pay Rate
- Benefits
- Dependents
- Payroll Information

### Personal Info Tab

Enter new employee's Social Security Number, Date of Birth, Gender, EEO Code, Marital Status, Driver's License#, Expiration Date, License Class, Restrictions and Name Change. Click Save.

### Position Settings Tab

The contents of the Position Settings tab depend on the Position assigned to the user. Administrators can set functions for positions that add fields to this tab. Depending on the user’s position, some of the following additional information may need to be added.

**User Alert Date/Times/Days** - These times indicate when myAvail can send alert messages to receive alerts 24/7 while a shift leader might receive them only during work hours. Union rules can apply.

**Default Fleet Groups** - This field specifies which fleet groups the user will automatically monitor while they are on the Operations tab. A fleet group is a defined set of vehicles.

**Default Talk Group** - This field sets the default group the user monitors. A talk group is a defined set of communications devices, such as radios and VoIP numbers.

**Event Email and Text Alerts** - Specify the types of alerts that the user should receive. Typically, an internal event triggers an alert to notify a user about the need to act. Avail customizes these alerts for each property. User profile update needs to be assigned to anyone that will be authorizing employee changes.

**Incident Email and Text Alerts** - Specify the types of incident alerts that the user should receive. When a user records an incident (usually an external event), it triggers these alerts. Avail customizes the types of alerts that are available to meet the needs of each property.

If the user is a Bus Operator, the Position Settings tab will show the following fields:

The screenshot shows the 'POSITION SETTINGS' tab for a user profile. It includes the following fields:

- Operator Type:** A dropdown menu currently set to 'Full Time'.
- Extraboard:** An unchecked checkbox.
- Logon ID\*:** A text input field containing the value '1234'.

**Operator Type** - Specify whether operators are full-time or part-time employees.

**Extraboard** - Check this checkbox to indicate that this user is an extra board driver. The term extra board operator applies broadly to operators who fill in for shifts as needed.

**Logon ID** - The numeric ID value that the operator uses to log in to Avail's in-vehicle system. This value must be unique for each Operator. Optionally, assign a password for the in-vehicle system.

### Audit Tab

This tab is informational only and will track who originally created this user, when it was created and the last user who updated any fields for this user and when.

The screenshot shows the 'AUDIT' tab with the following information:

Field	Value
Created By	Unknown
Created On	16/08/2021 15:08:41
Updated By	Unknown
Updated On	16/08/2021 15:08:41

### Attachments

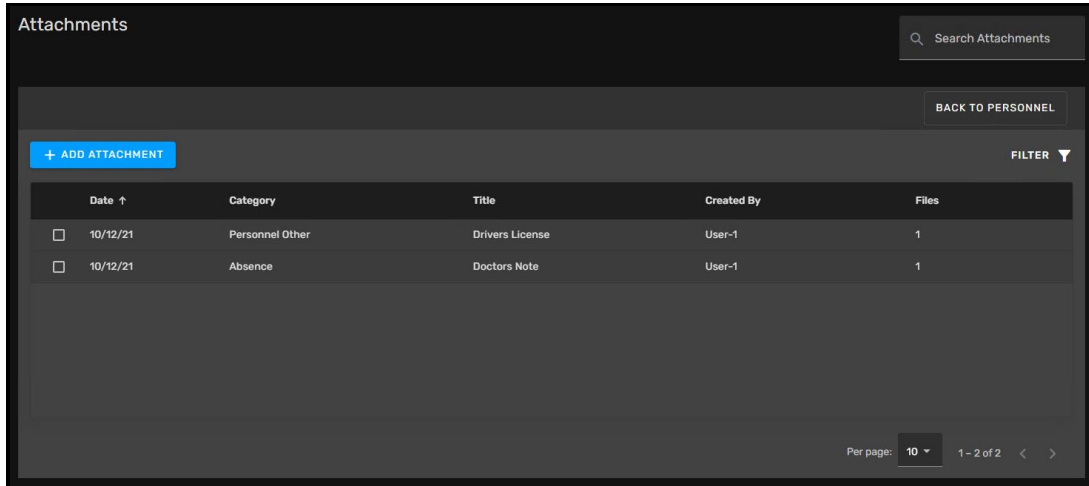
Click the Attachment button to add any Documents/Photos for this user.

The screenshot shows the 'Edit Personnel' interface. On the left is a list of personnel. On the right is a form with the following fields:

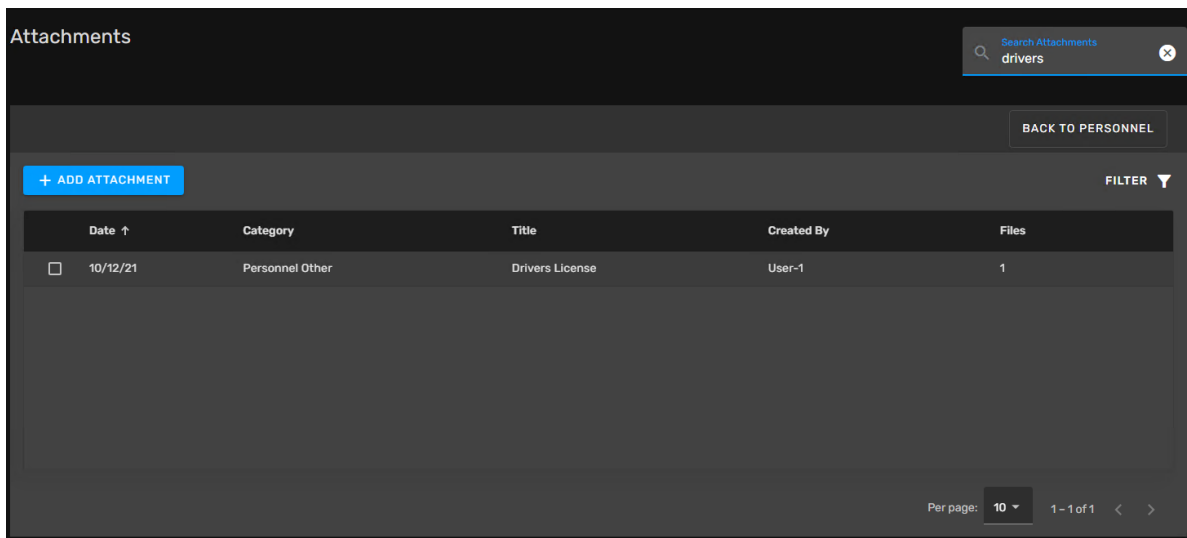
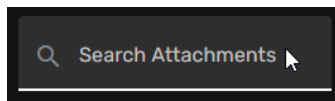
- Required fields:** First Name\* (Avail), Middle Initial, Last Name\* (Tech), Display Name\* (admin).
- Is Active:** A checked checkbox.
- User Type:** A dropdown menu.
- Position\*:** A dropdown menu set to 'Bus Manager'.
- Address Line 1:** A text input field.
- Address Line 2:** A text input field.
- City, State, Zip:** A row of three input fields.

A red arrow points to the '2 ATTACHMENTS' button in the top right corner of the form.

From this screen you can search for current attachments or add a new attachment.



To search for an existing attachment, enter the name of the attachment and click Search Attachments. This will give you a list with all attachments related to this search.

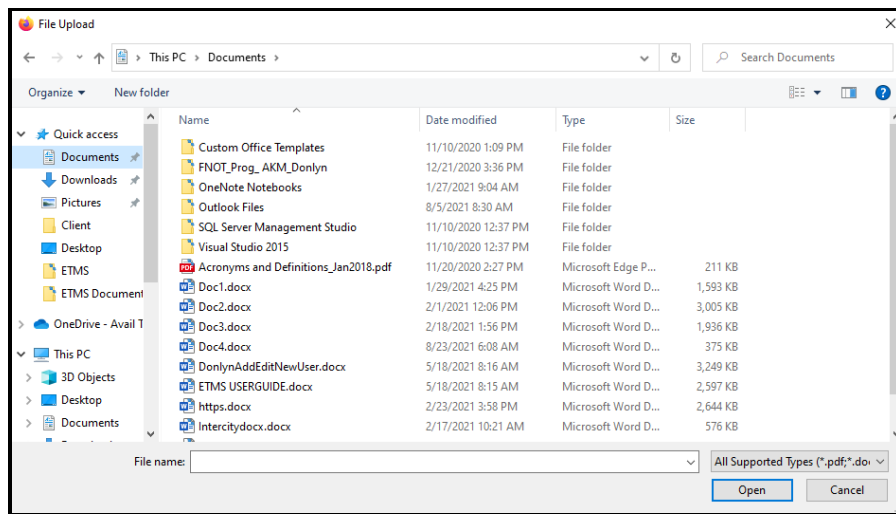
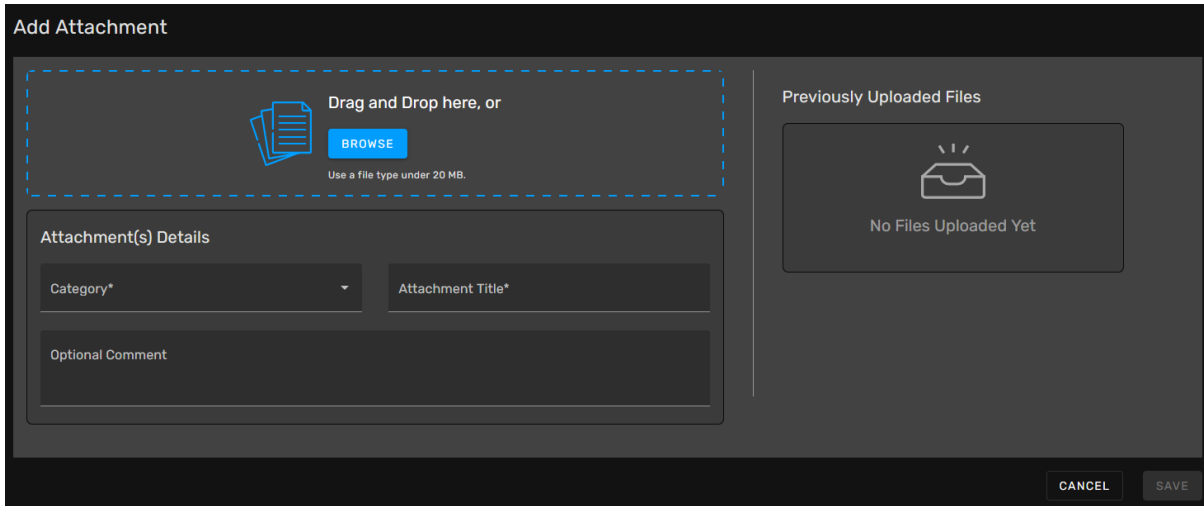


To add a new attachment click ADD ATTACHMENT.

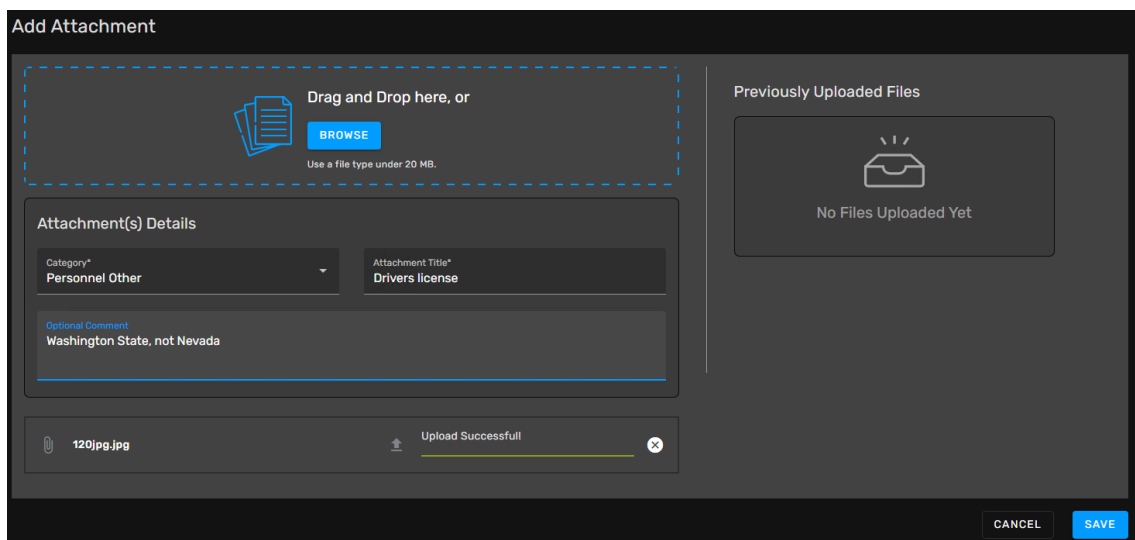


Click Browse, this will allow you to find the document needed to be attached for this user. Once the document is located, click open.





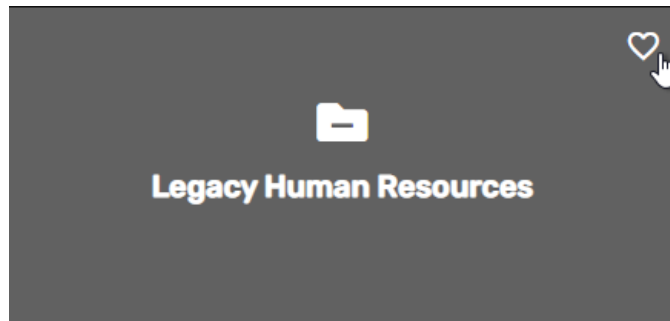
Once the attachment is chosen it will show it was uploaded successfully. Choose at Category from the drop down, Name the Attachment Title and any addition comments. Click Save. All attachments will now show for this employee.



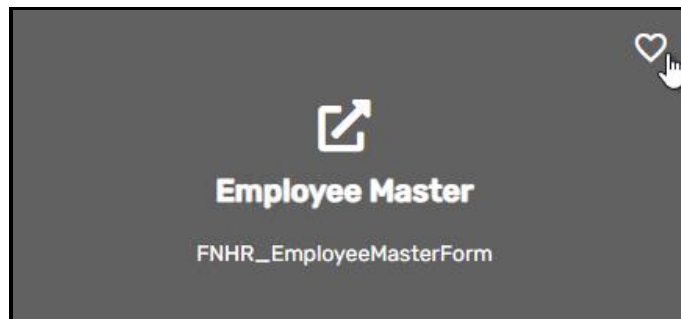
# Legacy Human Resource Card

## Employee Master Card


To complete entering in the Employee Information, click on the Legacy Human Resources Card.



Click on the Employee Master Card



From the Employee # drop-down select the employee number. The following will display:

		<b>Employee Master Setup</b>		<b>Master</b>	<b>Dependents</b>
Search Name: <input type="text" value="Figenbaum Donlyn"/>		<input type="checkbox"/> Show Inactive Employees		New	Payroll
First Name: <input type="text"/>		Employee #: <input type="text" value="33"/> <input type="text" value="Donlyn Figenbaum"/>		Pay Rate	PIN #
Employee #: <input type="text" value="33"/>		Name: <input type="text" value="Donlyn Figenbaum"/>		Benefits	Audit
Search Name: <input type="text" value="Figenbaum Donlyn"/>		Payroll Status: <input type="text" value="AF"/> <input checked="" type="checkbox"/>		Employment Status: <input type="text"/> <input checked="" type="checkbox"/>	
Name Change: <input type="text"/>		Dept Seniority Date: <input type="text"/>		Job Class Sen Date: <input type="text"/>	
Email Address: <input type="text" value="dfigenbaum@availtec.com"/>		Department: <input type="text" value="03000"/> <input checked="" type="checkbox"/> Maintenance - Mechanics			
Address Line 1: <input type="text" value="1234 Las Vegas Blvd"/>		Job Class: <input type="text" value="03000"/> <input checked="" type="checkbox"/> MAINTENANCE-MASTER MECHANIC			
Address Line 2: <input type="text"/>		Job Category: <input type="text" value="8"/> <input checked="" type="checkbox"/> Service & Maintenance			
City: <input type="text" value="Las Vegas"/> <input checked="" type="checkbox"/>		Job Position: <input type="text" value="05"/> <input checked="" type="checkbox"/> Maintenance			
State: <input type="text" value="NV"/> Zip: <input type="text" value="89117-"/>		Union/Local: <input type="text"/> <input checked="" type="checkbox"/>		Soc Sec #: <input type="text" value="123-45-6789"/>	
Phone: <input type="text"/> <input type="checkbox"/> Foreign Address <input type="text"/>		Seniority #: <input type="text"/>		Gender: <input type="text" value="F"/> <input checked="" type="checkbox"/>	
Hourly/Salary: <input type="text"/> Pay Rate: <input type="text" value="20.0000"/>		Job App #: <input type="text"/>		EEO Code: <input type="text" value="01"/> <input checked="" type="checkbox"/>	
Incr Amount: <input type="text" value="5.0000"/> Incr Date: <input type="text" value="9/14/2021"/>		Hire Date: <input type="text" value="8 /1 /2021"/>		Marital Status: <input type="text" value="M"/>	
Grade: <input type="text"/>		Seniority Date: <input type="text"/>		Date Of Birth: <input type="text" value="4 /30/1970"/>	
Step: <input type="text"/>		Full Time Date: <input type="text" value="8 /1 /2021"/>		Driver License #: <input type="text" value="NV123456789"/>	
Updated: <input type="text" value="1128"/>		Termination Date: <input type="text"/>		Expiration Date: <input type="text" value="4 /30/2024"/>	
Created: <input type="text" value="-1"/>				License Class: <input type="text"/>	
				Restrictions: <input type="text"/>	
				10/14/2021 9:51:41 pm	
				8/20/2021 7:37:51 pm	

### Pay Rate

Using this button will allow you to create/maintain the employee’s pay rate. Access to this can be restricted in HR. Please see Pay Rate Security.

Click **Pay Rate** to add or change pay rate information; the following form displays. Once an entry is completed, it cannot be deleted or edited. If changes are necessary, void the entry and enter the correct data. If a pay rate is entered with a future date, it will not be reflected on the main employee form until the payroll cycle containing that date is updated.

The screenshot shows the 'Employee Master Setup' form. At the top, there is a search bar with 'Figenbaum Donlyn' and a 'Show Inactive Employees' checkbox. Below this are fields for 'First Name' and 'Employee #' (33) with the name 'Donlyn Figenbaum'. On the right, there are buttons for 'Master', 'Dependents', 'New', 'Payroll', 'Pay Rate' (highlighted with a red box), 'PIN #', 'Benefits', and 'Audit'. Below the search fields is a 'Pay Rate History' table with columns: Effective Date, Previous Pay Rate, New Pay Rate, Grade, Step, and Voided. The table contains three rows of data, with the first two rows having dates 10/15/2021 and 9/14/2021 respectively.

Field Name	Description
Effective Date	Enter the effective date of the pay rate. This can be a future date for existing employees. If a future date is used the employee master the updated information will not display on the employee master form until the payroll containing the effective date of the pay rate is calculated. All time entry generated will use the pay rates based on the effective dates.
Previous Pay Rate	Automatically populates for existing employees. Enter current pay rate for new employees.
New Pay Rate	Enter the new pay rate.
Grade	Select the pay grade from the drop-down, if applicable.
Step	Select the pay step from the drop-down, if applicable.
Voided	Check to void an entry made in error. If an entry is voided, a warning message displays advising the user that once the entry is flagged as voided, the flag cannot be removed.
Effective Date	Enter the effective date of the pay rate. This can be a future date for existing employees. If a future date is used the employee master the updated information will not display on the employee master form until the payroll containing the effective date of the pay rate is calculated. All time entry generated will use the pay rates based on the effective dates.

You will now be able to see this information on the employee master.

The screenshot shows a section of the employee master form with the following fields: 'Hourly/Salary' (empty), 'Pay Rate' (25.0000), 'Incr Amount' (25.0000), 'Incr Date' (2/5/2021), 'Grade' (VS), and 'Step' (80%).

### Benefits

Select the employee from the drop-down list in the top portion of the screen. Click on **Benefits** and the following form will open.

To begin assigning benefit types to an employee, select from one of the drop-downs.

Field Name	Description
Existing Benefit	If benefits have been previously assigned for an employee, they will populate this drop-down menu.
All Benefits	This drop-down menu lists ALL benefits the Transit offers.

Utilizing you can create a new code (if needed) and value for the benefit type. Once completed, **Type** is available for selection. Before a record can be saved, the benefit type must be selected.

Field Name	Description
Type	If selecting an existing benefit, this field will automatically populate based on the selection made in the <i>Existing Benefits</i> field. If you're selecting a new benefit from the <i>All-Benefits drop-down</i> menu, this field will be blank, and you will make your selection from the drop-down menu.
Policy Number	Enter the policy number for the benefit selected.
Beneficiary	Enter the beneficiary, if applicable.
Employee/Employer Premiums	Enter the employee & employer portions of the premium for this benefit. (Fixed amount is a dollar amount; rate is if the premium is based on a rate that is applied to the amount of pay).
Effective Date	Enter the effective date for this benefit.



Expiration Date	Enter the expiration date for this benefit, if applicable.
Coverage	Enter the coverage type.
Deductible	Enter the deductible for the coverage, if applicable.

Dependent Coverage

Click Dependent Coverages to add covered dependents:

### Employee Master Setup

Master Dependents  
New Payroll  
Pay Rate PIN #  
Benefits Audit

Search Name:   Show Inactive Employees

First Name:

Employee #:

---

Existing Benefit:  All Benefits:

Type:   Cigna

Policy Number:

Beneficiary:

Comment:

Effective:   Expire:

Coverage:  Deductible:

Dependent Coverages
Delete

Dep #	Effective	Expire	Coverage	Deductible	Employer Amount	Employee Amount	Employer Rate	Employee Rate
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Dependents

Click on Dependents and the following form will open.

### Employee Master Setup

Master Dependents  
New Payroll  
Pay Rate PIN #  
Benefits Audit

Search Name:   Show Inactive Employees

First Name:

Employee #:

---

Dependent #:  Dependent Code:   Title:

First Name:  Middle Name:  Last Name:

Address Line 1:

Address Line 2:

City/State/Zip:

Social Security #:  Date of Birth:

Relationship:  Gender:  Smoker:

Comment:

Delete Renumber

Field Name	Description
Dependent Number	Enter the number that you want to assign to this dependent. Multiple dependents can be assigned.
Dependent Code	Select the applicable code from the drop-down menu.
Title	Select the applicable title for this dependent from the drop-down menu.
Name	Enter the first, middle and last name for this dependent.
Address	Enter the address for this dependent.
City, State, Zip Code	Select the dependent's City and State from the drop-down menus and enter the Zip Code.
Social Security Number	Enter the dependent's Social Security Number.
Date of Birth	Enter the dependent's date of birth.
Relationship	Enter the dependent's relationship to the employee.
Gender	Enter the gender of the dependent.
Smoker	Check this box if the dependent smokes.
Delete	Click to delete a specific dependent.
Renumber	Click to renumber the dependents.

Payroll

Click **Payroll** to edit or add W4 information, overtime and guarantee parameters and General Ledger information for the employee wages; the following form displays:

**Employee Master Setup**

Search Name:   Show Inactive Employees

First Name:

Employee #: 33  Dorlyn Figenbaum

Master Dependents  
New Payroll  
Pay Rate PIN #  
Benefits Audit

**Payroll Setup** Hourly/Salary:  Refresh

<p><b>Federal</b></p> <p>FIT Exemptions: <input type="text"/> 0</p> <p>Addnl FIT Amt: <input type="text"/> 0.00</p> <p>FIT %: <input type="text"/> 0.00</p> <p>FICA: <input type="text"/> <input checked="" type="checkbox"/></p> <p>Medicare: <input type="text"/> <input checked="" type="checkbox"/></p> <p>FUTA: <input type="text"/> <input checked="" type="checkbox"/></p> <p>EIC Qualified: <input type="text"/> <input checked="" type="checkbox"/></p> <p>Filing Status: <input type="text"/> H <input checked="" type="checkbox"/></p> <p>MQGE: <input type="text"/> Q <input checked="" type="checkbox"/></p>	<p><b>State</b></p> <p>SIT Exemptions: <input type="text"/></p> <p>Est W/H Allow: <input type="text"/></p> <p>Addnl SIT Amt: <input type="text"/></p> <p>SIT Code: <input type="text"/> <input checked="" type="checkbox"/></p> <p>SIT %: <input type="text"/></p> <p>SDI: <input type="text"/></p> <p>SUTA: <input type="text"/> <input checked="" type="checkbox"/></p> <p>Head Of Household: <input type="text"/></p> <p>Filing Status: <input type="text"/> <input checked="" type="checkbox"/></p>	<p><b>Local</b></p> <p>LIT Exemptions: <input type="text"/></p> <p>Addnl LIT Amt: <input type="text"/></p> <p>LIT Code: <input type="text"/> <input checked="" type="checkbox"/></p> <p>LIT %: <input type="text"/></p>	<p><b>Federal W4</b></p> <p>New W4 Submitted: <input type="checkbox"/></p> <p>Two Jobs Total: <input type="checkbox"/></p> <p>Dependent Amount: <input type="text"/></p> <p>Other Income: <input type="text"/></p> <p>Other Deductions: <input type="text"/></p>
---	---	---	--

Pay Period:  BW

Exempt From Overtime:

Assigned Hrs:

Fiscal Year:

Div:

Gross Wages #:

Mode:

Employee Class:

Overtime Parameters: If More Than: 8.00 Hours Per Day, Use Pay Code: 112  FLSA  
If More Than: 40.00 Hours Per Week, Use Pay Code: 112  PERS

Weekly Guarantee Hours: Minimum: 35.00 Maximum: 40.00 Weekly Guarantee Pay Code: 109

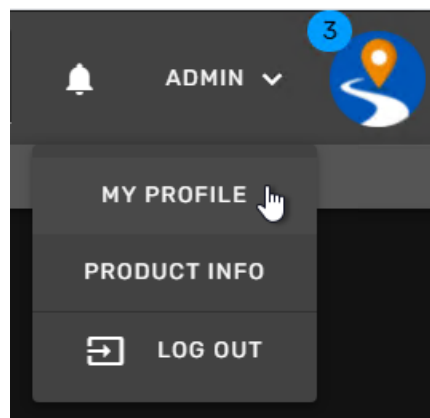
Last Updated: Admin FNHR\_EmployeeMasterForm 9/14/2021 4:28:08 PM

Field Name	Description
FIT Exemptions	Enter the number of Federal Exemptions from the employee's W4. 99 exemptions = no taxes 98 exemptions = additional tax only 0 - 97 exemptions = Use fixed percent or table lookup and add in additional tax.
Addtnl FIT Amt	Enter the dollar amount of additional FIT from the employee's W4
FIT%	If the employee requested that their federal income taxes withheld be based on a percentage of wages, enter the percentage in this field.
FICA	Select applicable FICA code from the drop-down list. The code selected will designate the GL Accounts that will be debited and credited based on the Auto Post Entries created in General Ledger.
Medicare	Select applicable Medicare code from the drop-down list. The code selected will designate the GL Accounts that will be debited and credited based on the Auto Post Entries created in General Ledger.
FUTA	Select applicable FUTA code from the drop-down list. The code selected will designate the GL Accounts that will be debited and credited based on the Auto Post Entries created in General Ledger.
EIC Qualified	Select the applicable EIC code from the drop-down list. If the employee is not eligible for EIC credit, leave this field blank
Filing Status	Select the Federal Filing Status as designated on the employee's W4 from the drop-down list
MOGE	If the employee is a Medicare Qualified Government Employee select the applicable code: A – Agriculture; H – Household; M – Military; Q – Medicare Qualified Government Employment; X – Railroad and R – Regular (All Others).
SIT Exemptions	Enter the number of State Exemptions from the employee's W4. 99 exemptions = no taxes 98 exemptions = additional tax only 0 - 97 exemptions = Use fixed percent or table lookup and add in additional tax.
Est W/H Allow	Enter additional state withholding exemptions (Applicable in California (EDT) and Indiana (DDT)).
Addtnl SIT Amt	Enter the dollar amount of additional SIT from the employee's W4
SIT Code	Select the applicable State code from the drop-down list
SIT %	If the employee requested that their State Income Taxes withheld be based on a percentage of wages, enter the percentage in this field.
SDI	Check the box if the employee is subject to SDI withholding
SUTA	Select applicable SUTA code from the drop-down list. The code selected will designate the GL Accounts that will be debited and credited based on the Auto Post Entries created in General Ledger.
Head of Household	Check the box if the employee designated their filing status as Head of Household on the W4
Filing Status	Select the State Filing Status as designated on the employee's W4 from the drop-down list
LIT Exemptions	Enter the number of Local Exemptions. 99 exemptions = no taxes 98 exemptions = additional tax only 0 - 97 exemptions = Use fixed percent or table lookup and add in additional tax.
Addtnl LIT Amt	Enter the dollar amount of Additional LIT to be withheld
LIT Code	Select the Local Tax Code from the drop-down list
LIT %	If the employee requested that their Local Income Taxes withheld be based on a percentage of wages, enter the percentage in this field
New W4 Submitted	Check this box if the employee has completed a W4 from 2020 or forward

Two Jobs Total	Check this box if the employee has checked the box in step #2 on the W4 (Multiple Jobs or Spouse Works)
Dependent Amount	Enter the total amount for dependents from step #3 on the W4 (Claim Dependents)
Other Income	Enter the total for other income from Step #4(a) on the W4 (Other income not from jobs)
Other Deductions	Enter the amount for deductions from Step #4 (b) on the W4 (Deductions)
Pay Period	Select the applicable Pay Period from the drop-down list
Exempt from Overtime	Check the box if the employee is Exempt from Overtime.
Assigned Hours	Enter the number of Hours Assigned to the employee per pay period. This is an optional field and is not used for payroll computation.
Fiscal Year	Select the current Fiscal Year from the drop-down list. This field does <b>not</b> have to be updated each year. It will only need to be edited in the event Wage Expense accounts are changed.
Division	Select the applicable Division from the drop-down list
Gross Wages #	Select the applicable GL account from the drop-down list
Mode	Select the Mode of Service from the drop-down list. (Used for NTD reporting)
Employee Class	Select the Employee Class from the drop-down list. (Used for NTD reporting)
Overtime Parameters	Enter the number of hours per day an employee must work to be eligible for overtime. Enter the pay code to be used with the daily overtime. <i>Utilizing this option also requires setup in Pay Codes &amp; Earning Codes. See applicable section in the manual for additional instruction.</i>
Overtime Parameters	Enter the number of hours per week an employee must work to be eligible for overtime. Enter the pay code to be used with the weekly overtime. <i>Utilizing this option also requires setup in Pay Codes &amp; Earning Codes. See applicable section in the manual for additional instruction.</i>
FLSA	Check the box if the Fair Labor Standards Act is applicable <a href="http://www.dol.gov/whd/flsa/index.htm">http://www.dol.gov/whd/flsa/index.htm</a> to the selected employee. The system will average the overtime pay rates when auto-overtime is processed. <b>PRIOR to 'flagging' employees, verify that the FLSA pay codes have been flagged.</b>
PERS	Check the box if the employee is eligible for PERS.
Weekly Guarantee Hours	Enter the minimum number of hours an employee must work to be eligible for guarantee pay. Enter the maximum number of hours the employee will be paid if the minimum number of hours is met. Enter the pay code to be used for Guarantee Pay.

**Pin #**

Pin # button is disabled. To view and/or reset a Pin #, the employee will do this in their profile under the Settings Tab.



**Audit**

Click **Audit** to view and/or print the employee’s audit data; the following form displays:

**Employee Master Setup**

Search Name:   Show Inactive Employees

First Name:

Employee #: 33 | Donlyn Figenbaum

Buttons: Master, Dependents, New, Payroll, Pay Rate, PIN #, Benefits, **Audit**

Options:  Master,  Earnings, Earnings Code: ,  Deductions, Deduction Code: ,  Gross Wages/Taxes, Record Type: , Field Name: ,  All Fields

From Date:  Thru Date:  **Display** **Print**

Enter the From and Thru dates and the category (see chart below) for the report.

Field Name	Description
Master	Report will show all entries made to the Employee Master.
Earnings	Select a specific earnings code or leave blank to view all earnings codes.
Deductions	Select a specific deduction code or leave blank to view all deduction codes.
Gross Wages/Taxes	Select a specific Record Type (M=Month to Date, Q=Quarter To Date, Y=Year to Date, F=Fiscal To Date) or leave blank to view all record types.
Payroll Setup	Report will show all entries made to the Payroll Section of the Employee Master.

Click **Display**; the following form displays:

**Employee Master Setup**

Search Name:   Show Inactive Employees

First Name:

Employee #: 33 | Donlyn Figenbaum

Buttons: Master, Dependents, New, Payroll, Pay Rate, PIN #, Benefits, **Audit**

Options:  Master,  Earnings, Earnings Code: ,  Deductions, Deduction Code: ,  Gross Wages/Taxes, Record Type: , Field Name: ,  All Fields

From Date: 9/12/2021 Thru Date: 9/18/2021 **Display** **Print**

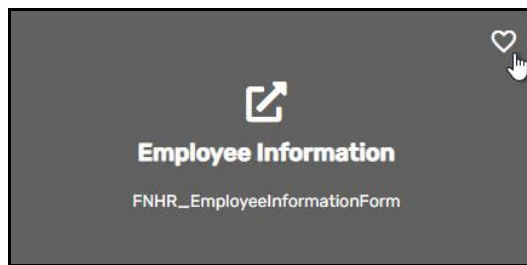
Update Date	Field Name	Old Value	New Value	User Id
9/14/2021 4:50:07 PM	MageFlag		Q	Admin
9/14/2021 4:50:07 PM	FilingStatus		H	Admin
9/14/2021 4:50:07 PM	WeeklyGuarPayCode		109	Admin
9/14/2021 4:50:07 PM	DTPayCodeWeekly		112	Admin
9/14/2021 4:50:07 PM	DTPayCodeDaily		112	Admin
9/14/2021 4:50:07 PM	PayPeriod		BW	Admin
9/14/2021 4:50:07 PM	WeeklyMaxGuarHours		40	Admin
9/14/2021 4:50:07 PM	WeeklyMinGuarHours		35	Admin
9/14/2021 4:50:07 PM	DTLimitWeekly		40	Admin

Record: 1 | No Filter | Search

Click *Print* to view/print the report:

Employee Master Audit Report				
Employee #: 33		Donlyn Figenbaum		
Update Date	Field Name	Before	After	Updated By
9/14/2021 4:50:07 PM	FITExemptions		0	Admin
9/14/2021 4:50:07 PM	FITAdditionalAmount		0	Admin
9/14/2021 4:50:07 PM	FITPercentage		0	Admin
9/14/2021 4:50:07 PM	OTLimitDaily		8	Admin
9/14/2021 4:50:07 PM	OTLimitWeekly		40	Admin
9/14/2021 4:50:07 PM	WeeklyMinGuarHours		35	Admin
9/14/2021 4:50:07 PM	WeeklyMaxGuarHours		40	Admin
9/14/2021 4:50:07 PM	PayPeriod		BW	Admin
9/14/2021 4:50:07 PM	OTPayCodeDaily		112	Admin
9/14/2021 4:50:07 PM	OTPayCodeWeekly		112	Admin
9/14/2021 4:50:07 PM	WeeklyGuarPayCode		109	Admin
9/14/2021 4:50:07 PM	FilingStatus		H	Admin
9/14/2021 4:50:07 PM	MqgeFlag		Q	Admin

### Employee Information Card



To view information on an employee, select the employee from one of the drop-downs in the top portion of the screen and the following form displays: (This is a view only form, no changes can be made on this screen)

#### Employee Information

Soc Sec #:   Show Inactive Employees

Search Name:

First Name:

Employee #:

---

Employee #:

Name:

Search Name:

Name Change:

Email Address:

Payroll Status:  Employment Status:

Dept Seniority Date:  Job Class Sen Date:

Department:

Job Class:

Job Category:

Job Position:

---

Address Line 1:

Address Line 2:

City:

State:  Zip:

Phone:

Union/Local:

Seniority #:

Job App #:

---

Hourly/Salary:  Pay Rate:

Incr Amount:  Incr Date:

Grade:

Step:

Soc Sec #:

Gender:

EEO Code:

Marital Status:

Birth Date:

---

Hire Date:

Seniority Date:

Full Time Date:

Termination Date:

Driver License #:

Expiration Date:

License Class:

Restrictions:

---

Updated:  9/14/2021 3:56:50 pm

Created:  8/20/2021 7:37:51 pm

Master

Absence Log

Discipline

Education

FMLA

Notes

OSHA

Work Comp

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Leave Hist

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User Data

### Absence Log

The absence log form shown below shows a variety of pertinent information available for the agency to track and maintain employee absences. The information entered on this form will provide the agency with an array of reporting capabilities. If a new (blank) record is needed, click .


#### Employee Information

Soc Sec #:   Show Inactive Employees

Search Name:

First Name:

Employee #: 00112  Sharon Sample



---

#### Absence Log Form

Called Out Date: 4/16/2021  Friday Time: 6:00:00 AM  Notes:

Dispatcher: 00106  Robin Employee

Last Name: Employee  Run #: 1011

Reason: SCK  Sick

Leave Type: S

Reported By:

Post Exam Desc:

Examiner Name:

Exam Date:  Active:  Void Entry:

Called In:  Time:  Dispatcher:

Attendance Code: S  Sick Pay  Leave History

Leave Type	Leave Begin Date	Leave End Date	Begin Time	End Time	Break Minutes	Time Used	Days Off							Refresh
							Sun	Mon	Tue	Wed	Thu	Fri	Sat	
S	4/16/2021	4/16/2021	6:00 AM	3:00 PM	60	8.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Time Used: 8.00

Record: 1 of 1  No Filter Search

Master

Absence Log

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This information can also be generated using **Absence Log** from the Human Resources menu. Any information entered on that form will update in the employee master while restricting access to sensitive information.

### Discipline

Selecting this button will allow you to view any discipline citations that have been entered for an employee through Citation Entry. This screen is for information purposes only; no changes can be made to any records.


#### Employee Information

Soc Sec #:   Show Inactive Employees

Search Name:

First Name:

Employee #: 00138  Henry Sample



---

#### Citations

Reference: 202104200001

User Reference: 0123

Date: 4/20/2021

Time: 8:45 AM

Location: NA

North Atherton

Citation: CDL

Failure to possess valid CDL

Disposition: NA

No Action Taken

Supervisor: 00100

Ray Sample

Notes:

Master

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### Education

Selecting this button will allow you to enter and maintain education records. Tracking cost, reimbursements, test scores and a collection of other information that can be utilized for deciding promotions, raises, seniority number and a group of other situations that occur at an agency.

Field Name	Description
Type	Select the type of training from the User Defined drop-down menu.
Start Date	Select the date class started.
End Date	Select the date class ended.
School/Provider	Enter the name of the school/provider.
Instructor	Enter the name of the instructor.
Credits	If applicable, enter credits earned/received.
GPA/Ranking	If applicable, enter GPA/ Class Ranking.
Degree/Certification	If applicable, enter degree/certification received.
Evaluation	If applicable, evaluate the employee.
Cost	Enter the cost of the class/course.
Directly Paid	Select the Yes or No from drop-down menu.
Amount Reimbursed	If applicable, enter the amount reimbursed to the employee.
Check Number	Enter the check number for the reimbursement check.
Check Date	Enter the check date for the reimbursement check.
Hyperlink	If applicable, enter the web address for school/trainer.

This information can also be generated using **Education** from the Forms menu. Any information entered on that form will update in the employee master while restricting access to sensitive information.

### FMLA

This form will assist you in maintaining accurate FMLA records. It has been designed to incorporate fields that, if utilized, will help the user track State and Federal FMLA. In all circumstances, it is the employer's responsibility to designate leave taken for an FMLA reason as FMLA leave.




### Employee Information

Soc Sec #:   Show Inactive Employees

Search Name:

First Name:

Employee #:



---

**FMLA**    FMLA Type:  Federal

Incidence Date:     Incidence Time:

Reason:   Family Member

Case No:     Void Entry:

Notes:

Field Name	Description
FMLA Type	Select from the drop-down list either S = State or F = Federal FMLA Benefits.
Incidence Date	Enter the creation date of this incidence record.
Incidence Time	Enter the creation time of this incidence record.
Reason	User defined field for tracking various reasons for either state or federal FMLA.
Void Entry	The system does not allow a record to be deleted. If an error was made or a record created was not valid check this field.

**Notes**

Notes can be utilized for additional information the agency would like to track. It can be used when generating reports that may require more detailed data than the information in a single field. This is where the user can attach a picture, letter, or any other item that is scanned and needs to be associated with a record.

**Note:** All codes are created in the HR01 menu for Edit Misc. Codes under TYPE = Document Code.


### Employee Information

Soc Sec #:   Show Inactive Employees

Search Name:

First Name:

Employee #:



---


**Notes**

Code:     Reference:

Notes:

dflaharty 4/27/2021 11:50:58 AM:

Attachment:




Hyperlink:

Created:        

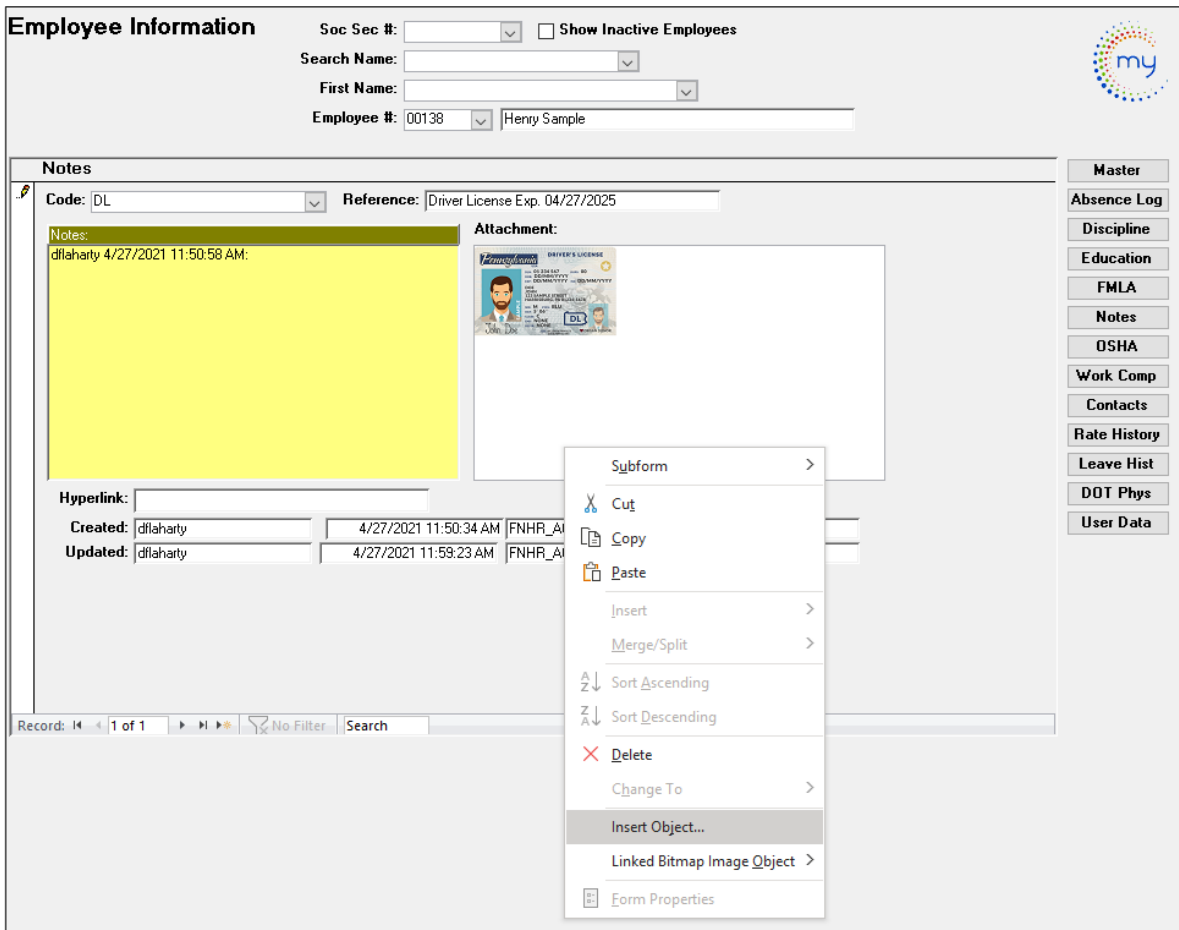
Updated:        

Record:  of 1

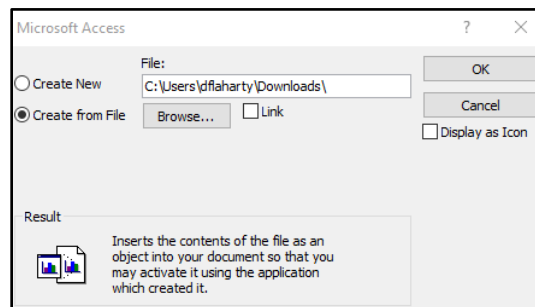
Field Name	Description
Code	Select the user-defined code from the drop-down list for the type of note being stored or document being attached.
Reference	Enter any further information to define what's being stored. This is a required field that creates the unique record.
Record Selection Button	At the bottom of the screen there is a Record selection button. Multiple records can be stored for an employee. To create an additional record, click this button  .

### Attaching Documents to the Notes

To attach documents to the notes, right mouse clicks in the attachment area and select Insert Object



Select Create from File. Click **Browse** to open Windows Explorer and navigate to the file you want to attach.




Check Link if the file location may change. This allows the file to be moved without breaking the link for the attachment.

Check Display as Icon if you don't want information from the document to show. It will be replaced with the file icon (Excel, Word, etc.).

### OSHA

(Occupational Safety & Health Administration) this form will allow agencies to collect occupational injury and illness data needed to submit information for OSHA reporting.

Field Name	Description
Case or File #	A sequentially numbered case file, coded for identification, purpose of maintaining an accurate record of the report and the response
Injury/Illness	From the drop-down list select the injury/illness description, defined via Modify/Add Miscellaneous List Codes
Department	From the drop-down list select the department associated with the record, defined via Modify/Add Miscellaneous List Codes
Description	Enter a brief description of the injury/illness
Occupation	From the drop-down list select the employee's occupation, defined via Modify/Add Miscellaneous List Codes
Occurred On	Enter date of occurrence
Workdays Restricted	If applicable enter the number of workdays employee is restricted from his/her regular duties
Workdays Lost	If applicable enter the number of workdays employee was unable to work due to his/her injury/illness
Supervisor	Enter the name of the employee's supervisor
Fatality	Enter Y=Yes or N=No if applicable
Reported On	Enter date the injury/illness was reported
Deceased On	Enter the date employee died, if applicable

Reported By	Enter name or position of the person who reported the injury/illness
Location	Enter where the injury/illness occurred
Record Selection Button	At the bottom of the screen there is a Record selection button. Multiple records can be stored for an employee. To create an additional record, click this button  .

This information can also be generated using [Worker's Comp](#) from the Forms menu. Any information entered on that form will update in the employee master while restricting access to sensitive information.

### Work Comp

Used to track and maintain on the job injuries that involve an employee while on duty. Records are not limited to on-the-job injury. Sometimes workers sustain serious injuries due to the repetitive nature of their occupations.

Field Name	Description
Case or File #	A sequentially numbered case file, coded for identification, purpose of maintaining an accurate record of the report and the response.
Date of Injury	Enter date of occurrence.
Date Reported	Enter date the date that the injury was reported.
Begin Claim	Enter the date the claim began.
Claim Completed	When the claim is closed, enter the closing date.
Treatment Form	Enter the date the medical treatment form was submitted, if applicable.
ProComp Given	Enter the date.
Wage Statement	Enter date the Wage form was submitted.
Light Duty	Enter the date that determined the employee would be on light duty.
Lost Time Began	The date entered is based on when lost time for the employee due to the injury.

Lost Time Ended	The date entered is based on when lost time ended for the employee due to the injury.
Light Duty Began	Enter the date that the employee was placed on light duty.
Light Duty Ended	Enter the date that the employee was taken off light duty.
Total Lost Time	Automatically Calculated from the dates entered in <i>Lost Time Began</i> and <i>Lost Time Ended</i> .

**Contacts**


Selecting this button will allow the user to maintain multiple contact records for this employee.

**Employee Information**    Soc Sec #:   Show Inactive Employees

Search Name:

First Name:

Employee #: 00138  Henry Sample



Contacts							
#	First Name	Middle Name	Last Name	Relationship	Phone Type	Phone	Ext
1	Sherry		Sample	Spouse	H	(814) 555-1212	
Information: 123 Main Street, State College, PA 16803				Email: <input type="text"/>			
2	Rita		Sample	Parent	H	(814) 555-1212	
Information: 123 Main Street, State College, PA 16803				Email: <input type="text"/>			
*							
Information: <input type="text"/>				Email: <input type="text"/>			

Master

Absence Log

Discipline

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**Contacts**

Rate History

Leave Hist

DOT Phys

User Data

Record: 14 of 1 of 2    No Filter    Search

**Rate History**


This form will display pay rate history with the latest date first for the selected employee. Users will be able to see the Effective Date, Previous Pay Rate and New Pay Rate along with the user who entered the information, what form was used and when the record was created. This screen is for information purposes only; no changes can be made to any records.

**Employee Information**    Soc Sec #:   Show Inactive Employees

Search Name:

First Name:

Employee #: 00138  Henry Sample



Pay Rate History						
Effective Date	Previous Pay Rate	New Pay Rate	User	Procedure:	Created	
2/25/2021	\$25.3500	\$26.6800	dflaharty	Setup	2/23/2021	
8/25/2020	\$24.0100	\$25.3500	dflaharty	Setup	2/23/2021	

Master

Absence Log

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Education

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Notes

OSHA

Work Comp

Contacts

**Rate History**

Leave Hist

DOT Phys

User Data

Record: 14 of 1 of 2    No Filter    Search

### Leave History

This form will display the leave history for the selected employee.


#### Employee Information

Soc Sec #:   Show Inactive Employees

Search Name:

First Name:

Employee #:



---

#### Leave Inquiry

Leave Type:  From Date:  Thru Date:   Hours Available:

Leave Type	Leave Begin Date	Leave End Date	Begin Time	End Time	Break Minutes	Time Used	Days Off						
							Sun	Mon	Tue	Wed	Thu	Fri	Sat
S	4/5/2021	4/30/2021	8:00 AM	5:00 PM	60	152.00	☑	☐	☐	☑	☐	☐	☐

Total Time Used:

- 
- 
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Record: 1 of 1
No Filter

Select a **Leave Type** from the drop-down list for the selected employee. Leave dates associated with the leave type selected will be available for selection from the **From Date** and **Thru Date** fields. Click on the **Refresh** button to display the leave information. The Hours Available field is calculated from the Payroll Accruals. This screen is for information purposes only and no changes can be made to any records.

### DOT Phys

Use this form to maintain DOT Physical records for each employee. The system assists with this tracking by providing necessary fields so that employers can comply with making sure an employee is maintaining his/her medical certificate of qualification to operate motor vehicles.


#### Employee Information

Soc Sec #:   Show Inactive Employees

Search Name:

First Name:

Employee #:



---

#### DOT Physicals

Next Physical Date: <input type="text" value="4 /5 /2023"/>	Notification Letter Date: <input type="text" value="3 /15/2021"/>
Expiration Date of Physical: <input type="text" value="4/30/2023"/>	Failure To Make Appt Letter: <input type="text"/>
Date Of Physical: <input type="text" value="4/5/2021"/>	Date Submitted To Payroll: <input type="text"/>
Certifying Physician: <input type="text"/> <input checked="" type="checkbox"/>	Physical Cost: <input type="text"/>
* <input type="text"/>	
Next Physical Date: <input type="text"/>	Notification Letter Date: <input type="text"/>
Expiration Date of Physical: <input type="text"/>	Failure To Make Appt Letter: <input type="text"/>
Date Of Physical: <input type="text"/>	Date Submitted To Payroll: <input type="text"/>
Certifying Physician: <input type="text"/> <input checked="" type="checkbox"/>	Physical Cost: <input type="text"/>

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Record: 1 of 1
No Filter

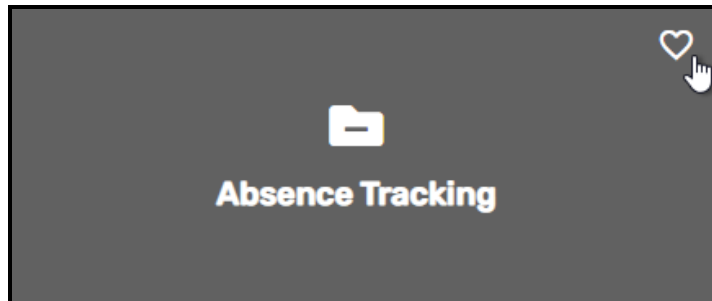
This information can also be generated using [DOT Physicals](#) from the Forms menu. Any information entered on that form will update in the employee master while restricting access to sensitive information.

### User Data

Use this form for user defined employee information. These fields can be used for tracking employee data and/or producing reports. These are set up in HR setup using User Defined Security, User Defined Field Setup and Modify/Add Misc. codes.

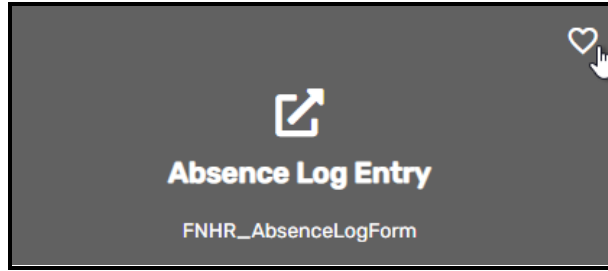
The screenshot shows the 'Employee Information' form. At the top, there are search filters: 'Soc Sec #' with a dropdown and a 'Show Inactive Employees' checkbox, 'Search Name' with a dropdown, 'First Name' with a dropdown, and 'Employee #' with a dropdown set to '00138' and a text field containing 'Henry Sample'. A 'my' logo is in the top right. Below the filters, the 'Form Name' is set to 'CDL' (Commercial Driver License) with a 'Print' button. A table below has one row with 'Expiration Date' set to '04/30/2025'. On the right, a vertical menu contains buttons for Master, Absence Log, Discipline, Education, FMLA, Notes, OSHA, Work Comp, Contacts, Rate History, Leave Hist, DOT Phys, and User Data. At the bottom left, it shows 'Record: 1 of 1' and a search bar.

### Absence Tracking Card



The dashboard shows three cards under the breadcrumb 'Human Resources / Legacy Human Resources / Absence Tracking'. Each card has a white heart icon in the top right corner and a white icon in the top left. The first card is 'Absence Log Entry' with the form ID 'FNHR\_AbsenceLogForm'. The second card is 'Absence Log Report' with the form ID 'FNHR\_AbsenceLogReportForm'. The third card is 'Sick Card Maintenance' with the form ID 'FNHR\_StekCardForm'.

### Absence Log Entry Card



This form is used to enter and track employee absences.

#### Absence Log

Last Name:

First Name:

Employee #:

Show Inactive Employees
 

[Absence Log](#)  
[Quick List](#)  
[User Data](#)

### Absence Log

Select an employee and click Absence Log.

#### Absence Log

Last Name:

First Name:

Employee #: 00112

Show Inactive Employees
 

[Absence Log](#)  
[Quick List](#)  
[User Data](#)

---

#### Absence Log Form

Called Out Date: 4 /16/2021  Friday Time: 6:00:00 AM

Dispatcher: 00106  Robin Employee

Last Name:  Run #: 1011

Reason: SCK  Sick

Leave Type: S

Reported By:

Post Exam Desc:

Examiner Name:

Exam Date:  Active:  Void Entry:

Called In:  Time:  Dispatcher:

Attendance Code: S  Sick Pay

Notes:

Leave Type	Leave Begin Date	Leave End Date	Begin Time	End Time	Break Minutes	Time Used	Days Off							Refresh
							Sun	Mon	Tue	Wed	Thu	Fri	Sat	
S	4 /16/2021	4 /16/2021	6:00 AM	3:00 PM	60	8.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Time Used: 8.00

Record: 1 of 1 | No Filter | Search



Field Name	Description
Called Out Date	Date the employee notified the Transit that they were going to be out, day of the week will automatically populate based on the date selected.
Time	Enter the time that the employee advised that they were going to be out.
Dispatcher	Select the employee taking the call from the drop-down list.
Last Name	Populates with the last name of the dispatcher selected from the previous drop-down.
Run #	Enter the run number, if applicable.
Reason	Select the reason the employee will be out from the user defined drop-down list.
Leave Type	Select the leave type from the user defined drop-down list.
Reported By	Enter the name of the person who reported the absence.
Post Exam Description	Enter the description for the exam, if applicable.
Examiner Name	Enter the name of the examiner, if applicable.
Exam Date	Enter the date of the exam.
Active	Check this box if this is an active leave. Also used for sick card entry.
Void Entry	Check this box if this entry should be voided; not counted as a leave record.
Called In	If the employee calls in for additional time off, enter that date in this field Also used for sick card.
Time	Enter the time of the subsequent call.
Dispatcher	Enter the dispatcher who took the subsequent call.
Attendance Code	Enter an attendance code form the drop-down list, used in the attendance portion of PR if imported.
Leave Type	Select the leave type from the drop-down menu.
Leave Begin Date	Enter the leave begin date for the selected Leave Type.
Leave End Date	Enter the leave end date for the selected Leave Type.
Begin Time	Enter the leave begin time for the selected Leave Type.
End Time	Enter the leave end time for the selected Leave Type.
Break Minutes	Enter break time if break time is not paid. Break minutes are entered per day. If the employee gets a 60-minute lunch break, enter 60. If he/she is off for a week, you still enter daily minutes, not the cumulative total.
Time Used	When you click <b>Refresh</b> , this field will automatically calculate and populate.
Days Off	Check the employee's regular days off. If using Sick Card, you can leave these boxes blank. Void box is used for voiding that entry line.
Total Time Used	Will total all entries in the time used field.

### Quick List

Click **Quick List** to see a summary of absences for all employees. If you only want to view one employee, select the employee from the drop-down list prior to clicking on the Quick List button. By adding the Quick List button, the absence log is now available outside the employee information form as a user may only have permission for tracking and maintaining absences but not the confidential items that are included on the Employee Information form. This screen is for information purposes only; no changes can be made to any records.

**Absence Log**

Last Name:   Show Inactive Employees

First Name:

Employee #: 00112  Sharon Sample

**Absence Log** **Quick List** **User Data**

Date	Time	Dispatcher	Type	Reason	Reported By	Run #	Act	Called In Date	Called In Time	Taken By	Void
4/16/2021	6:00 AM	00106	S	Sick		1011	<input type="checkbox"/>				<input type="checkbox"/>

### User Data

The **User Data** button allows users with access to the form the ability to maintain additional data.

**Absence Log**

Last Name:   Show Inactive Employees

First Name:

Employee #: 00112  Sharon Sample

**Absence Log** **Quick List** **User Data**

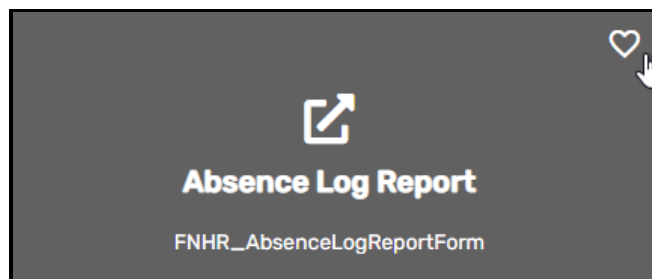
Microsoft Access

User data forms or security missing.

OK

If the user does not have access, or there is no additional form(s) set up, they will receive this error.

### Absence Log Report Card



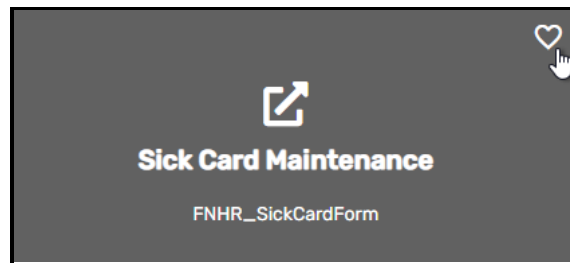
This form provides the user with two options for generating an absence log report.

Select an option for the report (All employees or One employee). If One Employee is selected, the form will expand to select the employee number. Only those employees with absences will show in the drop-down.

Click **Print** and the report will generate. If you have selected All Employees, the report will page break on each employee.

Reported Absence Listing										
00112	Sharon Sample		123 Main Street		Seniority Date	2/1/2005		Phone (814) 555-1212		
			State College							
			PA	16803						
<u>Date In</u>	<u>Time In</u>	<u>Disp</u>	<u>Type</u>	<u>Reason for absence</u>	<u>Person Calling</u>	<u>Active</u>	<u>Date</u>	<u>Historic</u>		<u>Total</u>
04/16/2021	6:00:00 AM	00106	S	Sick		<input type="checkbox"/>				1

Sick Card Maintenance Card



The function of this form is like the Absence Log Form, except that it enables the dispatcher to enter as well as pull an employee’s absence and set it either **Active** or **Inactive**. All information is updated to Absence Log form and Quick List. When this option is selected the following form displays.

### Sick Card

After selecting an employee click Sick Card.


#### Sick Card Entry

Last Name:

First Name:

Employee #: 00112  Sharon Sample

Active  
 Inactive



---

#### Sick Card Form

Called Out Date: 4/16/2021  Friday Time: 6:00:00 AM  Notes:

Dispatcher: 00106  Robin Employee

Last Name:  Run #: 1011

Reason: SCK  Sick

Leave Type: S  Sick

Reported By:

Post Exam Desc:

Examiner Name:

Exam Date:  Active:  Void Entry:

Called In:  Time:  Dispatcher:

Attendance Code: S  Sick Pay

Leave Begin Date	Leave End Date	Begin Time	End Time	Break Minutes	Time Used	Days Off							Refresh	
						Sun	Mon	Tue	Wed	Thu	Fri	Sat	Void	
4/16/2021	4/16/2021	6:00 AM	3:00 PM	60	8.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Time Used: 8.00

Record: 1 of 1

This form will display that employee’s record. Keep in mind that this will also include records created in Absence Log. Using the record selector and navigations buttons either go to a new record or view an existing record.

### Quick List

Quick List button allows the user to see the list of all absent employees.


#### Sick Card Entry

Last Name:

First Name:

Employee #:

Active  
 Inactive



---

Date	Time	Employee Name	Reason	Dispatcher	Act	Pulled Date	Pulled Time	Pulled Dispatcher	Void
8/23/2021	8:15 PM	BECKY ADAMS	Disability	01027	<input type="checkbox"/>				<input type="checkbox"/>
10/30/2018	7:00 AM	NUNN VANNARATH	Earned Time Off	04852	<input type="checkbox"/>				<input type="checkbox"/>
10/24/2018	5:00 AM	DAVID ROBERTS	Sick Absence	12012	<input type="checkbox"/>				<input type="checkbox"/>
3/7/2018	4:00 PM	MELVIN GOODWIN	Suspension		<input type="checkbox"/>				<input type="checkbox"/>
10/31/2016	1:42 PM	SHANNA STANDIFER	Sick Absence		<input type="checkbox"/>	10/30/2016	10:30 PM		<input type="checkbox"/>
6/21/2016	8:00 AM	SHARON ELLIS	Sick Absence		<input type="checkbox"/>	6/20/2016	8:00 PM		<input type="checkbox"/>
6/16/2016	2:21 AM	SHANNA STANDIFER	Sick Absence		<input type="checkbox"/>	6/16/2016	2:21 AM		<input type="checkbox"/>
4/26/2016	7:00 AM	ERIKA JAMERSON			<input type="checkbox"/>				<input type="checkbox"/>
4/22/2016	7:40 AM	VIRGIA HAWKINS			<input type="checkbox"/>				<input type="checkbox"/>
4/20/2016	4:15 AM	MARY BUSBOOM			<input type="checkbox"/>				<input type="checkbox"/>
4/14/2016	7:30 AM	TERRY REED			<input type="checkbox"/>				<input type="checkbox"/>
4/11/2016	2:30 AM	LAVETA IVERSON			<input type="checkbox"/>				<input type="checkbox"/>
4/8/2016	1:17 AM	SHANNA STANDIFER			<input type="checkbox"/>				<input type="checkbox"/>
3/14/2016	5:40 AM	VIRGIA HAWKINS			<input type="checkbox"/>	3/14/2016	5:40 AM		<input type="checkbox"/>
3/2/2016	5:00 AM	SHARON ELLIS	Sick Absence		<input type="checkbox"/>				<input type="checkbox"/>
2/22/2016	7:17 AM	SHANNA STANDIFER	Sick Absence		<input type="checkbox"/>	2/22/2016	7:17 AM		<input type="checkbox"/>
2/18/2016	3:19 AM	SHARON ELLIS	Sick Absence		<input type="checkbox"/>	2/18/2016	3:19 AM		<input type="checkbox"/>
2/9/2016	8:37 AM	SHANNA STANDIFER	Sick Absence		<input type="checkbox"/>	2/9/2016	8:37 AM		<input type="checkbox"/>

Record: 1 of 53

Active and Inactive buttons are used when utilizing the Quick List option.

If the **Active** button is selected Quick List will display all Active leave records in descending order. This means that when the leave record was created the active box on the form was checked.

If the **Inactive** button is selected Quick List will display all Inactive leave records in descending order. This means that when the leave record was created, and the call information was completed and the active box on the form was unchecked.

If the active box is checked on the form, and you check the box at the top, you will only see Active sick cards.

### Sick Card Entry

Last Name:

First Name:


Employee #: 00112

Active

Inactive

Sick Card

Quick List



Date	Time	Dispatcher	Type	Reason	Reported By	Run #	Act	Pulled Date	Pulled Time	Pulled Dispatcher	Void
4/16/2021	6:00 AM	00106	S	Sick		1011	<input checked="" type="checkbox"/>				<input type="checkbox"/>

If the active box is unchecked on the form, and you check the Inactive box at the top, you will only see those inactive sick cards.

### Sick Card Entry

Last Name:

First Name:


Employee #: 00119

Active

Inactive

Sick Card

Quick List



#### Sick Card Form

Called Out Date: 5/10/2021  Monday Time: 4:21:00 PM

Dispatcher: 00100  Ray Sample

Last Name: Sample  Run #: 1011

Reason: SCK  Sick

Leave Type: S  Sick

Reported By:

Post Exam Desc:

Examiner Name:

Exam Date:  Active:  Void Entry:

Called In:  Time:  Dispatcher:

Attendance Code: S  Sick Pay

Notes:


Leave Begin Date	Leave End Date	Begin Time	End Time	Break Minutes	Time Used	Days Off							Refresh	
						Sun	Mon	Tue	Wed	Thu	Fri	Sat	Void	
5/10/2021	5/10/2021	5:00 PM	10:00 PM	0	5.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5/11/2021						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Total Time Used: 5.00

Record: 1 of 1  No Filter Search

**Sick Card Entry**

Last Name:    
 First Name:    
 Employee #: 00119  Scott Sample

Active   
 Inactive  


Date	Time	Dispatcher	Type	Reason	Reported By	Run #	Act	Pulled Date	Pulled Time	Pulled Dispatcher	Void
5/10/2021	4:21 PM	00100	S	Sick		1011	<input type="checkbox"/>				<input type="checkbox"/>


### Random Drug Testing Card


The system provides a program for alcohol/drug testing by randomly selecting enough covered employees for testing during each calendar year to equal an annual rate not less than the minimum annual percentage rates for random drug and alcohol testing determined by FTA.





Human Resources / Legacy Human Resources / Random Drug Testing


 **Random Test Selection**  
FNHR\_RandomTestSelectionForm

 **Selection Parameters**  
FNHR\_JobClassForm

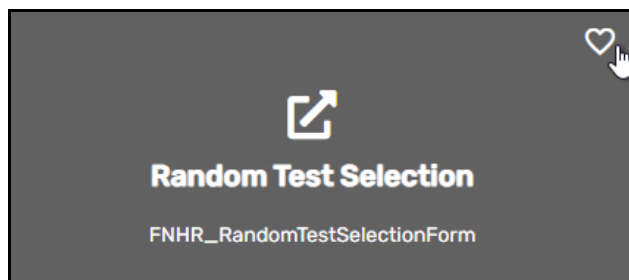
 **Subcontractor Data**  
FNHR\_SubcontractorForm

 **Testing Rate Maintenance**  
FNHR\_RandomTestingRatesForm

 **Test History Maintenance Form**  
FNHR\_TestHistoryForm

 **Random Testing Notification Form**  
FNHR\_RandomTestingNotificationForm

### Random Test Selection Card



This form is used to generate the list for the Random Drug Testing.

The test date will default to the current date.

## Random Drug Test Selection Form

**Include Contractors**

**Test Date**  
**Group to test**

**Default Selection Override**

Drug test needed this period to meet testing rate of 25 %	<input type="text"/>	<input type="text"/>
Alcohol test needed this period to meet testing rate of 10 %	<input type="text"/>	<input type="text"/>

VSN: 0906.0001 [8/20/2021]

Field Name	Description
Include Contractors	Check this option if contractors are to be selected in this pool.
Test Date	Enter the test date.
Group to Test	Select a predefined group for testing from the drop-down menu.
Drug and Alcohol	Leave blank, these fields will be calculated based on user predefined requirements when the test is run.
Default Selection Override	Gives the user the ability to override the calculated numbers for testing.
Generate Selections	This button will generate the random test selections. A report will automatically print to the default printer and results will show those chosen for testing and those not chosen for testing.

Once the group is selected, the number of employees to test will automatically populate.

## Random Drug Test Selection Form

**Include Contractors**

**Test Date**  
**Group to test**

**Default Selection Override**

Drug test needed this period to meet testing rate of 25 %	<input type="text" value="54"/>	<input type="text"/>
Alcohol test needed this period to meet testing rate of 10 %	<input type="text" value="21"/>	<input type="text"/>

Click **Generate Selection**. Reports will automatically be sent to the default printer. Two reports are printed. One report shows those employees not selected and the other shows the employees selected for drug/alcohol testing.

The first report will show what employees have been selected for each test and will include their social:

Random Test Selection						
Test Date: Wednesday, April 28, 2021				Group S		
<i>The following employee(s) have been selected from group S for drug testing.</i>						
Employee #	Employee Name	Social Security	Department	Job Class	Selected	
00102	John Sample	999999999	M	S	YES	
00115	Curtis Sample	999999999	O	S	YES	
00141	Wade Sample	999999999	O	S	YES	
<i>The following employee(s) have been selected from group S for drug/alcohol testing.</i>						
Employee #	Employee Name	Social Security	Department	Job Class	Selected	
00145	Matthew Doe	999999999	M	S	YES	

The second report will show the same information, but will not include their social:

Random Test Selection				
Test Date: Wednesday, April 28, 2021			Group S	
<i>The following employee(s) have been selected from group S for drug testing.</i>				
Employee Name	Department	Job Class	Selected	
John Sample	M	S	YES	
Curtis Sample	O	S	YES	
Wade Sample	O	S	YES	
<i>The following employee(s) have been selected from group S for drug/alcohol testing.</i>				
Employee Name	Department	Job Class	Selected	
Matthew Doe	M	S	YES	


The third report will show what employees were **not** selected:

<i>Not Selected Report</i>	
Test Date: Wednesday, April 28, 2021	
Group S	
00100	Ray Sample
00101	Martin Sample
00103	David Sample
00105	Gary Sample
00106	Robin Employee
00108	Jose Sample
00109	Brenda Sample

After the reports are printed, the review selection button will be visible. This will show you the Not Selected Report and the Random Test Selection with Socials. Once the print preview is closed you will now see the print notifications button.

### Random Drug Test Selection Form

Include Contractors



Test Date

Group to test

Drug test needed this period to meet testing rate of 25 %

Default Selection Override

Alcohol test needed this period to meet testing rate of 10 %

Default Selection Override



Click **Print Notifications** to generate the notification letter(s) for the employee(s). Each employee will receive a notification letter. HR can customize the notification letter.

**RANDOM TEST NOTIFICATION**

**Wednesday, April 28, 2021**

**TO:** John Sample  
123 Main Street  
State College, PA 16803

**SUBJECT: Random Testing Notification**

You have been selected for a random DRUG TEST for the Demonstration Transit Substance Abuse Program. You are required to acknowledge receipt of this notice and its date and time of delivery and consent to release of test results by providing your signature below.

You must report to a collection site within twenty-four (24) hours of receipt of this notice\* and present this notice to collection site personnel. Failure to report for testing will be grounds for termination. You are encouraged to refrain from consuming excessive liquids four (4) hours prior to your test.

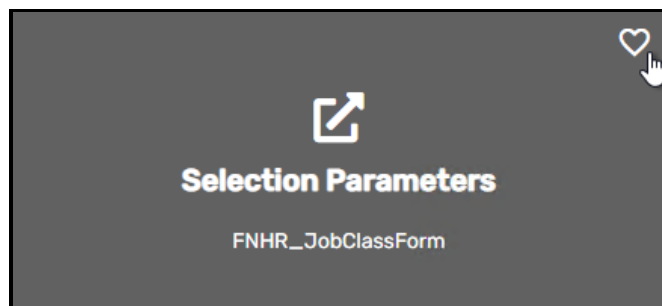
On arrival at the site, you will be required to:

- present signature and photo identification, e.g., State issued driver's license;
- sign the laboratory consent form; and
- provide a urine specimen for laboratory analysis, and submit to a breath alcohol test, if specified.

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**Human Resources**

Selection Parameters Card



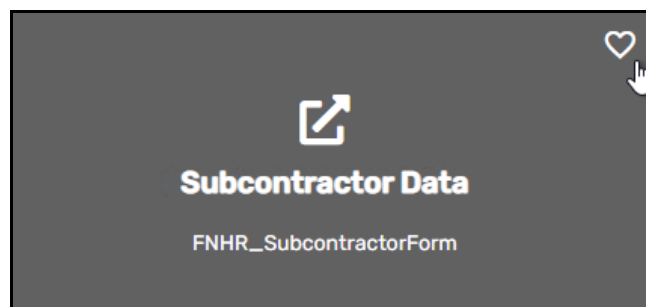
The Job Class Setup form is used to identify, by job class, a group (user defined) in which employees will be placed for random drug/alcohol testing. The user will identify a group and select either "Y" for Yes or "N" for No for performing drug and/or alcohol testing.

NOTE: The job class and its description are defined and assigned to an employee in the Employee Master Setup form.

Job Class Setup			
Job Class	Description	Group	Drug Test
0	OUTSIDE TEMP		N
00001	RESIGNED/TERMINATED EMPLOYEES	0	N
00002	INACTIVE EMPLOYEE	0	N
01000	OPERATIONS-FULL-TIME OPERATOR	1	Y
01002	OPERATIONS-FULL-TIME OPERATOR (ADA)	1	Y
02000	OPERATIONS-PART-TIME OPERATOR	1	Y
02001	OPERATIONS-PART-TIME OPERATOR (RETIRED)	1	Y
02002	OPERATIONS-PART-TIME OPERATOR (ADA)	1	Y
03000	MAINTENANCE-MASTER MECHANIC	0	N
03001	MAINTENANCE-MASTER MECHANIC (RETIRED)	1	Y
03050	MAINTENANCE-MECHANIC AA	0	N

Field Name	Description
Job Class	Enter the job class – this gets assigned on the employee master and will trigger if the employee should be included in the testing population or not.
Description	Enter a description for the Job Class.
Group	This is what you will select when generating the lists for testing.
Drug Test	Select Y/N as to whether the employee should be drug tested.

Subcontractor Data Card

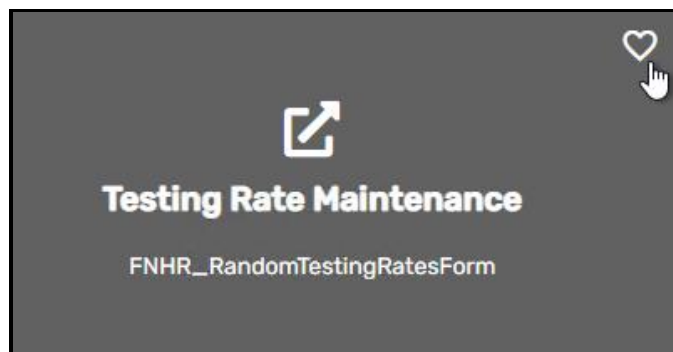


The Sub Contractor Data Form is utilized for entering information for a contractor that can be selected for drug and alcohol testing. Enter the contractor’s Social Security Number and Name.

Sub Contractor Form	
Social Security Number	Name
<input type="text" value="888-88-8888"/>	<input type="text" value="Jake Contractor"/>
<input type="text"/>	<input type="text"/>

The FTA definition of a contractor is a person or organization that provides a safety-sensitive service for a recipient, sub-recipient, employer, or operator consistent with a specific understanding or arrangement. The understanding can be a written contract or an informal arrangement that reflects an ongoing relationship between the parties.

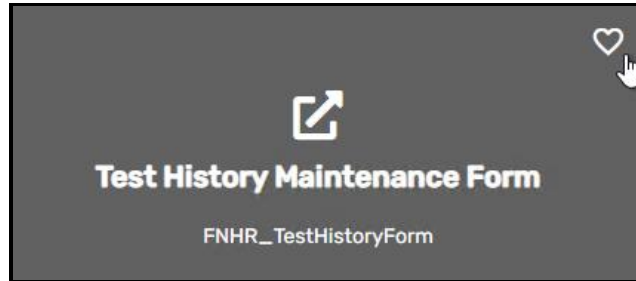
### Testing Rate Maintenance Card



This form is used to set up annual FTA requirements for performing random drug and alcohol testing. Enter Reporting Year, the percent required for Drug Testing and the percent required for Alcohol Testing. The actual Drug Test Count and Alcohol Test Count Fields are calculated when the testing pool is generated. The Safety Sensitive Groups field is the different type of groups assigned to a particular job class and will be used testing parameters.

Random Testing Rate Maintenance	
Reporting Year	<input type="text" value="2021"/>
Drug Percent	<input type="text" value="25.00%"/>
Alcohol Percent	<input type="text" value="10.00%"/>
Drug Test Count	<input type="text"/>
Alcohol Test Count	<input type="text"/>
Safety Sensitive Groups	<input type="text" value="1,2"/>

### Test History Maintenance Form Card



This form will display any tests that have been generated for a specific employee. To display test history for a specific employee from the drop-down list select the search criteria. Proceed with selecting an employee from the employee drop-down list. Only the test that was generated for the selected employee will be available in the Tests on File drop-down list. If needed complete the information.

### Test History

Search Order:  Employee:

Tests On File:

Requested  Tested

Tested For  Reason  Results  Return To Duty

Results Reported By

Health Care Facility

HR Notified  Employee Notified  Supervisor Notified

DOT Employee

Last Updated:

Record: 1 of 1 No Filter Search

### New Test


Selecting this button allows the user to perform a test that is not random and record the details. A search order and an employee must first be selected then click on the **New Test** button and a blank form will display to enter information regarding this test.

### Test History

Search Order:  Employee:

Tests On File:

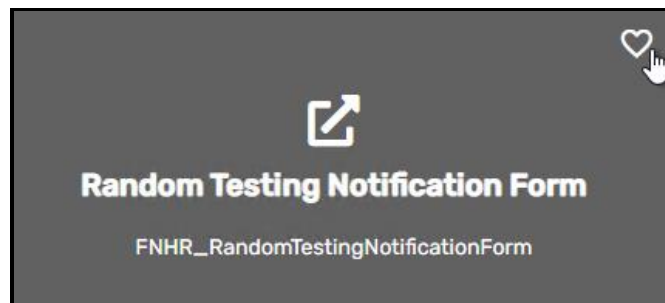
**New Test**

Requested	<input type="text"/>		Tested	<input type="text"/>	
Tested For	<input type="text"/>				
Reason	<input type="text"/>				
Results	<input type="text"/>			Return To Duty	<input type="text"/>
Results Reported By	<input type="text"/>				
Health Care Facility	<input type="text"/>				
HR Notified	<input type="text"/>				
Employee Notified	<input type="text"/>				
Supervisor Notified	<input type="text"/>				
DOT Employee	<input type="text"/>				
Last Updated:	<input type="text"/>	<input type="text"/>	<input type="text"/>		

Record: 1 of 1 | No Filter | Search

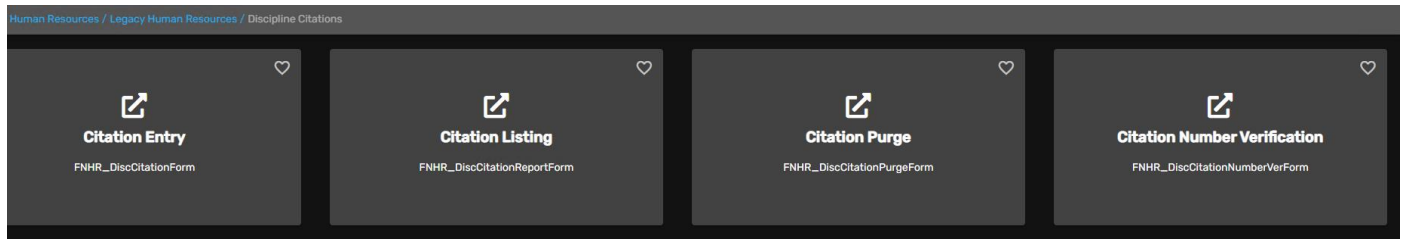
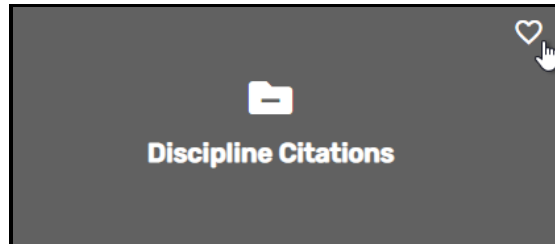
### Random Testing Notification Card



This form is used to set up the notification letter that will be sent to the employees who have been selected for testing. There are two predefined types of notification messages. The two Message Types **MUST** be set up in this order and are case sensitive. Currently these are the only two records that can be created. If the Notification Message must be changed then it would have to be retyped in one of the predefined message types. Once the random drug selection is completed the information entered on this for is the information that will be generated on the letter given to the employee.

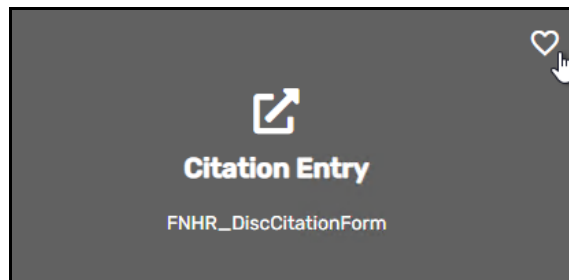
<b>Random Testing Notification Message</b>	
<b>Message Type</b>	<b>Notification Message</b>
Drug	<p>You have been selected for a random DRUG TEST for the Demonstration Transit Substance Abuse Program. You are required to acknowledge receipt of this notice and its date and time of delivery and consent to release of test results by providing your signature below.</p> <p>You must report to a collection site within twenty-four (24) hours of receipt of this notice* and present this notice to collection site personnel. Failure to report for testing will be grounds for termination. You are encouraged to refrain from consuming excessive liquids four (4) hours prior to your test.</p>
DrugandAlcohol	<p>You have been selected for a random DRUG &amp; ALCOHOL TEST for the Demonstration Transit Substance Abuse Program. You are required to acknowledge receipt of this notice and its date and time of delivery and consent to release of test results by providing your signature below.</p> <p>You must report to a collection site within twenty-four (24) hours of receipt of this notice* and present this notice to collection site personnel. Failure to report for testing will be grounds for termination. You are encouraged to refrain from consuming excessive liquids four (4) hours prior to your test.</p>

### Discipline Citations Card



This feature is used to track and maintain disciplinary action on an employee.

### Citation Entry Card




**Discipline Citation Form**

Last Name:   Show Inactive Employees

First Name:

Payroll Status:  Employee #:  David Employee Hire Date:

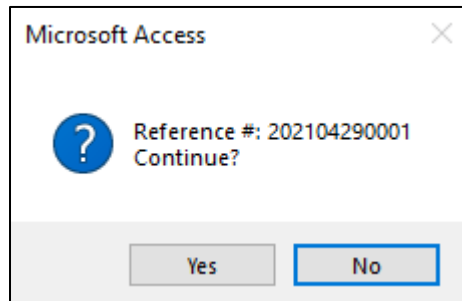
Reference:  Seniority Date:



Field Name	Description
Last Name/First Name/Employee Number	Select an employee from the drop-down menu.
Payroll Status	Populates from the Employee setup form.
Employee #	Populates from the Employee setup form.
Hire Date	Populates from the Employee setup form.
Seniority Date	Populates from the Employee setup form.
Reference	Allows you select a citation record already created.

**New Record**

Click **New Record** to create a new entry. Click **Yes** to continue or **No** to cancel on the prompt.




**Discipline Citation Form**

Last Name:   Show Inactive Employees

First Name:

Payroll Status:  Employee #:  David Employee Hire Date:


Reference:  Seniority Date:




---

Reference:  Notes:

User Reference:

Date:  

Time:  

Location:

Citation:

Disposition:

Supervisor:  Last Name:

Absence Penalty:  Tardy:

Field Name	Description
Reference	This field will populate with the FN generated number once a user generated reference or date is entered.
User Reference	Enter a user defined reference if desired.
Date	Enter the date of the citation.
Time	Enter the time of the citation.
Location	Select the location of the citation from the drop-down menu.
Citation	Select the type of citation from the drop-down menu.
Disposition	Select the disposition of the citation from the drop-down menu.
Supervisor	Select the employee's supervisor from the drop-down menu.
Last Name	Option available to select a supervisor.
Notes	Enter notes pertaining to the citation.
Absence Penalty	A numeric value defined by the user.
Tardy	Enter time in HH:MM format.

**Quick List**

This feature will display a detailed summary listing all references for a selected employee. From the form below the user can still select the new Record button and create another entry for the selected record. Also, by double clicking a date under the Citation Date field user will hyperlink back to the Discipline Citation form which will displays the detailed record. The Quick List button is used to refresh the Absence Balance if the Reset penalty flag is checked.

**Discipline Citation Form**

Last Name:   Show Inactive Employees

First Name:

Payroll Status:  Employee #:  Sharon Sample Hire Date:

Reference:  Seniority Date:

Citation Date	Citation	Disposition	Supervisor	Reference	Notes	Abs Penalty	Absence Balance	Reset Penalty
4/29/2021	CO	NA	Amanda Sample	202104290002		1.0	1.0	<input type="checkbox"/>

Record: 1 of 1

Field Name	Description
Citation Date	Automatically populated from the Discipline Citation Form.
Citation	Automatically populated from the Discipline Citation Form.
Disposition	Automatically populated from the Discipline Citation Form.
Supervisor	Automatically populated from the Discipline Citation Form.
Reference	Automatically populated from the Discipline Citation Form.
Notes	Automatically populated from the Discipline Citation Form and if more than one line scroll bars will display to see the note in its entirety.
Abs Penalty	Automatically populated from the Discipline Citation Form.
Absence Balance	Automatically populated from the Discipline Citation Form.
Reset Penalty	This flag is to be used if at one point the Absence Balance restarts after a particular count on Abs Penalty has been reached.

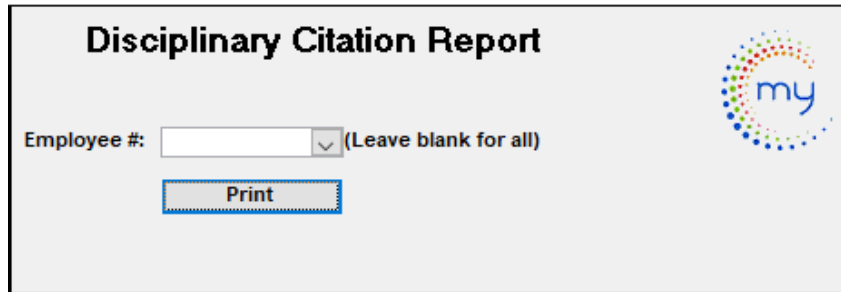
The Quick List button is used to refresh the Absence Balance if the Reset penalty flag is checked.



### Citation Listing Card



This will generate a master listing report of discipline citations sorted by employee number.



Select an employee # from the drop-down or leave blank to run a report on all employees.

<b>Disciplinary Citation Master Listing</b>						
<u>Emp #</u>	<u>Date/Time</u>	<u>Location</u>	<u>Citation</u>	<u>Disposition</u>	<u>Ref #</u>	<u>Supervisor</u>
00112	4/29/2021 5:00 PM	North Atherton	Call Off	No Action Taken	202104290002	Amanda Sample
00137	4/29/2021 2:07 PM	North Atherton	Failure to possess valid CDL	No Action Taken	202104290001	Ray Sample
00138	4/20/2021 8:45 AM	North Atherton	Failure to possess valid CDL	No Action Taken	202104200001	Ray Sample

### Citation Purge Card



This feature provides an array of options for purging citations. Purging can be done individually or for all employees using a date range. This form also provides an option to purge by a range of reference numbers.

## Discipline Citation Purge Form

**Purge Type**

One Employee  
 All Employees

Select Employee


00112

Starting Date

Ending Date

Starting Reference #

Ending Reference #



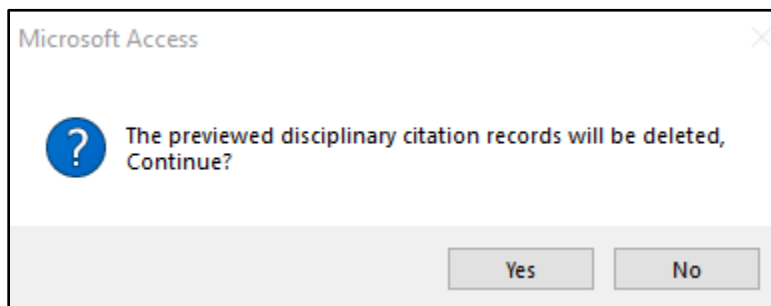
Field Name	Description
Purge Type	Select One Employee or All Employees. If you select All Employees, the drop-down for Select Employee will not appear.
Select Employee	Select the employee from the drop-down. Only those employees with citations will appear in the drop-down.
Starting/Ending Date	Enter a date range to purge.
Starting/Ending Reference #	Select a starting and ending reference range to purge. If you select One Employee, only those citation reference numbers will appear.
Preview	Click preview to review the report of what you will purge
Purge	This button will become active after you close the print preview

**Preview**

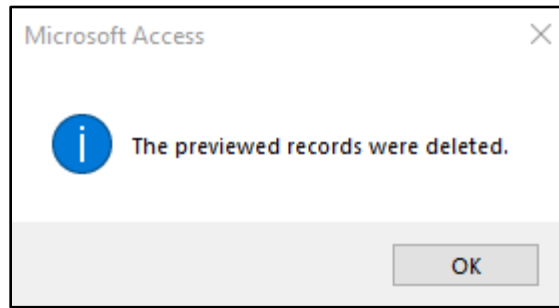
<b>Purge Disciplinary Citation Verification</b>							
Starting Ref #: Begin    Ending Ref #: End							
Starting Date: 4/1/2021    Ending Date: 4/30/2021							
Ref #	Emp #	User Ref	Date/Time	Location	Citation	Disposition	Supervisor
202104290002	00112	SS20210429	4/29/2021 5:00 PM	North Atherton	Call Off	No Action Taken	Amanda Sample

**Purge**

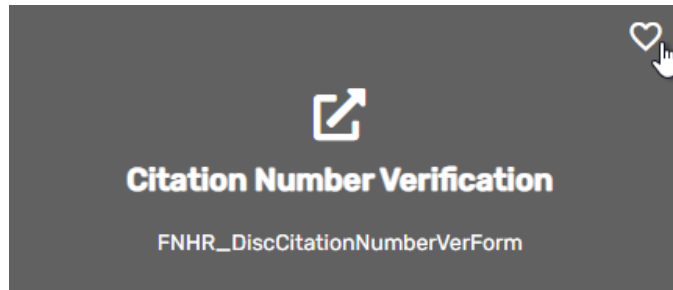
When you click Purge you will receive the following prompt. Click Yes to continue or no to cancel.



If yes is selected, you will receive the following notification.



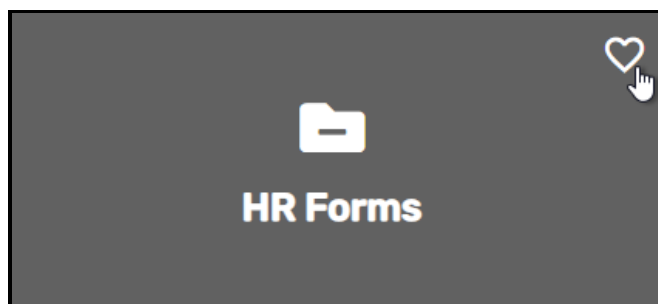
### Citation Number Verification Card

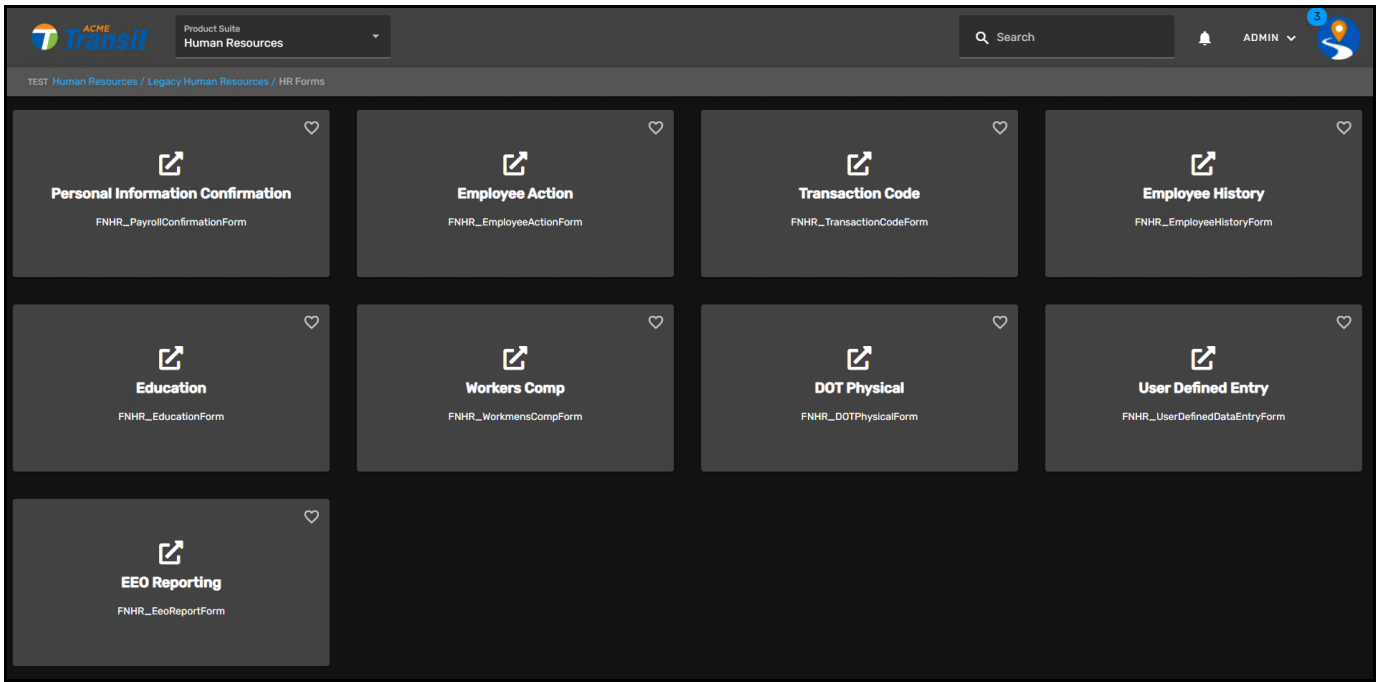


Enter your Starting and Ending Reference Number, then click Report Preview to view.

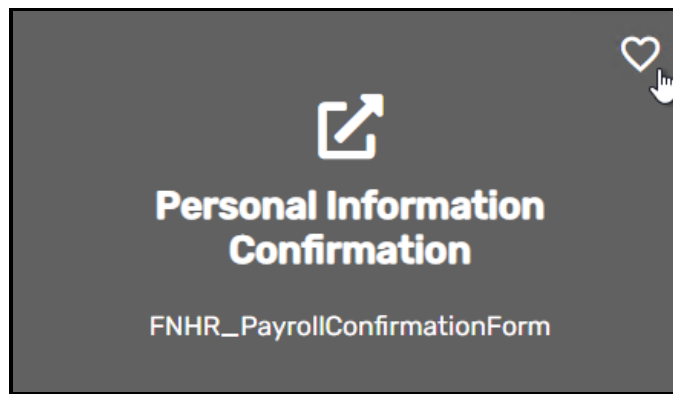
A screenshot of a web form titled "Citation Number Verification Form". The form has a light grey background. At the top right is a circular logo with the letters "my" in the center, surrounded by a ring of colorful dots. Below the title, there are two input fields: "Starting Reference #" and "Ending Reference #". To the right of these fields is a grey button labeled "Report Preview". At the bottom left, there is a small box containing the text "VSN: 0906.0001 [8/20/2021]".

### HR Forms Card





### Personal Information Confirmation Card



This report is designed for verification from employees. The user can print out the forms, have the employees sign and file in personnel records.

A screenshot of the 'Personal Information Confirmation Form' interface. The form has a search filter section on the left with checkboxes for 'All Departments' and 'All Employees', and dropdown menus for 'Department', 'Payroll Status', 'Employee #', 'Employee Name', and 'Employee Search Name'. There are also checkboxes for 'Sort By Employee # Within Department' and 'Sort By Employee Name Within Department'. A 'Print' button is located on the right side of the form. The ACME Transit logo is in the top right corner.

Field Name	Description
Department	Select a specific department from the drop-down or leave the box checked for all departments.
Payroll Status	Select the payroll status or leave blanks for all.
Employee #	Select the employee number or leave the box checked for all employees.
Employee Name	Use this to find the employee # by their name. Once a name is selected the Employee # will populate.
Employee Search Name	Use this to find the employee # by their search name. Once selected the Employee # will populate.
Sort by Employee # Within Department/Sort by Employee Name Within Department	Allows you to specify how you want the report to sort.

### Confirmation of Payroll Information

Please confirm the following information for payroll purposes only as of: 5/12/2021 9:59:27 AM

<b>Department:</b>	A		
<b>Employee #:</b>	00125		
<b>Name:</b>	Amanda Sample		
<b>Address Line 1:</b>	123 Main Street		
<b>Address Line 2:</b>			
<b>City:</b>	State College		
<b>State:</b>	PA		
<b>Zip Code:</b>	16803		
<b>Social Security #:</b>	999999999		
<b>Home Phone:</b>	(814) 555-1212		
<b>Marital Status:</b>	S		
<b>Federal Exemptions:</b>	0		
<b>State Exemptions:</b>			
<b>Federal %:</b>			
<b>State %:</b>			
<b>Extra FIT Amount:</b>	\$0.00		

**Contact Info:**

First Name: Jane	Contact Middle Name:	Contact Relationship: Parent	
Last Name: Sample	Contact Relationship: Parent		
Contact Phone Type: H	Phone: 8145551212	Ext:	
Email:			

First Name: Jane	Contact Middle Name:	Contact Relationship: Parent	
Last Name: Sample	Contact Relationship: Parent		
Contact Phone Type: W	Phone: 8145551212	Ext:	
Email:			

First Name: Beth	Contact Middle Name:	Contact Relationship: Sibling	
Last Name: Sample	Contact Relationship: Sibling		
Contact Phone Type: C	Phone: 8145551212	Ext:	
Email:			

First Name:	Contact Middle Name:	Contact Relationship:	
Last Name:	Contact Relationship:		
Contact Phone Type:	Phone:	Ext:	
Email:			

**Make any necessary corrections above and return to Personnel.**

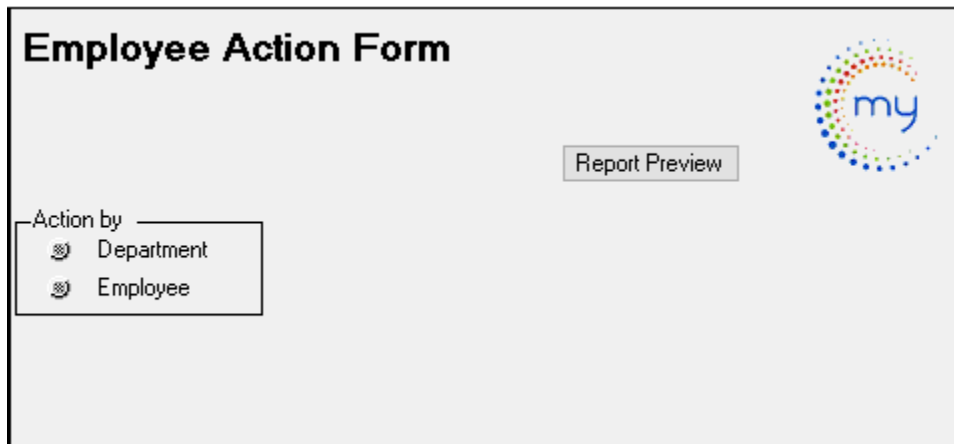
**Employee Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### Employee Action Card

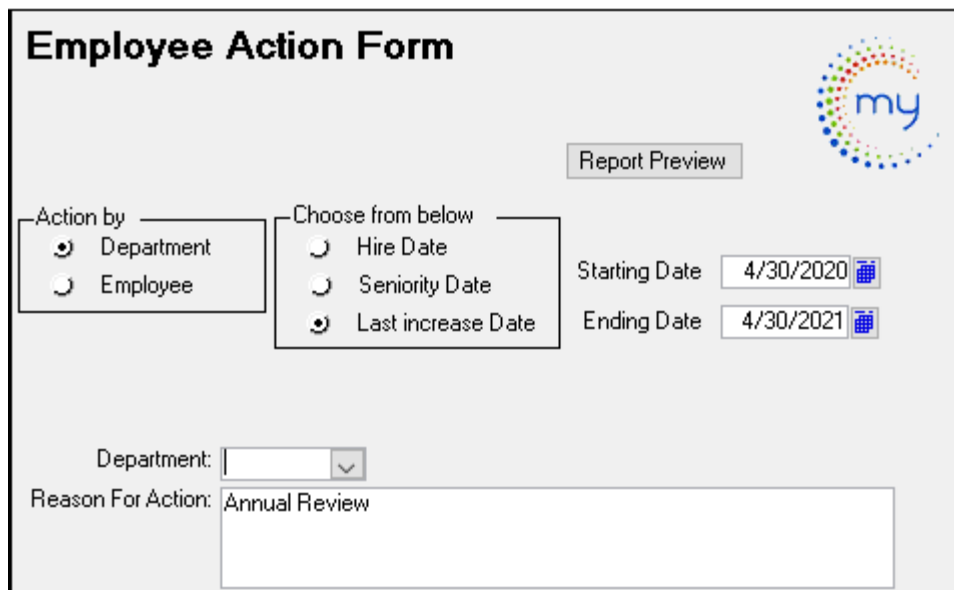


This report can be used to provide PR/HR notification of changes to an employee, such as a new pay rate. The report can be run by Department or for a specific employee.

### Department



Click *Department* and the following form will open.

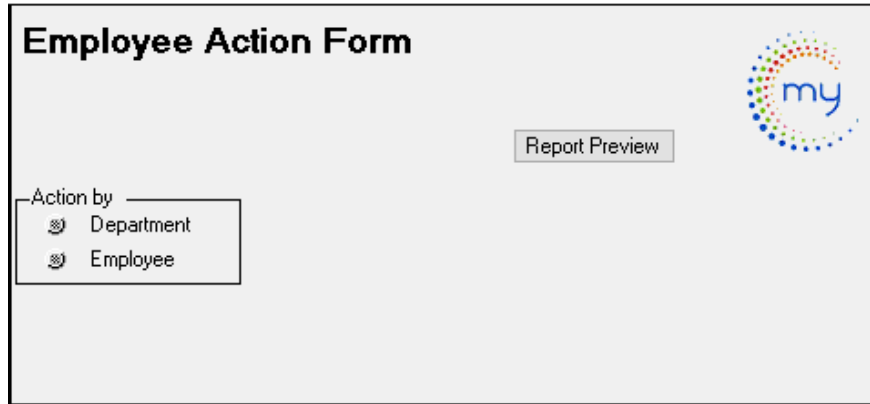


Field Name	Description
Choose from Below	You can choose the parameter for the date range (Hire Date, Seniority Date or Last Increase Date).
Starting Date/Ending Date	The date range for the report.
Department	Select a department from the drop-down or leave blank for all.
Reason for Action	This can be left blank, or you can type in a reason for the change.

Click [Report Preview](#)

Employee Action Form			
Starting Date: 4/30/2020		Ending Date: 4/30/2021	
00100	Ray Sample	Department:	D
	123 Main Street	Employee Status:	AF
		Job Class Code:	S
	State College PA	Hourly/Salary:	S
	16803	Pay Rate:	\$2,829.6300
	8145551212	Grade:	Step:
		Birth Date:	7/29/1956
		Hire Date:	11/14/1977
		Seniority Date:	11/14/1977
Effective Date:		Last Increase Date:	7/1/2020
New Grade:		Next Increase Date:	
New Pay Rate:			
New Step:			
Increase Amount:			
Reason For Action: Annual Review			
Director's Signature:		Date:	
Human Resource Signature:		Date:	
Payroll Signature:		Date:	

### Employee



**Employee Action Form**

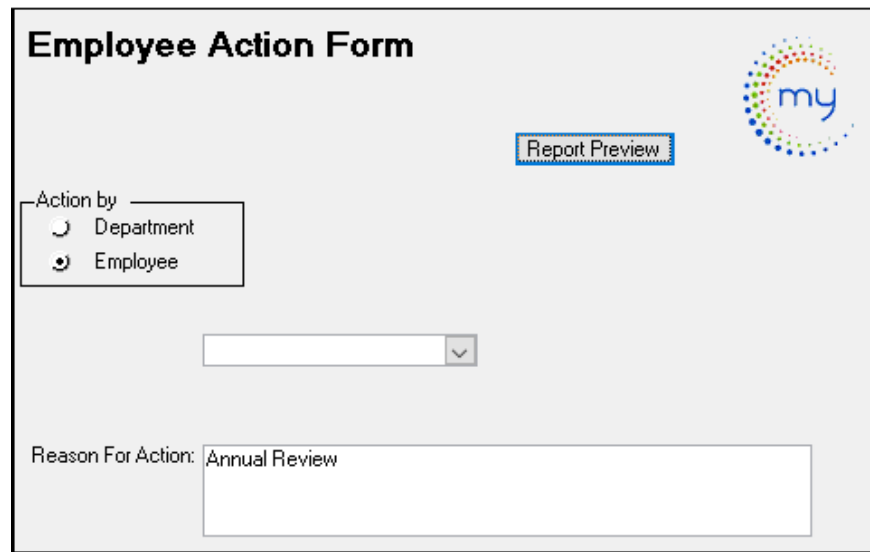
Report Preview

Action by

- Department
- Employee

my

Click **Employee** and the following form will open.



**Employee Action Form**

Report Preview

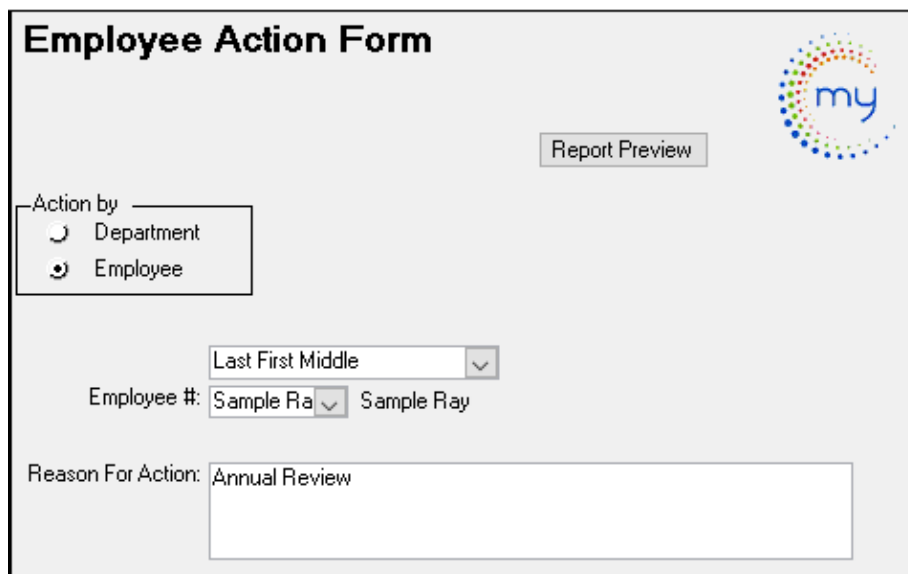
Action by

- Department
- Employee

my

Reason For Action: Annual Review

Select an option to select the employee number (Employee Number, First Middle Last or Last First Middle). This is how the information will appear in the drop-down.



**Employee Action Form**

Report Preview

Action by

- Department
- Employee

my

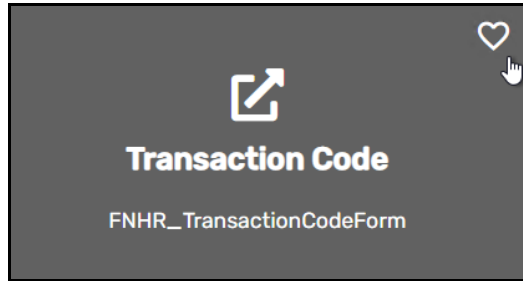
Last First Middle

Employee #: Sample Ra Sample Ray

Reason For Action: Annual Review



Transaction Code Card

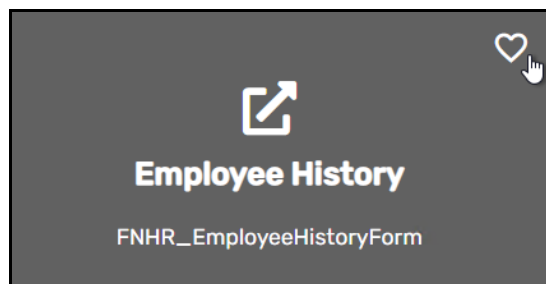


This form is used to set up user-defined HR codes for specific types of transactions on the Employee History Form.

Add/Modify Transaction Codes					
Tran Code	Description	Alpha Field Title	Field Description	Num Field Title	Field Description
CDL	Commercial Driver's License	1: System	Fixed / Paratransit	4: Issue	Expiration Date
		2:		5: Exp	Issue Date
		3:			
Union	Union Dates of Employment	1: Union	Union Name / Number	4: Start	Start Date
		2: Reason	Reason for Term	5: End	End Date
		3:			
Grade	Grade and Step Tracking	1: Grade	Grade Level	4: Start	Start Date
		2: Step	Step Level	5:	
		3:			
		1:		4:	
		2:		5:	
		3:			


Field Name	Description
Tran Code	Enter a user defined transaction code.
Description	Enter a user defined description of the transaction code.
Alpha Field Title	There are three fields for defining each specific type of entry.
Field Description	Enter a user defined description of the Alpha Field Title.
Num. Field Title	There are two fields for defining each specific type of entry.
Field Description	Enter a user defined description of the Number Field Title.

Employee History Card



This form is utilized to enter personnel data based on the user-defined fields that are set up in Transaction Codes which is explained in the previous section of this manual.

### Add/Modify Employee History



Search Order

Employee #:


Transaction Code:

Date

--	--	--	--	--	--

Field Name	Description
Search Order	Select the method that you want to use to search for an employee.
Employee #	Select the employee from the drop-down menu.
Transaction Code	Select a pre-defined transaction code from the drop-down menu.
Date	Enter the date that the data is being entered.

### Add/Modify Employee History



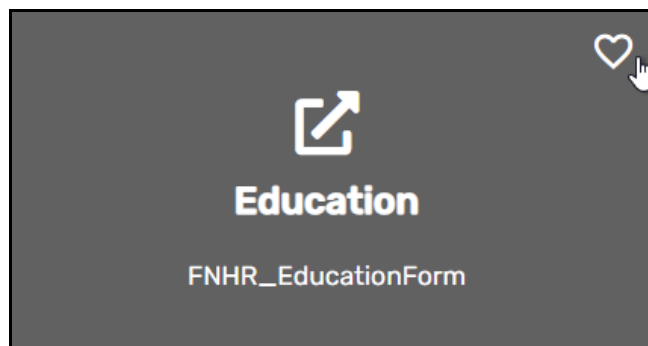
Search Order

Employee #:

Transaction Code:


Date	System	Issue	Exp
5/12/2021	Fixed Route	5/1/2021	4/30/2026

### Education Card



Selecting this option will allow you to enter and maintain education records. Tracking costs, reimbursements, test scores and a various other information pertaining to employee training.

### Education



Last Name:


First Name:

Employee #:

Field Name	Description
Last Name	Select employee's last name from the drop-down menu OR
First Name	Select employee's first name from the drop-down menu OR
Employee #	Select employee's number from the drop-down menu.
Enter	Click on <i>Enter</i> to open the education form.

Click Enter

### Education



Last Name:

First Name:

Employee #: 00138  Henry Sample

#### Education

Type: General

Start Date: 1/14/2019  End Date: 5/14/2021

School/Provider: PA College of Technology

Instructor: John Smith

Credits:

GPA/Ranking: 3.7

Degree/Certification: Automated Manufacturing Technology

Evaluation:

Cost: \$45,200.00  Directly Paid

Amount Reimbursed:

Check Number:  Check Date:

Hyperlink:

Notes:

Record: 1 of 1 | No Filter | Search

Field Name	Description
Type	Select the type of training from the User Defined drop-down menu.
Start Date	Select the date class started.
End Date	Select the date class ended.
School/Provider	Enter the name of the school/provider.
Instructor	Enter the name of the instructor.
Credits	If applicable, enter credits earned/received.
GPA/Ranking	If applicable, enter GPA/ Class Ranking.
Degree/Certification	If applicable, enter degree/certification received.
Evaluation	If applicable, evaluate the employee.


Cost	Enter the cost of the class/course.
Directly Paid	Select the Yes or No from drop-down menu.
Amount Reimbursed	If applicable, enter the amount reimbursed to the employee.

Worker’s Compensation Card



Used to track and maintain on the job injuries that involve an employee while on duty. Records are not limited to on-the-job injury. Sometimes workers sustain serious injuries due to the repetitive nature of their occupations.

**Workmens Compensation**




Last Name:

First Name:

Employee #:

Field Name	Description
Last Name	Select employee’s last name from the drop-down menu OR
First Name	Select employee’s first name from the drop-down menu OR
Employee #	Select employee’s number from the drop-down menu.
Enter	Click on <i>Enter</i> to open the workers’ comp form.

**Workmens Compensation**



Last Name:

First Name:

Employee #:

**Workers Compensation**

Case Or File #

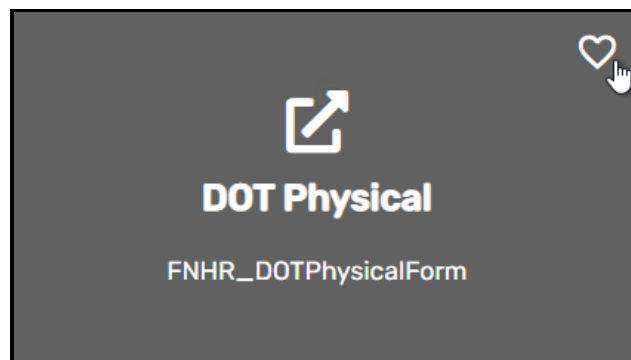
Date of Injury <input type="text" value="4/19/2021"/>	Date Reported <input type="text" value="4/19/2021"/>
Begin Claim <input type="text" value="4/19/2021"/>	Claim Completed <input type="text" value="7/31/2021"/>
Treatment Form <input type="text" value="4/23/2021"/>	ProComp Given <input type="text" value=""/>
Wage Statement <input type="text" value="4/27/2021"/>	
Light Duty <input type="text" value="7/1/2021"/>	
Lost Time Began <input type="text" value="4/19/2021"/>	Light Duty Began <input type="text" value="7/1/2021"/>
Lost Time Ended <input type="text" value="6/30/2021"/>	Light Duty Ended <input type="text" value="7/31/2021"/>
Total Lost Time <input type="text" value="73"/>	Total Light Duty <input type="text" value="31"/>

Notes:

Record: 1 of 1 | No Filter | Search

Field Name	Description
Case or File #	A sequentially numbered case file, coded for identification, purpose of maintaining an accurate record of the report and the response.
Date of Injury	Enter date of occurrence.
Date Reported	Enter date the date that the injury was reported.
Begin Claim	Enter the date the claim began.
Claim Completed	When the claim is closed, enter the closing date.
Treatment Form	Enter the date the medical treatment form was submitted, if applicable.
ProComp Given	Enter the date.
Wage Statement	Enter date the Wage form was submitted.
Light Duty	Enter the date that determined the employee would be on light duty.
Lost Time Began	The date entered is based on when lost time for the employee due to the injury.
Lost Time Ended	The date entered is based on when lost time ended for the employee due to the injury.
Light Duty Began	Enter the date that the employee was placed on light duty.
Light Duty Ended	Enter the date that the employee was taken off light duty.
Total Lost Time	Automatically Calculated from the dates entered in <i>Lost Time Began</i> and <i>Lost Time Ended</i> .

DOT Physical Card




Use this form to maintain DOT Physical records for each employee. The system assists with this tracking by providing necessary fields so that employers can comply with making sure an employee is maintaining his/her medical certificate of qualification to operate motor vehicles.

**DOT Physicals**

Last Name:

First Name:

Employee #:



**Enter**


Field Name	Description
Last Name	Select employee’s last name from the drop-down menu OR
First Name	Select employee’s first name from the drop-down menu OR
Employee #	Select employee’s number from the drop-down menu.
Enter	Click on <i>Enter</i> to open the workers’ comp form.

### DOT Physicals

Last Name:

First Name:

Employee #:



---

**DOT Physicals**

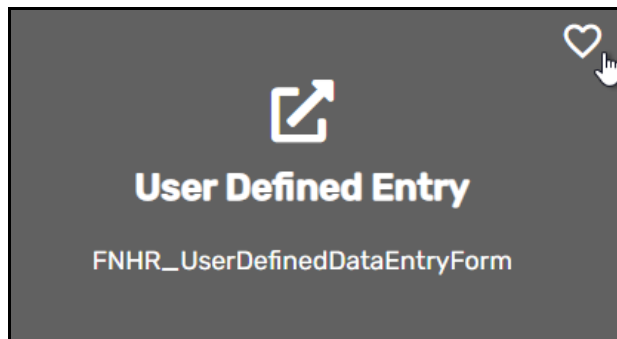
Next Physical Date: <input type="text" value="4 /5 /2023"/>	Notification Letter Date: <input type="text" value="3 /15/2021"/>
Expiration Date of Physical: <input type="text" value="4/30/2023"/>	Failure To Make Appt Letter: <input type="text"/>
Date Of Physical: <input type="text" value="4/5/2021"/>	Date Submitted To Payroll: <input type="text"/>
Certifying Physician: <input type="text"/>	Physical Cost: <input type="text"/>

\* **DOT Physicals**

Next Physical Date: <input type="text"/>	Notification Letter Date: <input type="text"/>
Expiration Date of Physical: <input type="text"/>	Failure To Make Appt Letter: <input type="text"/>
Date Of Physical: <input type="text"/>	Date Submitted To Payroll: <input type="text"/>
Certifying Physician: <input type="text"/>	Physical Cost: <input type="text"/>

**Enter**

User Defined Entry Card



Select this form to set up user defined HR data fields for custom tracking and reporting. This form is used to enter data for a specific employee without accessing the employee information.

### User Defined Data Entry


Fleet-Net System Administrator

Form Name:

Last Name:

First Name:

Employee #:



**Enter**


**Print**

Field Name	Description
Form Name	Select the form from the drop-down.
Last Name	Search option showing last name first OR
First Name	Search option showing first name first OR
Employee Number	Search option showing employee number first.

Click Enter.

### User Defined Data Entry

Fleet-Net System Administrator



Form Name:

Last Name:

First Name:

Employee #:

---


Expiration Date:

Click **Print** to print the historical information (if the form is marked as history – refer to [Data Setup](#) in User Defined Field Setup).

Commercial Driver License			
Employee #:	00138	Henry Sample	
Expiration Date	4/30/2025	dflaharty	5/12/2021 4:41:53 PM
	4/30/2020	dflaharty	5/12/2021 4:41:53 PM

Driver’s License Information

### Driver License Entry




Search Name:   Show Inactive Employees

First Name:

Employee #:

Field Name	Description
Search Name	Select employee’s search name from the drop-down menu OR
First Name	Select employee’s first name from the drop-down menu OR
Employee #	Select employee’s number from the drop-down menu.

### Driver License Entry



Search Name:   Show Inactive Employees

First Name:

Employee #:

---

Driver License #	Expiration	License Class	Restrictions
11 111 111	3/3/2024	BP	QM

The information entered here will update to the employee master driver’s license section.

## EEO Reporting Card



This form allows you to complete the EEO reporting for Components 1 and 2 and create the files for electronic submission.

It is recommended to have the Instruction Booklet handy when completing the setup. It can be found at <https://eeocdata.org/eeo1/howto/instructionbooklet>. The setup is only done once unless it needs updated with changes from the EEO.

### Setup Job Category

Click the green checkmark for **Setup Job Category**. This will open the Job Category miscellaneous code list.

**Modify / Add Misc List Codes**

Module:

Type:

Code	Value
A	EXECUTIVE/SENIOR LEVEL OFFICIALS AND MANAGERS
B	PROFESSIONALS
C	TECHNICIANS
D	PROTECTIVE SERVICE WORKERS
E	PARA PROFESSIONALS
F	ADMINISTRATIVE SUPPORT
G	SKILLED CRAFTS WORKERS
H	SERVICE-MAINTENANCE
I	LABORERS AND HELPERS
J	OPERATIVES
K	SALES WORKERS
L	CRAFT WORKERS
M	FIRST/MID-LEVEL OFFICIALS AND MANAGERS
*	

Print



Field Name	Description
Code	Limited to one character - can be whatever you choose.
Value	Description of the code. This <b>must</b> match the job category codes in the instruction booklet.


### Setup Gender

Click the green checkmark for **Setup Gender**. This will open the Gender miscellaneous code list.

**Modify / Add Misc List Codes**

Module:

Type:



	Code	Value
<input type="checkbox"/>	D	Declines to self-identify
<input type="checkbox"/>	F	Female
<input type="checkbox"/>	M	Male
<input type="checkbox"/>	*	


### Setup EEO Code

Click the green checkmark for **Setup EEO Code**. This will open the EEO Code miscellaneous code list.

**Modify / Add Misc List Codes**

Module:

Type:



	Code	Value
<input type="checkbox"/>	01	WHITE
<input type="checkbox"/>	02	BLACK OR AFRICAN AMERICAN
<input type="checkbox"/>	03	HISPANIC OR LATINO
<input type="checkbox"/>	04	ASIAN
<input type="checkbox"/>	05	NATIVE AMERICAN OR ALASKAN NATIVE
<input type="checkbox"/>	06	NATIVE HAWAIIAN OR PACIFIC ISLANDER
<input type="checkbox"/>	07	TWO OR MORE RACES
<input type="checkbox"/>		

Field Name	Description
Code	Limited to three characters - can be whatever you choose.
Value	Description of the code. This <b>must</b> match the EEO-1 Race and Ethnicity categories in the instruction booklet.


### Setup Matrix Line

This is defining the job category you will be reporting. While it's the same information as job category, it is under a different miscellaneous code and must be updated.

### Modify / Add Misc List Codes

Module:

Type:



Code	Value
▶ 1	EXECUTIVE/SENIOR LEVEL OFFICIALS AND MANAGERS
10	SERVICE-MAINTENANCE
2	FIRST/MID-LEVEL OFFICIALS AND MANAGERS
3	PROFESSIONALS
4	TECHNICIANS
5	SALES WORKERS
6	ADMINISTRATIVE SUPPORT WORKERS
7	CRAFT WORKERS
8	OPERATIVES
9	LABORERS AND HELPERS
*	


### Setup Matrix Column

This is defining the gender/EEO groups. Each EEO category is specified by gender (White Male, White Female).

### Modify / Add Misc List Codes

Module:

Type:



Code	Value
A	WHITE MALES
B	BLACK OR AFRICAN AMERICAN MALES
C	HISPANIC OR LATINO MALES
D	ASIAN MALES
E	NATIVE AMERICANOR ALASKAN NATIVE MALES
F	NATIVE HAWAIIAN OR PACIFIC ISLANDER MALES
G	TWO OR MORE RACES MALES
H	WHITE FEMALES
I	BLACK OR AFRICAN AMERICAN FEMALES
J	HISPANIC OR LATINO FEMALES
K	ASIAN FEMALES
L	NATIVE AMERICANOR ALASKAN NATIVE FEMALES
M	NATIVE HAWAIIAN OR PACIFIC ISLANDER FEMALES
▶ N	TWO OR MORE RACES FEMALES

There is a character limit of 1 for the code.

### Excluded Earning Codes


If you are reporting Component 2 (wages), you will need to list the earning codes that should be excluded from the calculation. EEOC has adopted the Fair Labor Standards Act practices for calculating compensable hours, so that paid holidays, vacation, and leave are not included. For exempt employees, businesses may report actual hours worked or designate 40 hours a week.

You will also identify where you want the files to export.

**Modify / Add Misc List Codes**

Module:


Type:



Code	Value
ExcludedEarningsCodes	BFHPDVY
PathToExportFile	C:\Users\dfalaharty\Desktop\Personal Test Environment\File Folder

Field Name	Description
Code	Must be entered exactly as shown: ExcludedEarningsCodes.
Value	List all the earning codes that should not be included in the calculation. It is not necessary to separate them by a comma.
Code Line 2	Must be entered exactly as shown: PathToExportFile.
Value Line 2	Enter the location where the file should be exported.

Company Setup

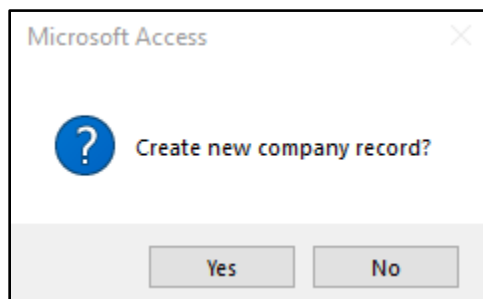


**EEO Reporting**

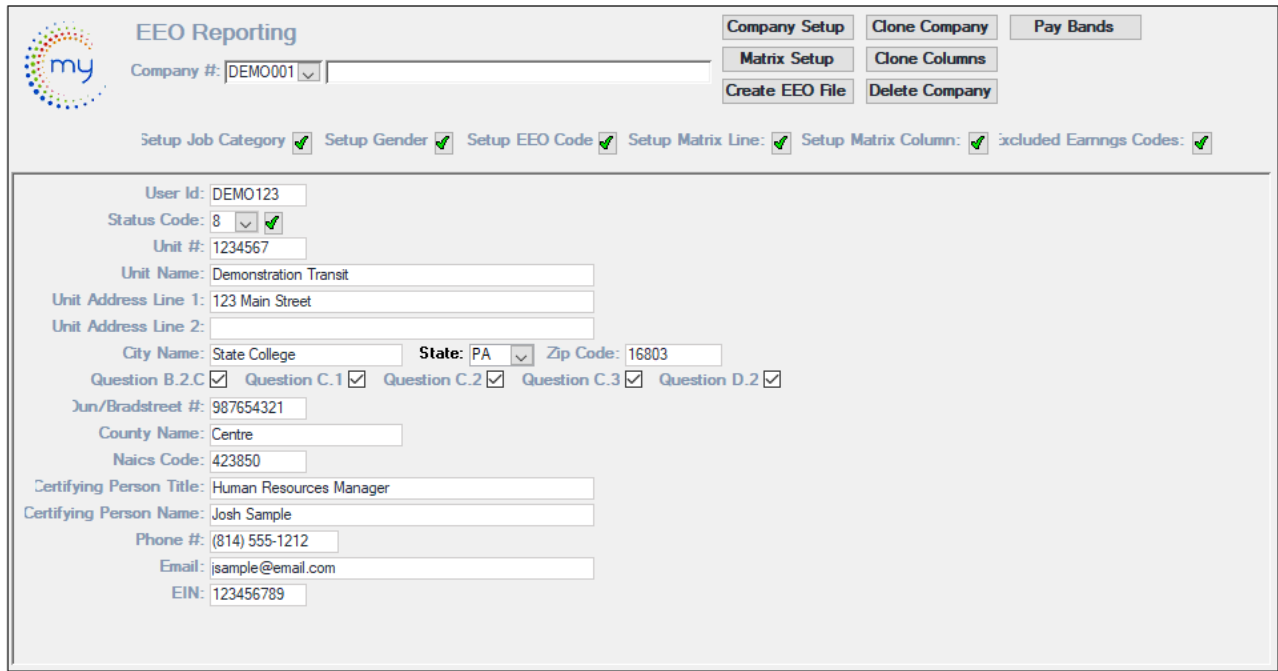
Company #:

Setup Job Category 
 Setup Gender 
 Setup EEO Code 
 Setup Matrix Line: 
 Setup Matrix Column: 
 Excluded Earnings Codes:

In Company # enter your EEOC assigned company number and click **Company Setup**. You will receive the following prompt.

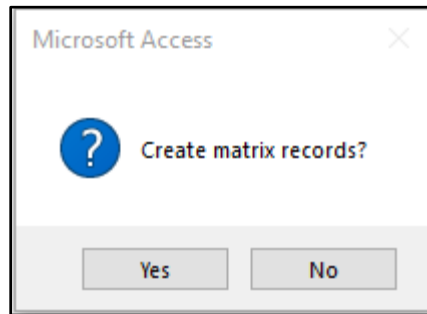


Click Yes to continue or no to cancel. If yes is chosen, the following form will display.

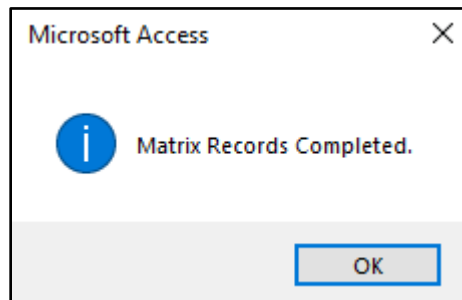


### Clone Columns

Click **Clone Columns** to set up the matrix columns. You will receive the following prompt. Click Yes to continue or no to cancel.



If Yes was selected, you will receive this message when completed.



### Matrix Setup

Once the columns are cloned, select your company # from the drop-down and then click **Matrix Setup**. You will need to select the Category, Gender and EEO Code from each drop-down.

**EEO Reporting**

Company #: DEMO001 | Demonstration Transit

Company Setup | Clone Company | Pay Bands  
 Matrix Setup | Clone Columns  
 Create EEO File | Delete Company

Setup Job Category  Setup Gender  Setup EEO Code  Setup Matrix Line:  Setup Matrix Column:  Excluded Earnings Codes:

Line	Col	Category	Gender	EEO	Count
1	A	1	M	1	
1	B	1	M	2	
1	C	1	M	3	
1	D	1	M	4	
1	E	1	M	5	
1	F	1	M	6	
1	G	1	M	7	
1	H	1	F	1	
1	I	1	F	2	
1	J	1	F	3	
1	K	1	F	4	
1	L	1	F	5	
1	M	1	F	6	
1	N	1	F	7	

Field Name	Description
Category	Select the job category for each line - it should match the description listed.
Gender	Select the gender for each line - it should match the description listed.
EEO	Select the EEO code for each line - it should match the description listed.

Job Category Example

**EEO Reporting**

Company #: DEMO001 | Demonstration Transit

Company Setup | Clone Company | Pay Bands  
 Matrix Setup | Clone Columns  
 Create EEO File | Delete Company

Setup Job Category  Setup Gender  Setup EEO Code  Setup Matrix Line:  Setup Matrix Column:  Excluded Earnings Codes:

Line	Col	Category	Gender	EEO	Count
1	A	1	M	1	
1	B	10			
1	C	2			
1	D	3			
1	E	4			
1	F	5			
1	G	6			
1	H	7			
1	I	8			
1	J	9			
1	K		F	1	
1	L		F	2	
1	M		F	3	
1	N		F	4	
1			F	5	
1			F	6	
1			F	7	

Gender Example

**EEO Reporting**

Company #: DEMO001 | Demonstration Transi

Company Setup | Clone Company | Pay Bands  
 Matrix Setup | Clone Columns  
 Create EEO File | Delete Company

Setup Job Category  Setup Gender  Setup EEO Code  Setup Matrix Line:  Setup Matrix Column:  Included Earnings Codes:

Line	Col	Category	Gender	EEO	Count
1	A	WHITE MALES	M	1	
1	B	BLACK OR AFRICAN AMERICAN MALES	M	1	
1	C	HISPANIC OR LATINO MALES	M	1	
1	D	ASIAN MALES	M	4	
1	E	NATIVE AMERICANOR ALASKAN NATIVE MALES	M	5	
1	F	NATIVE HAWAIIAN OR PACIFIC ISLANDER MALES	M	6	
1	G	TWO OR MORE RACES MALES	M	7	
1	H	WHITE FEMALES	F	1	
1	I	BLACK OR AFRICAN AMERICAN FEMALES	F	2	
1	J	HISPANIC OR LATINO FEMALES	F	3	
1	K	ASIAN FEMALES	F	4	
1	L	NATIVE AMERICANOR ALASKAN NATIVE FEMALES	F	5	
1	M	NATIVE HAWAIIAN OR PACIFIC ISLANDER FEMALES	F	6	
1	N	TWO OR MORE RACES FEMALES	F	7	

EEO Example

**EEO Reporting**

Company #: DEMO001 | Demonstration Transi

Company Setup | Clone Company | Pay Bands  
 Matrix Setup | Clone Columns  
 Create EEO File | Delete Company

Setup Job Category  Setup Gender  Setup EEO Code  Setup Matrix Line:  Setup Matrix Column:  Included Earnings Codes:

Line	Col	Category	Gender	EEO	Count
1	A	WHITE MALES	M	1	
1	B	BLACK OR AFRICAN AMERICAN MALES	M	2	
1	C	HISPANIC OR LATINO MALES	M	3	
1	D	ASIAN MALES	M	4	
1	E	NATIVE AMERICANOR ALASKAN NATIVE MALES	M	5	
1	F	NATIVE HAWAIIAN OR PACIFIC ISLANDER MALES	M	6	
1	G	TWO OR MORE RACES MALES	M	7	
1	H	WHITE FEMALES	F	1	
1	I	BLACK OR AFRICAN AMERICAN FEMALES	F	2	
1	J	HISPANIC OR LATINO FEMALES	F	3	
1	K	ASIAN FEMALES	F	4	
1	L	NATIVE AMERICANOR ALASKAN NATIVE FEMALES	F	5	
1	M	NATIVE HAWAIIAN OR PACIFIC ISLANDER FEMALES	F	6	
1	N	TWO OR MORE RACES FEMALES	F	7	

Pay Bands

If you are reporting Component 2, click Pay Bands. Verify/update the information as needed.

**EEO Reporting**

Company #: DEMO001 | Demonstration Transi

Company Setup | Clone Company | **Pay Bands**  
 Matrix Setup | Clone Columns  
 Create EEO File | Delete Company

Setup Job Category  Setup Gender  Setup EEO Code  Setup Matrix Line:  Setup Matrix Column:  Included Earnings Codes:

Pay Band	From Value	Thru Value
1	\$0	\$19,239
2	\$19,440	\$24,439
3	\$24,440	\$30,679
4	\$30,680	\$38,999
5	\$39,000	\$49,919
6	\$49,920	\$62,919
7	\$69,920	\$80,079
8	\$80,080	\$101,919
9	\$101,920	\$128,959
10	\$128,960	\$163,799
11	\$163,800	\$207,999
12	\$208,000	\$999,999

### Create EEO File

Click Create EEO File and the following form will display.

Field Name	Description
Path To EEO File	Use the drop-down and select the location.
Pay Period Start Date	Select the first date of a pay period.
Pay Period End Date	This will automatically populate based on the start date selected.
Payroll Year Start Date	Select the first day of the payroll year.
Payroll Year End Date	Select the last day of the payroll year.

Click **Component 1** to generate the EEO Component 1 report. Click **Component 2** to generate the EEO Component 2 report.

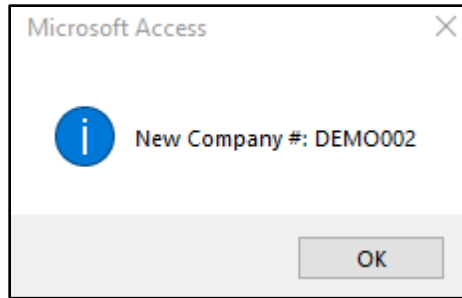
### Clone Company

This button allows you to create a new company # and have the current company data populate.

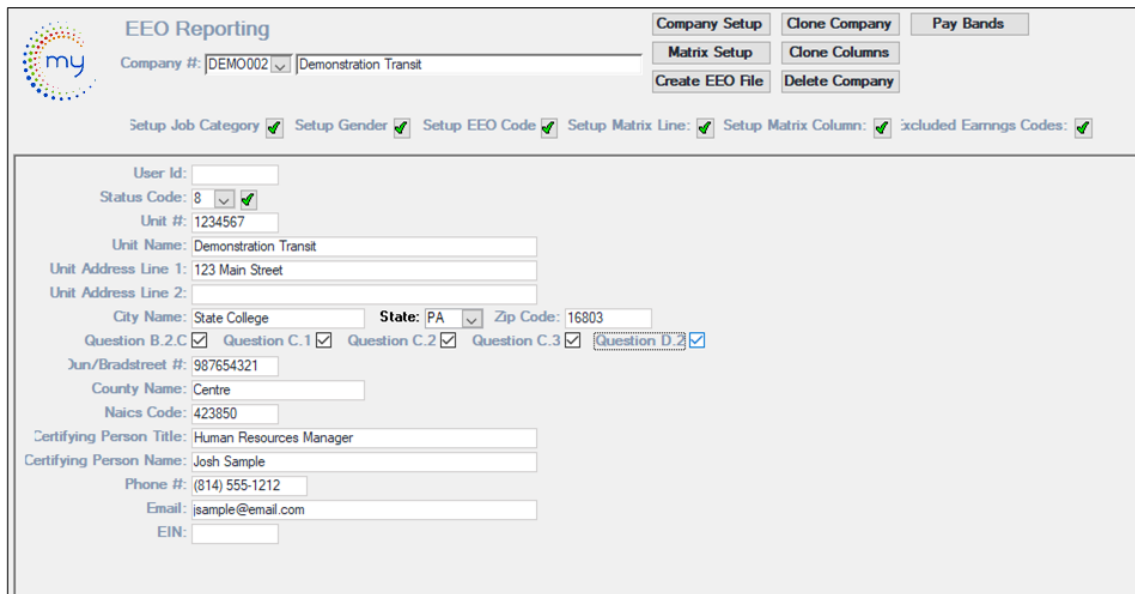
Click **Clone Company** and the following popup will appear. Enter a new company # and click OK to continue or cancel to return to the form.

If OK is clicked, you will receive the following popup. Click Yes to continue or no to cancel.

If Yes is selected, you will receive the following prompt. Click OK to continue.

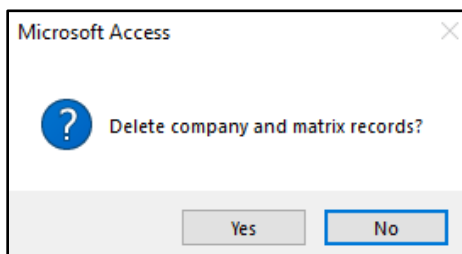


Click **Company Setup** to enter the User ID and make any necessary changes.

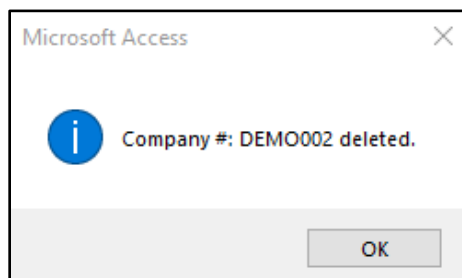


### Delete Company

To delete a company, click **Delete Company**. You will receive the following prompt.

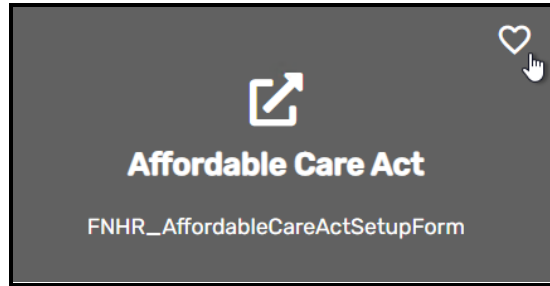


Click Yes to continue or no to cancel. If yes is selected, you will receive the following prompt. Click OK.





## Affordable Care Act Card




The system supports the IRS UI upload method only.

### Affordable Care Act Initial Setup

The first time that the ACA data is being built, follow these steps. If a previous year has been reported, please go to the Build New Year Setup.

Select the Payroll Year being reported from the drop-down list.



### Affordable Care Act Setup

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

Payroll Year: 2021


Search Name:

First Name:

Employee #:

### Employer Setup

Click Employer Setup.



### Affordable Care Act Setup

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

Payroll Year: 2021

Search Name:

First Name:

Employee #:

1094-C Payroll Year: 2021  Corrected

**Part I Applicable Large Employer Member (ALE Member)**

Employer Tax Id: 123456789    Employer TCC: TZTNB    Original Receipt Id:

Employer Name: Demonstration Transi

Street Address: 123 Main Street

City/State/Zip: State College PA 16803

Contact First Name: Josh    Middle:     Last: Sample    Suffix:

Contact Email: jsample@email.com    Contact Phone/Ext: (814) 555-1212

Total Forms Submitted: 60

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**Part II ALE Member Information**

Authoritative Transmittal    Total Forms ALE Member:     Aggregated ALE Member:  Yes  No

Qualifying Offer Method     Qualifying Offer Relief     4980H Transition Relief     98% Offer Method

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**Part III ALE Member Information - Monthly**


	Minimum Essential Coverage Offer		Full-Time Employee Count	Total Employee Count	Aggregated Group	Section 4980H Transition Relief
	Yes	No				
All 12 Months	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<span style="border: 1px solid #ccc; padding: 2px;">58</span>	<span style="border: 1px solid #ccc; padding: 2px;">60</span>	<input type="checkbox"/>	<span style="border: 1px solid #ccc; padding: 2px;">[dropdown]</span> <input checked="" type="checkbox"/>
Jan	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<span style="border: 1px solid #ccc; padding: 2px;">[dropdown]</span>
Feb	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<span style="border: 1px solid #ccc; padding: 2px;">[dropdown]</span>
Mar	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<span style="border: 1px solid #ccc; padding: 2px;">[dropdown]</span>
Apr	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<span style="border: 1px solid #ccc; padding: 2px;">[dropdown]</span>
May	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<span style="border: 1px solid #ccc; padding: 2px;">[dropdown]</span>
Jun	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<span style="border: 1px solid #ccc; padding: 2px;">[dropdown]</span>

Field Name	Description
Payroll Year	This will populate based on the payroll year selected from the drop-down.
Employer Tax ID	Enter the EIN
Employer TCC	This is provided by the IRS to submit files electronically
Original Receipt ID	Enter the IRS assigned Original Receipt ID, if applicable. This will only be used if filings are rejected.
Employer Name	Enter the transit name.
Street Address	Enter the street address.
City/State/Zip	Enter the city, state, and zip.
Contact Name	Enter the name of the person who should be contacted in the event of questions.
Contact Phone/Ext	Enter the contact's phone number.
Total Forms Submitted	Enter the number of forms being submitted for the year.
Part II ALE Member Information	It is recommended to review the instructions for completing 1094-C and 1095-C to complete this section. They can be found by searching for 1095-C forms on the IRS website ( <a href="https://www.irs.gov/forms-instructions">https://www.irs.gov/forms-instructions</a> ). You will check the applicable boxes and enter the number of Total Forms ALE Member.
Part III ALE Member Information - Monthly	It is recommended to review the instructions for completing 1094-C and 1095-C to complete this section. They can be found by searching for 1095-C forms on the IRS website ( <a href="https://www.irs.gov/forms-instructions">https://www.irs.gov/forms-instructions</a> ). You will check the boxes and enter the applicable count information.

**Employee**

The first time that the ACA file is created you will need to manually enter each employee and their information. This can be done by employee so that you can enter all the information at once, or you can use the Only XXXX (Coverages, Premiums and Safe Harbor) buttons to enter all employees at once.

Select an employee using one of the options (Search Name, First Name, Employee Number).



### Affordable Care Act Setup

Payroll Year:

Search Name:

First Name:

Employee #:

Employee
Only Coverages
Create New Year
Reports
Government Entity

Delete
Only Premiums
Delete Year
Create File
Correction Search

All Years
Only Safe Harbor
Employer Setup
Other ALE Members
Update Zip Code

---

**All 12 Months**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Coverage Code:	<input type="text" value="1E"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value=""/>
Lowest Cost Premium:	<input type="text" value="103.44"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Safe Harbor Code:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value=""/>
Zip Code:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Covered Individuals    Plan Start Month:     Birth Date:     employee's Age on January 1st:      Voided     Corrected


**Covered Individuals**

Dep #	First Name	MI	Last Name	SSN	Date Of Birth	All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1	Susan		Sample	999-99-9999	3/18/1957	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Field Name	Description
Coverage Code	Select the coverage code. If the employee was covered for all 12 months, you can enter it in that column. If they were not, you must enter a coverage code in each month.
Coverage Code Green Checkmark	The coverage codes correspond to what is listed in the IRS directions for the form. If any new codes have been added by the IRS, you must update the miscellaneous code list.
Lowest Cost Premium	Enter the lowest cost premium. If the employee was covered for all 12 months, you can enter it in that column. If they were not, you must enter an amount for each month that has an eligible coverage code.
Safe Harbor Code	Select the safe harbor code (if applicable). If the employee was covered for all 12 months, you can enter it in that column. If they were not, you must enter a safe harbor code in each month.
Safe Harbor Code Green Checkmark	The safe harbor codes correspond to what is listed in the IRS directions for the form. If any new codes have been added by the IRS, you must update the miscellaneous code list.
Zip Code	Based on the coverage code selected, this data will populate if the zip code is required.
Covered Individuals	Check this box if there are covered individuals.
Plan Start Month	Enter the numeric month number that the plan started.
Birth Date	This will automatically populate with the information on the employee master.
Employees Age on January 1 <sup>st</sup>	This will automatically calculate.
Voided	Check this box if you are voiding the form.
Corrected	Check this box if you are submitting a corrected form.
Dep #	Using the drop-down, select the dependent number. Dependents must be set up in employee setup before they will show in the drop-down.
First Name, MI, Last Name, SSN and Date of Birth	This will all populate once the dependent # is selected.
Coverage Months	If the dependent was covered for all 12 months, check that box; otherwise check the box for each month they were covered.

Only Coverages

Click Only Coverages.



### Affordable Care Act Setup

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

Payroll Year:

Search Name:

First Name:


Employee #:

Coverages	All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Employee #: <input type="text" value="00100"/> <input type="text" value="Ray Sample"/>	<input checked="" type="checkbox"/>	<input type="text" value="1E"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Zip Code: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Employee #: <input type="text" value="00101"/> <input type="text" value="Martin Sample"/>	<input checked="" type="checkbox"/>	<input type="text" value="1L"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Zip Code: <input type="text" value="16803"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Employee #: <input type="text" value="00102"/> <input type="text" value="John Sample"/>	<input checked="" type="checkbox"/>	<input type="text" value="1H"/>	<input type="text" value="1H"/>	<input type="text" value="1H"/>	<input type="text" value="1H"/>	<input type="text" value="1H"/>	<input type="text" value="1H"/>	<input type="text" value="1M"/>	<input type="text" value="1M"/>	<input type="text" value="1M"/>	<input type="text" value="1M"/>	<input type="text" value="1M"/>	<input type="text" value="1M"/>
Zip Code: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="16803"/>	<input type="text" value="16803"/>	<input type="text" value="16803"/>	<input type="text" value="16803"/>	<input type="text" value="16803"/>	<input type="text" value="16803"/>
Employee #: <input type="text"/>	<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Zip Code: <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Field Name	Description
Employee #	Select the employee number from the drop-down.
Coverage Code	Select the coverage code. If the employee was covered for all 12 months, you can enter it in that column. If they were not, you must enter a coverage code in each month.
Coverage Code Green Checkmark	The coverage codes correspond to what is listed in the IRS directions for the form. If any new codes have been added by the IRS, you must update the miscellaneous code list.
Zip Code	Based on the coverage code selected, this data will populate if the zip code is required.

**Only Premiums**

Click Only Premiums.



**Affordable Care Act Setup**

Payroll Year:

Search Name:

First Name:

Employee #:

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

Premium	All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Employee #: <input type="text" value="00100"/> <input type="text" value="Ray Sample"/>	<input type="text" value="103.44"/>												
Employee #: <input type="text" value="00101"/> <input type="text" value="Martin Sample"/>	<input type="text" value="103.44"/>												
Employee #: <input type="text" value="00102"/> <input type="text" value="John Sample"/>								<input type="text" value="33.03"/>	<input type="text" value="33.03"/>	<input type="text" value="33.03"/>	<input type="text" value="33.03"/>	<input type="text" value="33.03"/>	<input type="text" value="33.03"/>
Employee #: <input type="text"/>													

Field Name	Description
Employee #	Select the employee number from the drop-down
Lowest Cost Premium	Enter the lowest cost premium. If the employee was covered for all 12 months, you can enter it in that column. If they were not, you must enter an amount for each month that has an eligible coverage code.

**Only Safe Harbor**

Click Only Safe Harbor.

### Affordable Care Act Setup

Payroll Year: 2021

Search Name:

First Name:

Employee #:

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

Safe Harbor	All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Employee #: 00100	Ray Sample	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee #: 00101	Martin Sample	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee #: 00102	John Sample	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee #: 00104	Eric Sample	<input checked="" type="checkbox"/>	2B	2B	2B	2B	2B	2B	2C	2C	2C	2C	2C
Employee #: <input type="text"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Field Name	Description
Employee #	Select the employee number from the drop-down.
Safe Harbor Code	Select the safe harbor code. If the employee was covered for all 12 months, you can enter it in that column. If they were not, you must enter a code in each month.
Safe Harbor Code Green Checkmark	The safe harbor codes correspond to what is listed in the IRS directions for the form. If any new codes have been added by the IRS, you must update the miscellaneous code list.

### Adding Covered Individuals and Plan Start Month using the "Only" options

To add covered individuals and the plan start month to an employee while entering data in Only Coverages, Only Premiums or Only Safe Harbor, double click their employee number and the employee screen will open.

### Affordable Care Act Setup

Payroll Year: 2021

Search Name:

First Name:

Employee #: 00100 | Ray Sample

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Coverage Code: 1E	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lowest Cost Premium: 103.44												
Safe Harbor Code:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Zip Code:												

Covered Individuals    Plan Start Month: 1    Birth Date: 7/29/1956    employee's Age on January 1st: 65     Voided     Corrected

Covered Individuals						All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Dep #	First Name	MI	Last Name	SSN	Date Of Birth													
1	Susan		Sample	999-99-9999	3/18/1957	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To return to the previous screen, click the Only xxx button you were on.

### Build New Year

If you have completed the initial filing tax year, you can use these directions for years two and on. If this is the first time filing the ACA from the system, please refer to the initial ACA setup directions.

Select the last payroll year that was built from Payroll Year.

**Affordable Care Act Setup**

my

Payroll Year: 2021

Search Name:

First Name:

Employee #:

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

Click Create New Year.

**Affordable Care Act Setup**

my

Payroll Year: 2021

Search Name:

First Name:

Employee #:

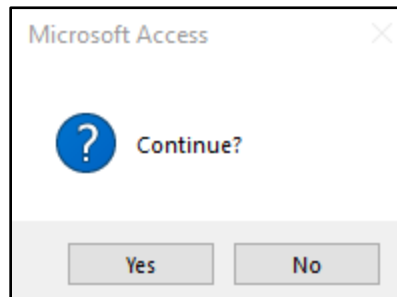
Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

New Payroll Year: 2022

Start

Select the new payroll year you are building from New Payroll Year and click **Start**.

On the following prompt click Yes to continue or no to cancel.



Click OK.



Select the new payroll year from the Payroll Year drop-down.

### Affordable Care Act Setup

Payroll Year: 2022

Search Name:

First Name:

Employee #:

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

Click Employer Setup and confirm/update data.

### Affordable Care Act Setup

Payroll Year: 2022

Search Name:

First Name:

Employee #:

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

1094-C Payroll Year: 2022  Corrected

**Part I Applicable Large Employer Member (ALE Member)**

Employer Tax ID: 123456789    Employer TCC: TZTNB    Original Receipt ID:

Employer Name: Demonstration Transit

Street Address: 123 Main Street

City/State/Zip: State College PA 16803-

Contact First Name: Josh    Middle:     Last: Sample    Suffix:

Contact Email: jsample@email.com    Contact Phone/Ext: (814) 555-1212

Total Forms Submitted:

---

**Part II ALE Member Information**

Authoritative Transmittal    Total Forms ALE Member:     Aggregated ALE Member:  Yes  No

Qualifying Offer Method     Qualifying Offer Relief     4980H Transition Relief     98% Offer Method

---

**Part III ALE Member Information - Monthly**

	Minimum Essential Coverage Offer		Full-Time Employee Count	Total Employee Count	Aggregated Group	Section 4980H Transition Relief
	Yes	No				
All 12 Months	<input checked="" type="checkbox"/>	<input type="checkbox"/>	58	60	<input type="checkbox"/>	<span style="border: 1px solid gray; padding: 2px;">v</span> <input checked="" type="checkbox"/>
Jan	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<span style="border: 1px solid gray; padding: 2px;">v</span>
Feb	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<span style="border: 1px solid gray; padding: 2px;">v</span>
Mar	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<span style="border: 1px solid gray; padding: 2px;">v</span>
Apr	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<span style="border: 1px solid gray; padding: 2px;">v</span>
May	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<span style="border: 1px solid gray; padding: 2px;">v</span>
Jun	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<span style="border: 1px solid gray; padding: 2px;">v</span>

Field Name	Description
Payroll Year	This will populate based on the payroll year selected from the drop-down.
Employer Tax ID	Enter the EIN.
Employer TCC	This is provided by the IRS to submit files electronically.
Original Receipt ID	Enter the IRS assigned Original Receipt ID, if applicable. This will only be used if filings are rejected.
Employer Name	Enter the transit name.
Street Address	Enter the street address.
City/State/Zip	Enter the city, state, and zip.
Contact Name	Enter the name of the person who should be contacted in the event of questions.

Contact Phone/Ext	Enter the contact’s phone number.
Total Forms Submitted	Enter the number of forms being submitted for the year.
Part II ALE Member Information	It is recommended to review the instructions for completing 1094-C and 1095-C to complete this section. They can be found by searching for 1095-C forms on the IRS website ( <a href="https://www.irs.gov/forms-instructions">https://www.irs.gov/forms-instructions</a> ). You will check the applicable boxes and enter the number of Total Forms ALE Member.
Part III ALE Member Information – Monthly	It is recommended to review the instructions for completing 1094-C and 1095-C to complete this section. They can be found by searching for 1095-C forms on the IRS website ( <a href="https://www.irs.gov/forms-instructions">https://www.irs.gov/forms-instructions</a> ). You will check the boxes and enter the applicable count information.

Only those employees whose payroll status is ‘Active’ at the time the new payroll year is created will be included in the New Year’s data. Employees who had monthly data entered for Coverage, Premium and Safe Harbor in the previous year will have to be edited in the New Year; all fields will be blank.

Please refer to Employee, Only Coverages, Only Premiums or Only Safe Harbor above on how to add/update the information.

### Reports

Click **Reports** to print detail reports and the 1095-C and 1095-C forms.

Check the applicable box and then click **Print**.

### Employer Detail Report

This will provide a report of the information entered on the Employer Setup. This option should **not** be used to print the 1094-C form; it should be used for documentation only.



### Demonstration

#### 1094-C Transmittal of Employer-Provided Health Insurance Offer and Coverage Information

---

Payroll Year: 2021

---

**Part I Applicable large Employer Member(ALE MEMBER)**

Tax Id (EIN): 123456789      Employer TCC: TZTNB       Corrected

Employer Name: Demonstration Transit

Street Address: 123 Main Street

City/State/Zip: State College PA 16803-

Contact Name: Josh Sample      Contact Phone/Ext: (814) 555-1212

Contact Email: jsample@email.com

---

Total Forms Submitted: 60       Authoritative Transmittal

---

**Part II ALE Member Information**

Total Forms ALE Member:      Aggregated ALE Member:  Yes  No

Qualifying Offer Method       Qualifying Offer Relief       4980H Transition Relief       98 %Offer Method

---

**Part III ALE Member Information - Monthly**

	Minimum Essential Coverage Offer		Full-Time Employer Count	Total Employee Count	Aggregated Group	Section 4980 Transition Relief
	Yes	No				
All 12 Months	<input checked="" type="checkbox"/>	<input type="checkbox"/>	58	60	<input type="checkbox"/>	<input type="checkbox"/>
Jan	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Feb	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mar	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Apr	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
May	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Jun	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Employee Detail Report

This will provide a report of the information entered for each employee. This option should not be used to print the 1095-C form; it should be used for documentation only.

### Demonstration

#### 1095-C Employer-Provided Health Insurance Offer and Coverage

---

Payroll Year: 2021

---

Employee #	Employee Name	Soc Sec #	Voided	Corrected	Covered Individuals										
00104	Eric Sample 123 Main Street State College PA 16803	***.**-9999	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
			Age January 1st: 64      Plan Start Month:												
			All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Coverage Code															
Lowest Premium															
Safe Harbor Code			2B	2B	2B	2B	2B	2B	2B	2C	2C	2C	2C	2C	2C
Zip Code															
00102	John Sample 123 Main Street State College PA 16803	***.**-9999	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
			Age January 1st: 54      Plan Start Month:												
			All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Coverage Code			1H	1H	1H	1H	1H	1H	1H	1M	1M	1M	1M	1M	1M
Lowest Premium										33.03	33.03	33.03	33.03	33.03	33.03
Safe Harbor Code															
Zip Code									16803	16803	16803	16803	16803	16803	16803
00101	Martin Sample 123 Main Street State College PA 16803	***.**-9999	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
			Age January 1st: 60      Plan Start Month:												
			All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Coverage Code			1L												
Lowest Premium			103.44												

### 1094-C Employer Report

The 1094-C Employer Report is formatted to print on pre-printed forms as prescribed by the Internal Revenue Service. Please do a test print on plain paper before printing on the actual form; print margins can vary by printer.

Demonstration Transit		123456789	
123 Main Street			
State College	PA	16803-	
Josh Sample		(814) 555-1212	
			60
			X

### 1095-C Employee Report Page 1 and 1095-C Employee Report Page 3

The 1095-C Employee Report is formatted to print on pre-printed forms as prescribed by the Internal Revenue Service. Please do a test print on plain paper before printing on the actual form; print margins can vary by printer. Page 2 will not print because it's the backside of page 1 and only contains filing directions.

Ray	Sample	999999999	Demonstration Transit	123456789
123 Main Street			123 Main Street	(814) 555-1212
State College	PA	16803	State College PA	16803-
			65	01
	1E			
	103.44			

		Ray	Sample	999999999	X
Susan	Sample	999-99-9999			X

Page three prints the employee’s name and social at the top to aid in matching forms up correctly. It will not impact the IRS filing.

**Create File**

This function allows you to submit your filings electronically to the IRS. You must have a TCC number before submitting your file. The software vendor ID will change each year; please consult the customer experience team if you have not received this information for the year you are filing.

Select the *Payroll Year* from the drop-down.


Click Create File.

Click the green checkmark (✓) to enter the following data:

Code	Value
PathToFile	C:\Users\dfilaharty\Desktop\Personal Test Environment\zDee Files\HR_ACA
SoftwareID	20A0010923
VendorContactFirstName	Ryan
VendorContactLastName	Harshbarger
VendorContactMiddleName	
VendorContactPhone	(814) 234-3394
VendorContactSuffixName	
ZipCodeCoverageCodes	1L,1M,1N,1O,1P,1Q

Field Name	Description
PathToFile	Enter the path to where the file should be exported.
SoftwareID	This will change each year. Avail will provide the ID each year through a CSB (Customer Service Bulletin) or in the Avail Newsletter.
VendorContactFirstName	Enter Vendor's first name.
VendorContactLastName	Enter Vendor's last name.
VendorContactPhone	Enter Vendor's phone number.
ZipCodeCoverageCodes	Enter zip code: 1L,1M,1N,1O,1P,1Q

Fill in the following on the Create XML Transmission File screen:



**Affordable Care Act Setup**

Employee Only Coverages Create New Year Reports Government Entity  
Delete Only Premiums Delete Year Create File Correction Search  
All Years Only Safe Harbor Employer Setup Other ALE Members Update Zip Code

Payroll Year:

Search Name:

First Name:

Employee #:

---

**Create XML Transmission File**

Path To File:

Prior Year Indicator    Transmission Type:  Original

Test File Indicator:  Production    Manifest Year:     Detail Year:

Employer TaxID:     Employer TCC:      Employer ACA Corrected

Employer Name:

**Note: IRS will send a receipt id shortly after receiving a transmission file. Please enter and update ASAP.**

Receipt ID:

Field Name	Description
Path to File	Select the path from the drop-down.
Prior Year Indicator	Check this box only if you are filing for a previous year.
Transmission Type	Select the applicable code: O - Original C - Corrections R - Replacements
Test File Indicator	Select the applicable code: P - Production T - AATS (Test Submission)
Employer TaxID	Populates based on Employer Setup.
Employer TCC	Populates based on Employer Setup.
Employer ACA Corrected	Check this box if you are submitting a corrected file.
Employer Name	Populates based on Employer Setup.
Receipt ID	If you are submitting a corrected file, enter the receipt ID provided from the original submission.

Click **Start**. There will be two files generated: a Manifest and a Request. Both files must be uploaded to the IRS.

**All Years**

This will allow you to see what years an employee has participated in the ACA.

**Affordable Care Act Setup**

Payroll Year:

Search Name:

First Name:

Employee #:  Ray Sample

2021  Covered Individuals  Voided  Corrected

2022  Covered Individuals  Voided  Corrected

2023  Covered Individuals  Voided  Corrected

Select an employee and click **All Years**. To drill into the detailed information, double click the year.

**Affordable Care Act Setup**

Payroll Year:

Search Name:

First Name:

Employee #:  Ray Sample

**All 12 Months** Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

Coverage Code:

Lowest Cost Premium:

Safe Harbor Code:

Zip Code:

Covered Individuals Plan Start Month:  Birth Date:  employee's Age on January 1st:   Voided  Corrected

**Covered Individuals**

Dep #	First Name	MI	Last Name	SSN	Date Of Birth	All 12 Months	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1	Susan		Sample	999-99-9999	3/18/1957	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Delete Year**

To delete the details for a payroll year, select the appropriate Payroll Year from the drop-down and click **Delete Year**.

**Affordable Care Act Setup**

Payroll Year:

Search Name:

First Name:

Employee #:


Buttons: Employee, Only Coverages, Create New Year, Reports, Government Entity, Delete, Only Premiums, Delete Year, Create File, Correction Search, All Years, Only Safe Harbor, Employer Setup, Other ALE Members, Update Zip Code

Microsoft Access dialog box: Delete all ACA data for 2021? Yes No

Click Yes on the prompt and the data will be deleted.

### Other ALE Members

This will allow you to enter the information for other ALE Members. Their information will show up on the 1094-C.



**Affordable Care Act Setup**

Employee Only Coverages Create New Year Reports Government Entity  
Delete Only Premiums Delete Year Create File Correction Search  
All Years Only Safe Harbor Employer Setup Other ALE Members Update Zip Code

Payroll Year: 2021

Search Name:

First Name:


Employee #:

**Other ALE Members**

Tax Id	Employer Name
987654321	Ale Member Group 1

### Government Entity

If you meet the requirements of a Designated Governmental Entity (DGE) you will want to fill in this information.



**Affordable Care Act Setup**

Employee Only Coverages Create New Year Reports Government Entity  
Delete Only Premiums Delete Year Create File Correction Search  
All Years Only Safe Harbor Employer Setup Other ALE Members Update Zip Code

Payroll Year: 2021

Search Name:

First Name:

Employee #:

**Government Entity**

Employer Tax Id:

Employer Name:

Street Address:


City/Stated/Zip:

Contact First Name:  Middle:  Last:  Suffix:

Contact Phone:

### Correction Search

This will allow you to search for corrections. When you click Correction Search this form will appear:



**Affordable Care Act Setup**

Employee Only Coverages Create New Year Reports Government Entity  
Delete Only Premiums Delete Year Create File Correction Search  
All Years Only Safe Harbor Employer Setup Other ALE Members Update Zip Code

Payroll Year: 2021

Search Name:


First Name:

Employee #:  Local Tax Flat Amount Employee

Receipt Id	Sub #	Rec #	Emp #	First Name	Middle Name	Last Name	Soc Sec #
	1	1	00143	Joseph		Doe	99999998
	1	2	00145	Matthew		Doe	99999998
	1	3	00140	Amanda		Employee	99999998
	1	4	00137	David		Employee	99999998
	1	5	00133	John		Employee	99999998
	1	6	00131	Joseph		Employee	99999998
	1	8	00144	Matthew		Employee	99999998
	1	9	00106	Robin		Employee	99999998
	1	10	00151	Sample	MN	Employee	99999998
	1	11	00129	Alan		Sample	99999998
	1	12	00125	Amanda		Sample	99999998
	1	13	00121	Andrew		Sample	99999998
	1	14	00146	Austin		Sample	99999998
	1	15	00109	Brenda		Sample	99999998
	1	16	00134	Cory		Sample	99999998
	1	17	00115	Curtis		Sample	99999998
	1	18	00120	Daniel		Sample	99999998
	1	19	00114	Darla		Sample	99999998
	1	20	00103	David		Sample	99999998
	1	21	00148	Dean		Sample	99999998

Record: 1 of 53 | No Filter | Search

If the Receipt ID field is blank, it was the original submission. If there are receipt IDs filled in, then correction files were submitted. You can double click in the receipt ID field to open the employee information.



### Affordable Care Act Setup

Employee	Only Coverages	Create New Year	Reports	Government Entity
Delete	Only Premiums	Delete Year	Create File	Correction Search
All Years	Only Safe Harbor	Employer Setup	Other ALE Members	Update Zip Code

Payroll Year: 2021

Search Name:

First Name:

Employee #: 00152  Local Tax Flat Amount Employee

Receipt Id	Sub #	Rec #	Emp #	First Name	Middle Name	Last Name	Soc Sec #
	1	39	00139	Matthew		Sample	999999998
	1	40	00116	Michelle		Sample	999999998
	1	43	00100	Ray	J	Sample	999999998
	1	44	00113	Robert		Sample	999999998
	1	45	00136	Robin		Sample	999999998
	1	47	00112	Sharon		Sample	999999998
	1	48	00149	Steven		Sample	999999998
	1	49	00147	Thomas		Sample	999999998
	1	50	00117	Timothy		Sample	999999998
	1	51	00123	Todd		Sample	999999998
	1	52	00141	Wade		Sample	999999998
	1	53	00142	Wendy		Sample	999999998
Receipt2	1	7	00152	Local Tax	Flat Amount	Employee	999999998
Receipt2	1	23	00130	Edward		Sample	999999998
Receipt2	1	33	00127	Joseph		Sample	999999998
Receipt2	1	35	00118	Kim		Sample	999999998
Receipt2	1	41	00124	Pamela		Sample	999999998
Receipt2	1	42	00126	Philip		Sample	999999998
Receipt2	1	46	00119	Scott		Sample	999999998

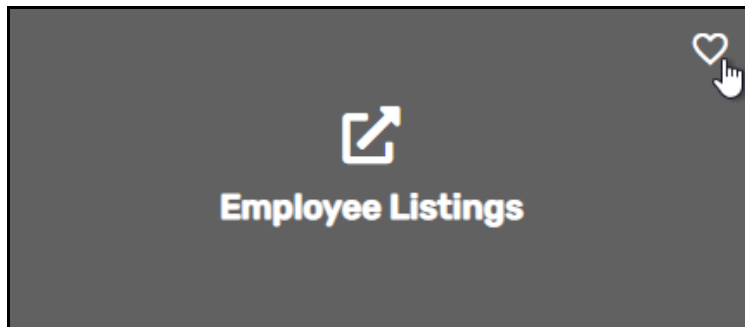
Record: 1 of 53  No Filter Search

The Receipt ID is generated by using and updating the Receipt ID on Create File.

### Update Zip Code

When the 2020 ACA information was filed, new requirements to report the employee’s age as of 1/1 of the reporting year, and the employee’s zip code were introduced. The zip code is specific to coverage codes. To update the employees’ zip codes from previous years, click the **Update Zip Code** and the current zip code will populate for any employees who may have moved. Miscellaneous Codes must be created prior to using this process.


### Employee Listings Card



This menu contains the more commonly used HR reports available in the system.

### Employee Listings

1	Employees by Birthday	?
2	Employees by Department	?
3	Employees by Job Class, Department	?
4	Employee Summary by EEO Code	?
5	Employees by Department, Full Time Date	?
6	Employees by Status Code, Department	?
7	Employees by Department, Seniority Number, Seniority	?
8	Employees by Union	?
9	Employees by Pay Rate	?
10	Employees by Department, Grade, Step	?
11	Employees by Department, Last Pay Rate Increase Date	?
12	More Listings	?
16	Return To Previous Menu	?



### Employee Listings

1	Inactive Employees by Department, Termination Date	?
2	Employees by Name	?
3	Employees by Seniority Number	?
4	Union Seniority List	?
16	Return To Previous Menu	?




### Modify / Add Misc List Codes

Module:

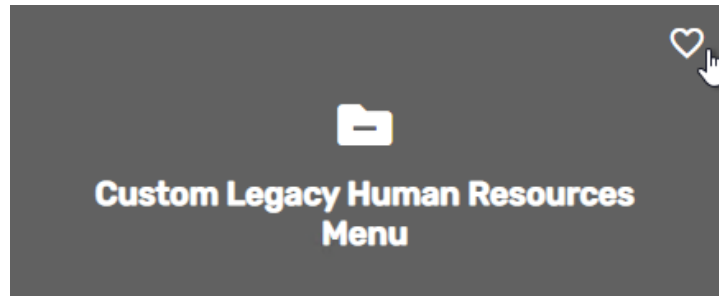
Type:

Code	Value
PathToFile	\\vavailsqllv01\UserFolders\UserFolders\df\laharty\Clients\Shortcuts\ACA
SoftwareId	20A0010923
VendorContactFirstName	Ryan
VendorContactLastName	Harshbarger
VendorContactPhone	814-234-3394
ZipCodeCoverageCodes	1L,1M,1N,1O,1P,1Q

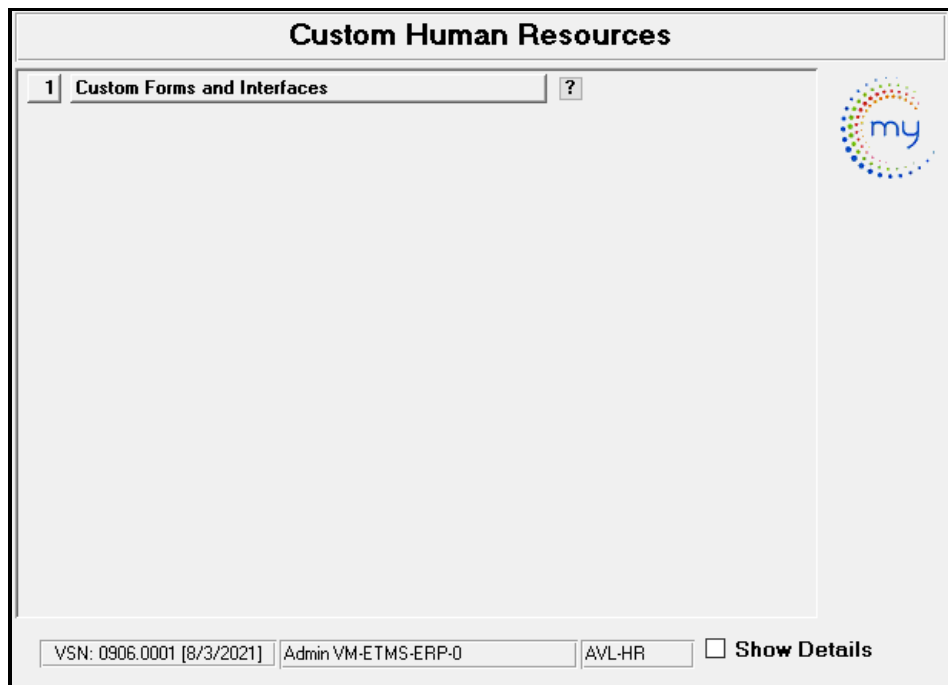




### Custom Legacy Human Resources Menu Card

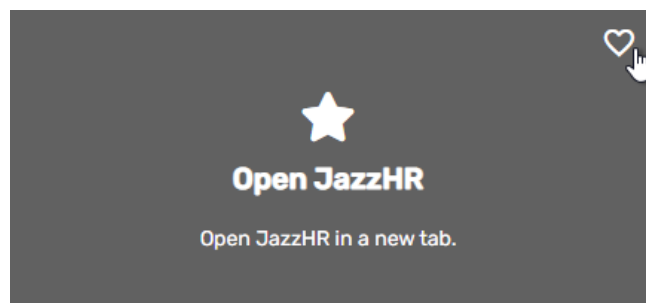


This card is used for custom interfaces if your transit uses any.

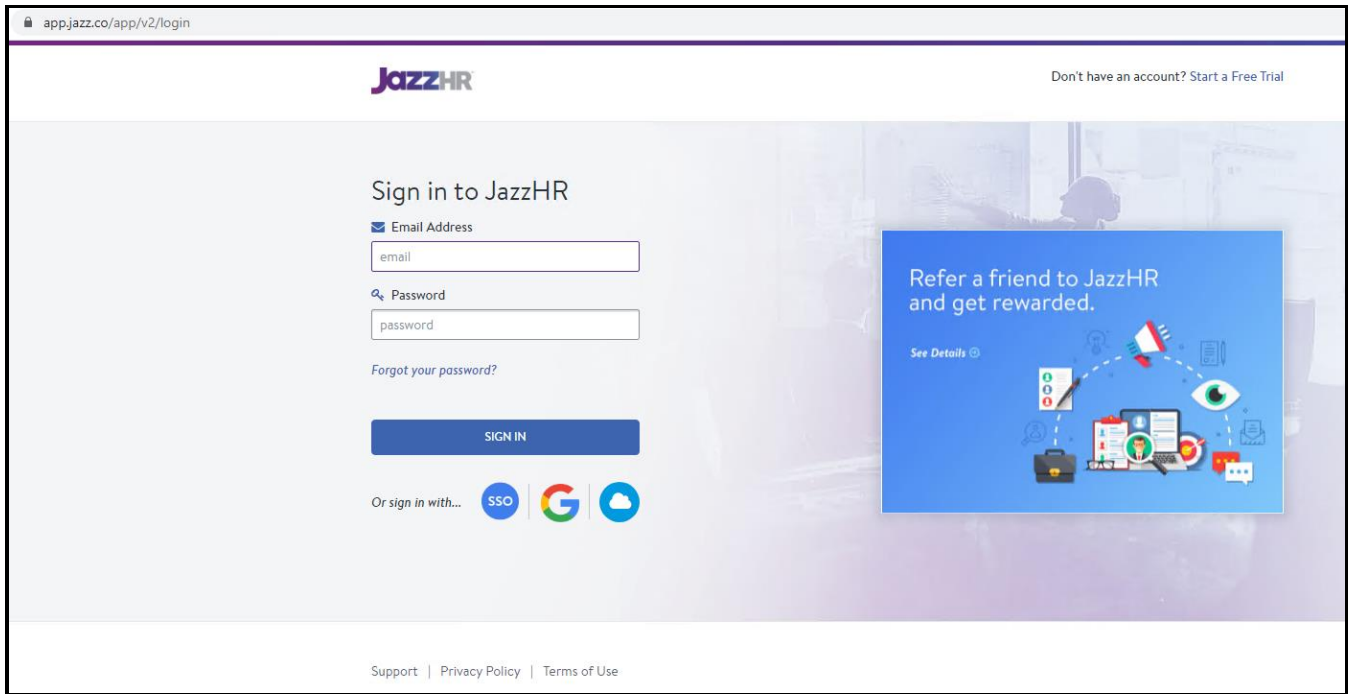


### Jazz HR Card

Click the Open JazzHR card.

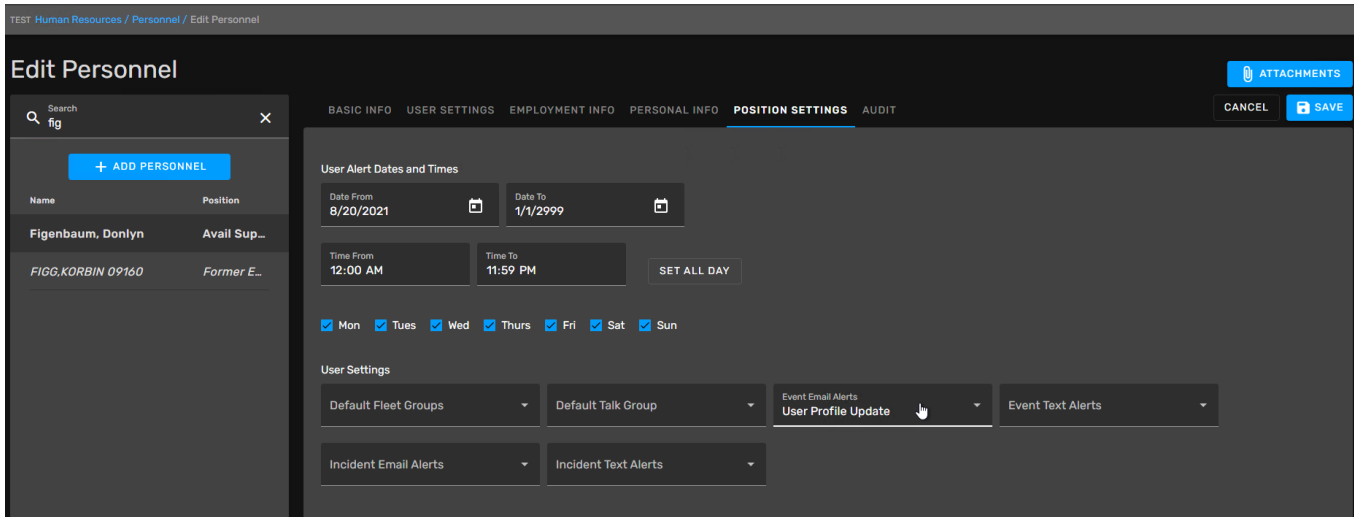


This will prompt you into signing into your JazzHR account using your email and password set up with JazzHR.

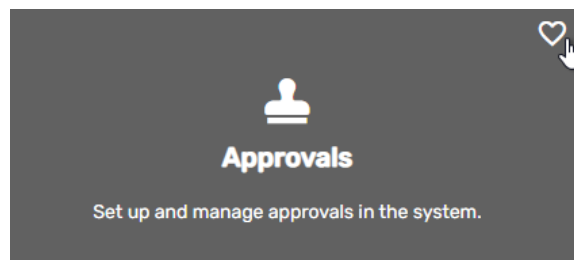


## Approvals Card

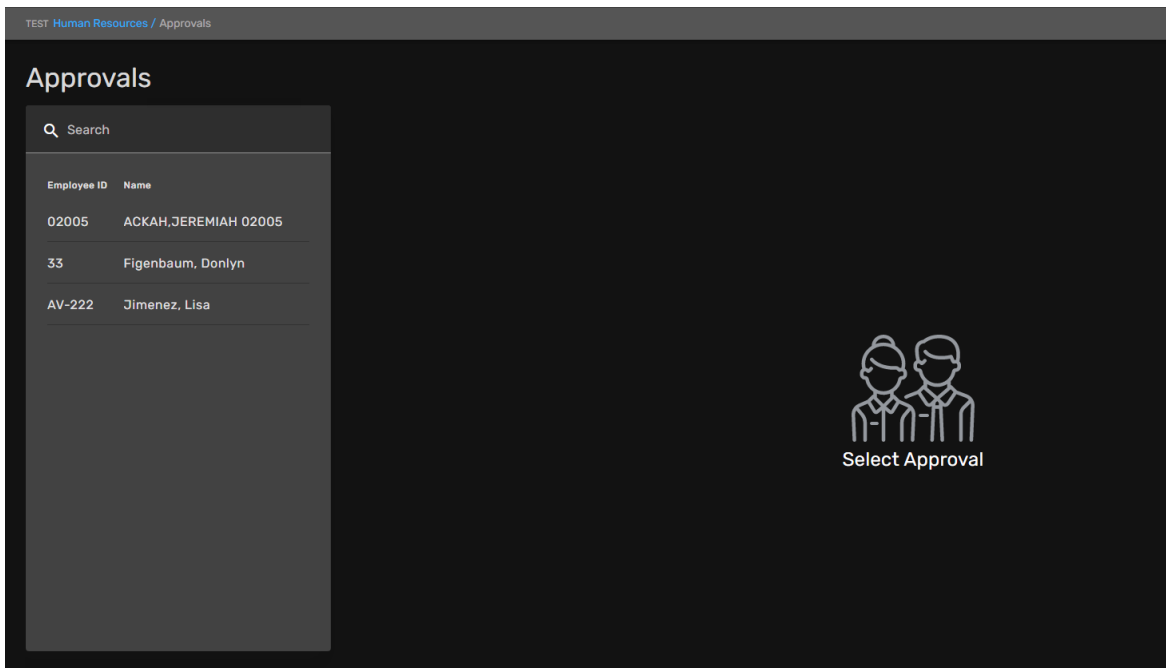
To receive alerts that a user profile has been changed, the HR personnel approving these changes will need to pick the User Profile Update in the Event Email/Text Alerts drop-down under the Personnel Card/Position Settings tab.



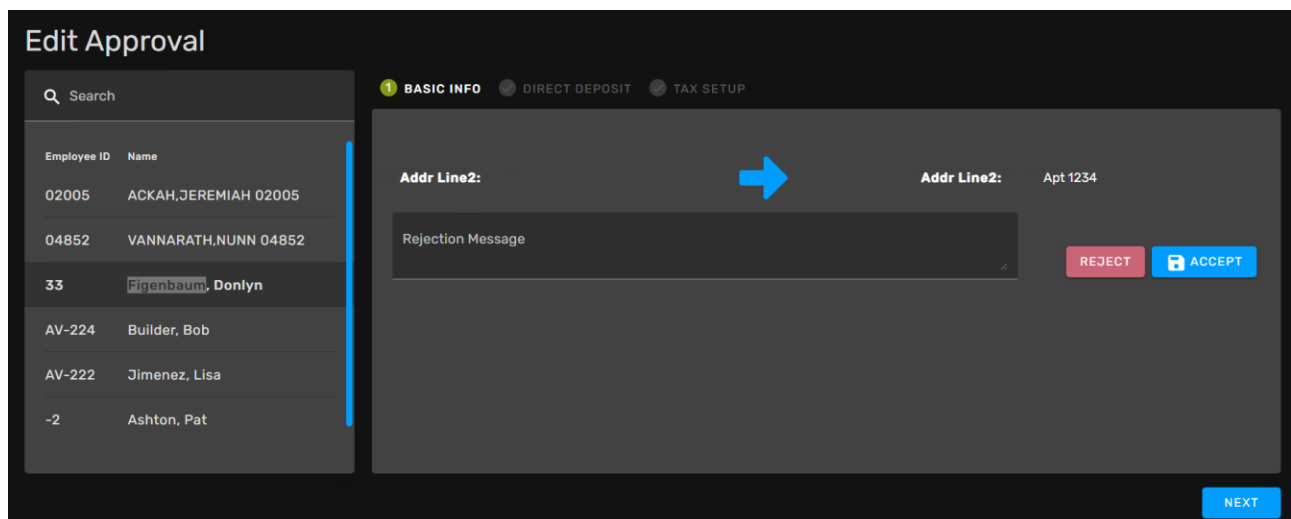
Click the Approvals Card



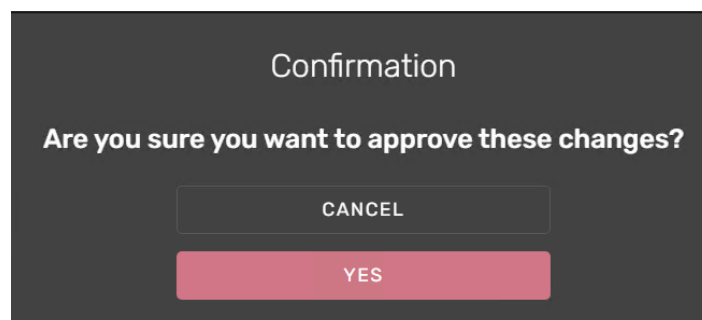
This screen shows employees that changed a field in their profile and waiting for HR approval.



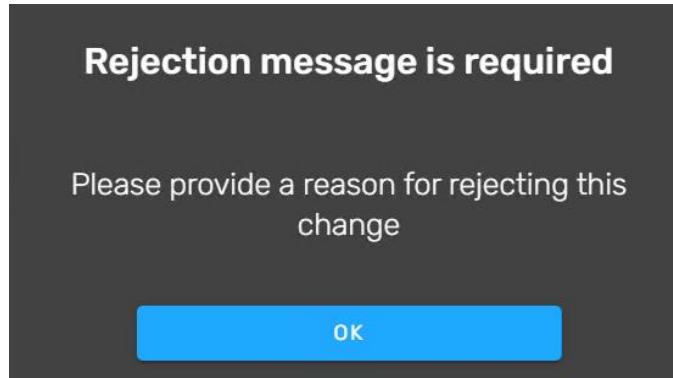
Click an employee from the list on the left. The changes that were made will show before and after. To reject, enter a reaction message and click the Reject button. The employee will receive a confirmation email that it was rejected, you can also add a message of why the change was rejected in the rejection message field. To approve click the Accept button and the employee will receive a confirmation email that their changes were approved.



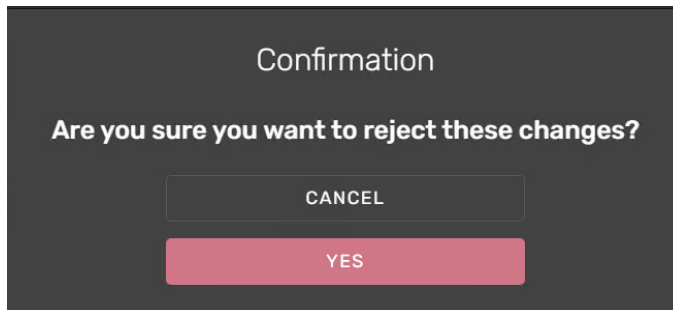
Click Approve and a confirmation will pop up. Click Yes to accept and No to cancel.



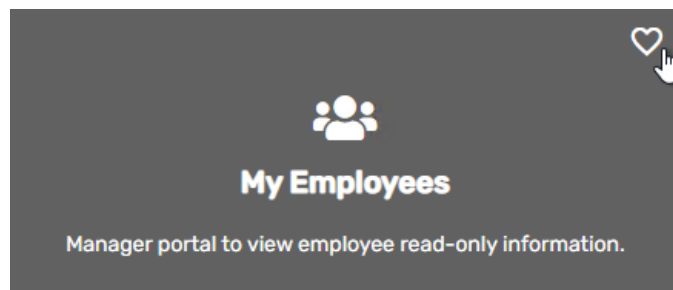
Click Reject and you would receive this message if you forgot to enter a rejection message as it is required.



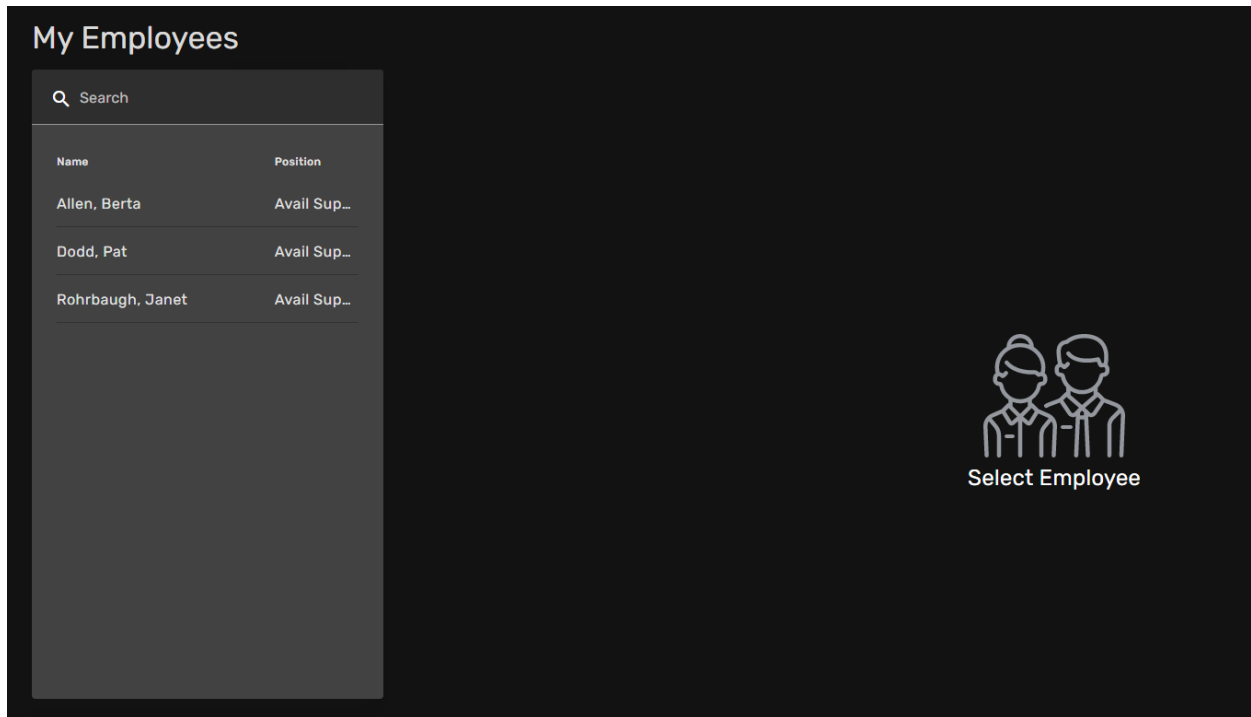
If you entered your rejection message and clicked reject, you will receive this confirmation popup. Click Yes to accept and No to cancel.



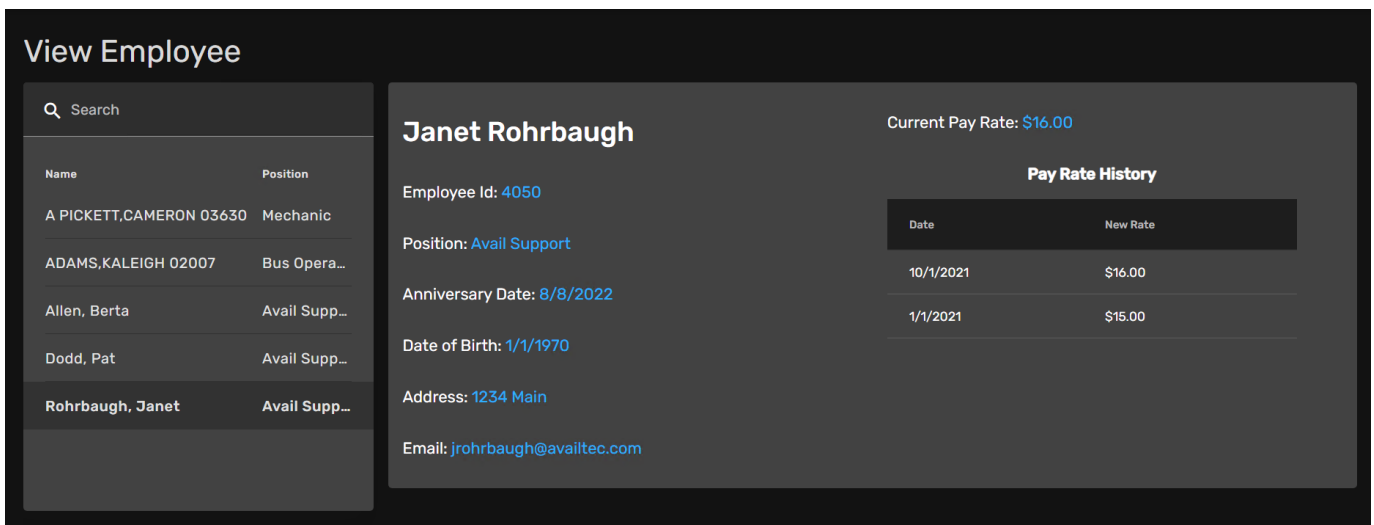
## My Employees Card



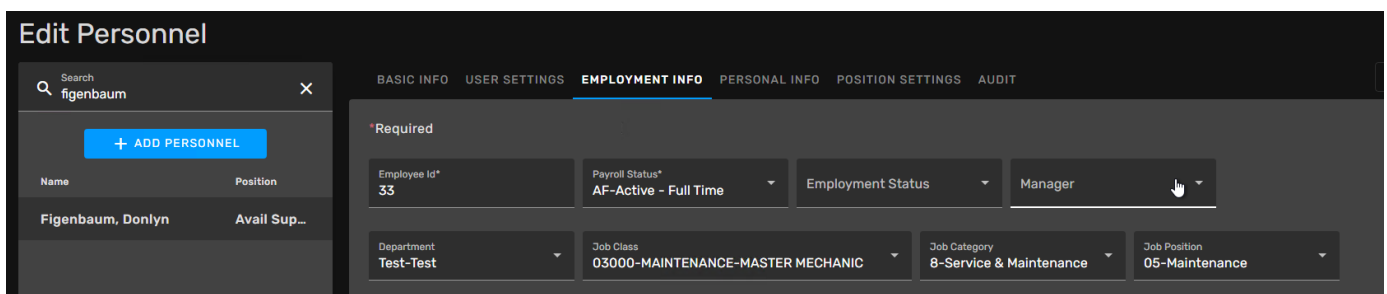
This is a manager view, and no changes can be made. It contains read-only information. It will show all employees assigned to this manager.



Click on Name of employee to view information.



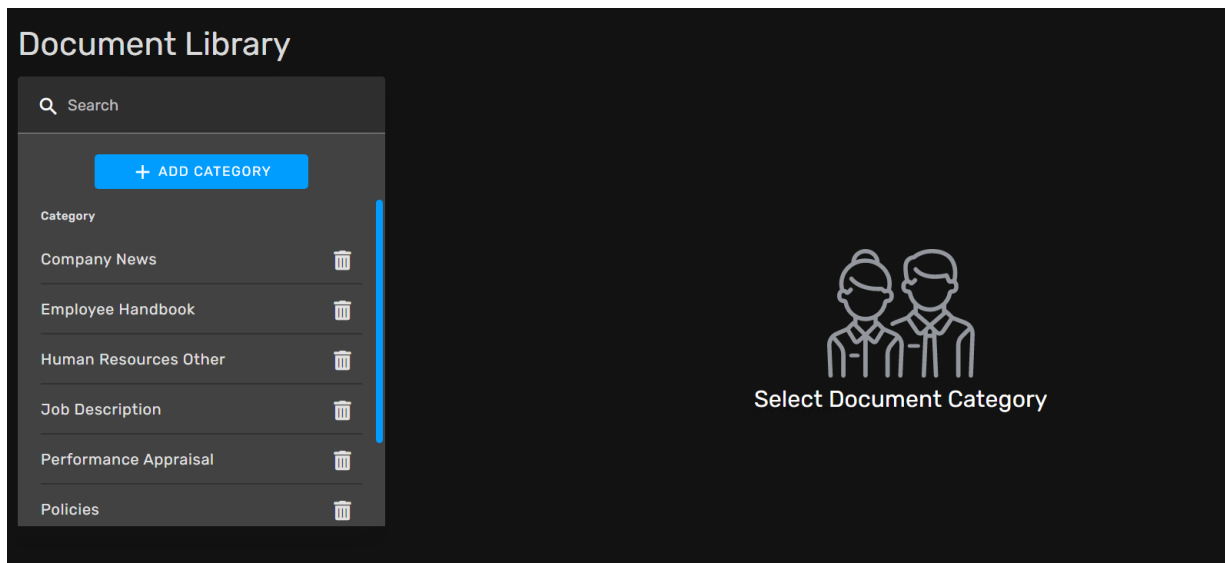
NOTE: Managers are assigned to an employee from the manager drop-down in the Personnel Card/Employment Info Tab.



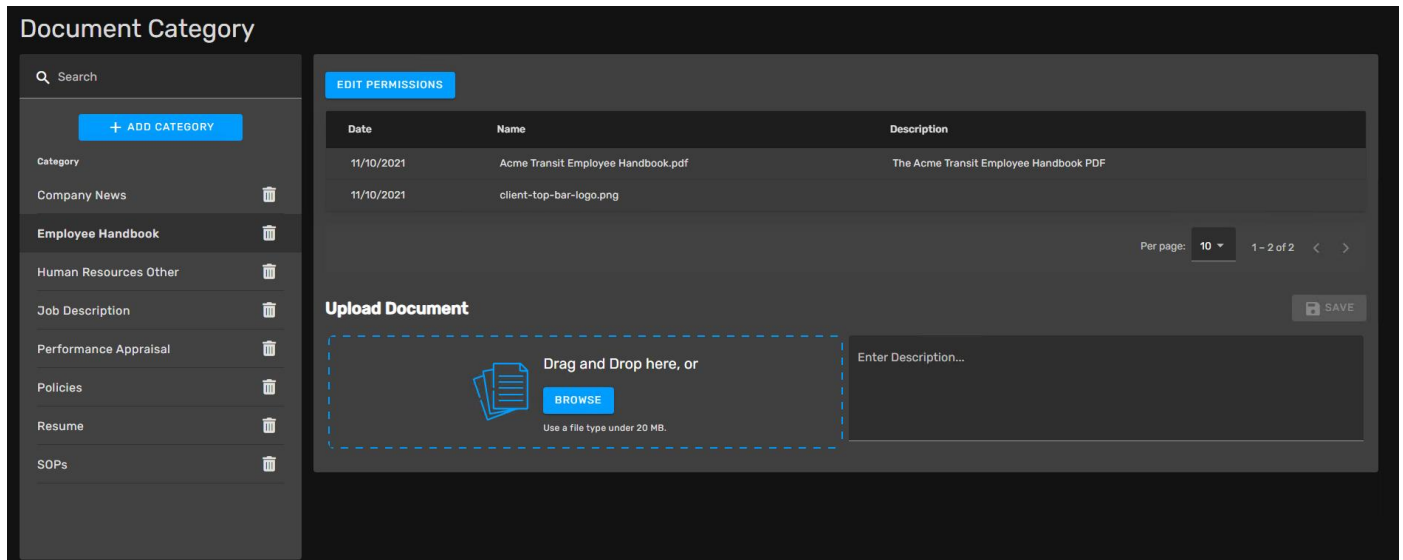
# Document Library Card



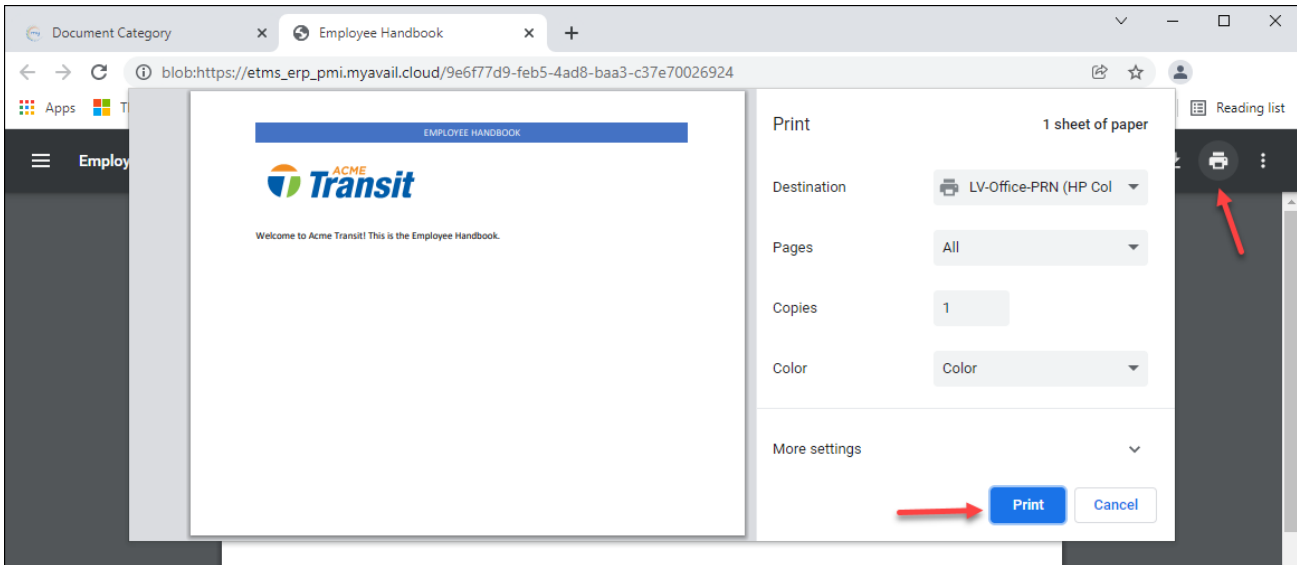
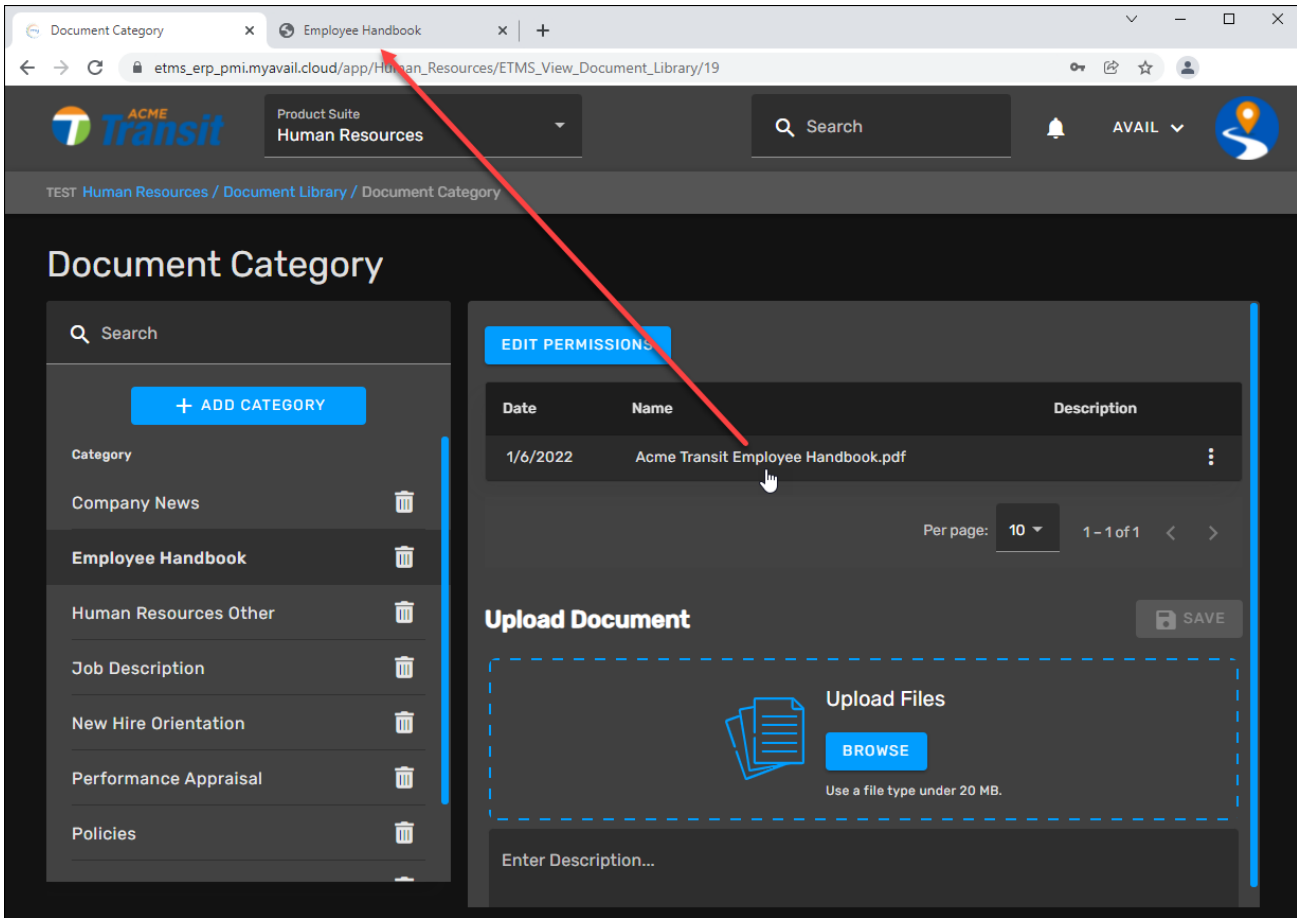
The Document Library card can be used to store some documents and information regarding company policies, news, SOPs, Employee Handbook, etc.



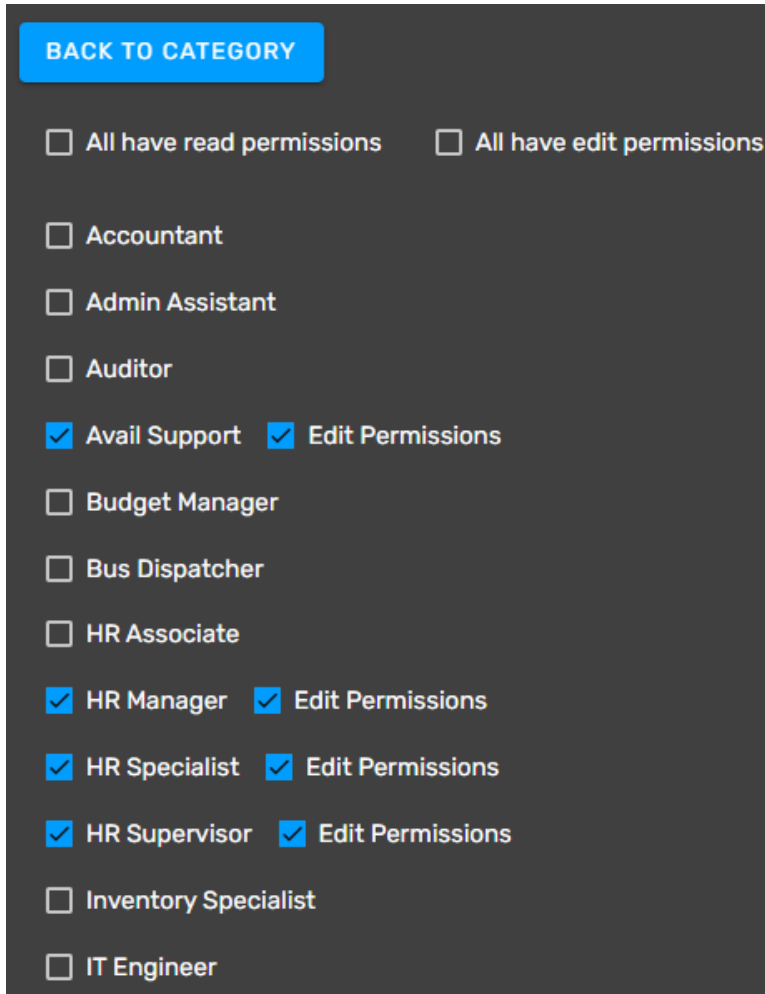
Under each of these categories the user can Upload or Search for necessary documents. If the user has editing permissions, they can delete old and/or upload a new document by Dragging and Dropping in the field or Browsing through the folders.



To print a document, click on a document attached and it should open in a separate tab where clicking Print will print the document.



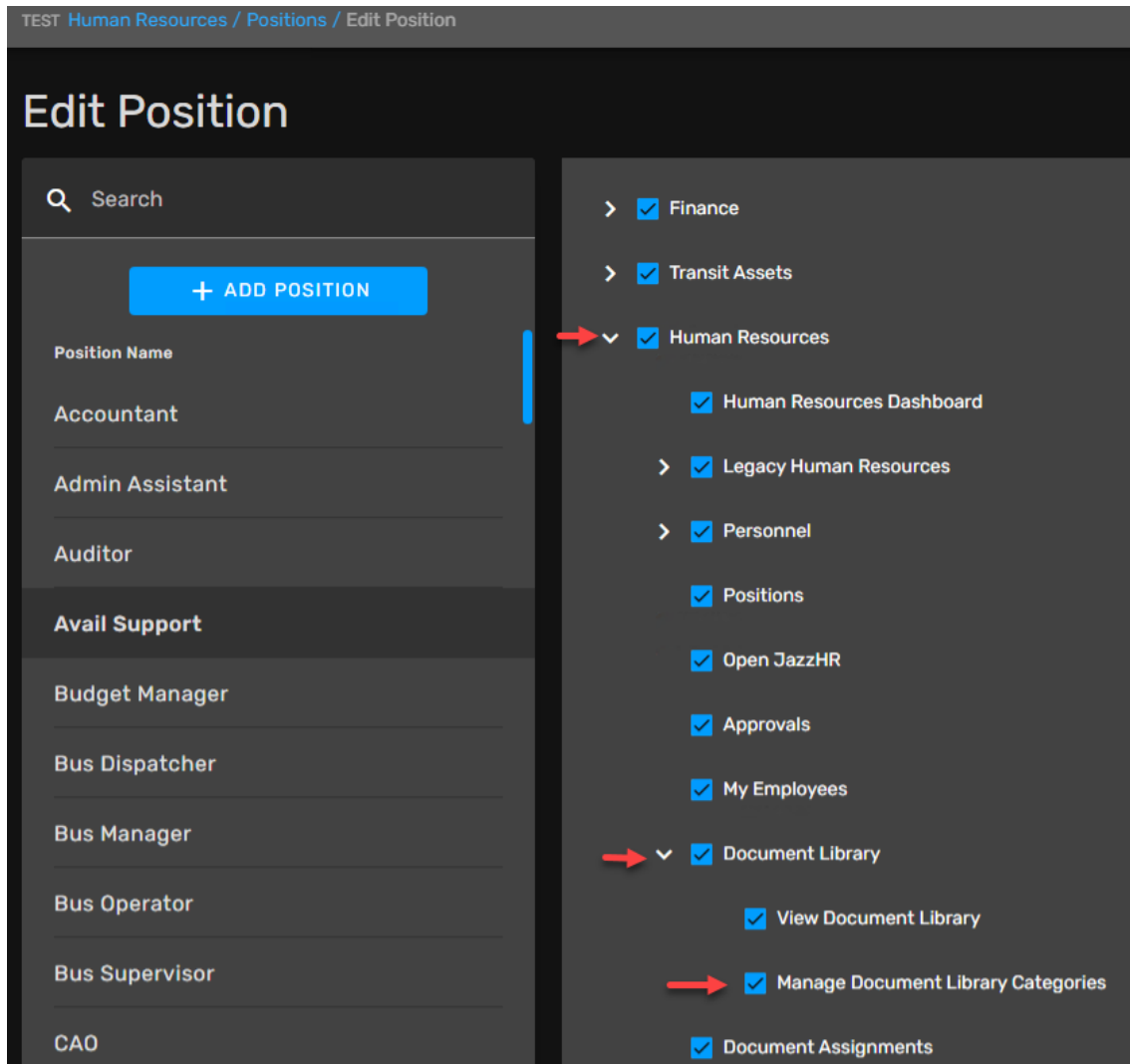
The Edit Permissions button will be visible only for the positions that were given this permission. Usually it's either Admin or HR positions. Clicking on this button will show the Admin the list of positions that they can grant Editing permissions to.



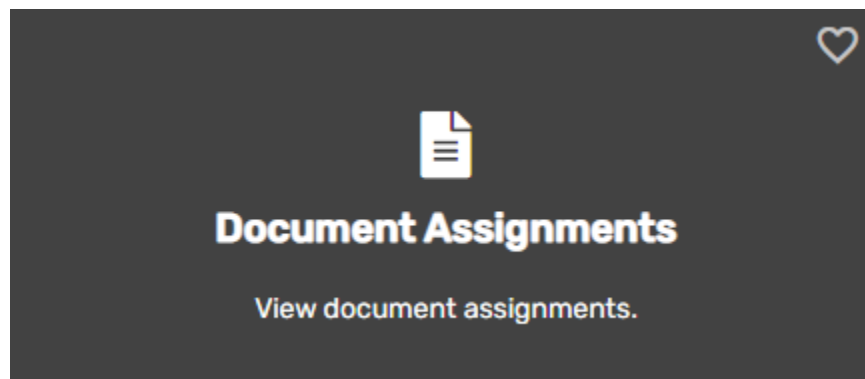
The ability to add and delete categories themselves comes from the permission on the position called Manage Document Library Categories, that can be accessed from the Positions Card, choose the position and under the functions tab, click the arrow on Human Resources, click arrow on Document Library, click Manage Document Library Categories.

Human Resources /Positions /Edit Position





## Document Assignments Card



Document Assignments card is where HR can assign documents to recipients to acknowledge.

Date Created	Recipient	Assignment Title	Document Name	Due	Status
1/19/2022	14 Recipients	Avail	IT Consultant.docx	1/20/2022	14 Pending, 0 Returned
12/22/2021	Lisa Jimenez - AV-222	Test1	Quality-Engineer-Resume.pdf	2/1/2022	1 Pending, 0 Returned
12/22/2021	14 Recipients	Job Description Review	Engineer L.docx	No Due Date	14 Pending, 0 Returned
12/22/2021	392 Recipients	All Recipients Test	Acme Transit Employee Handbook.pdf	12/31/2021	392 Pending, 0 Returned
12/20/2021	13 Recipients	Review Resume	Financial-Analyst-Resume.pdf	No Due Date	13 Pending, 0 Returned
12/20/2021	13 Recipients	Employee Handbook	Acme Transit Employee Handbook.pdf	12/31/2021	12 Pending, 1 Returned



Click ADD ASSIGNMENT to assign an employee a document that needs to be acknowledged.

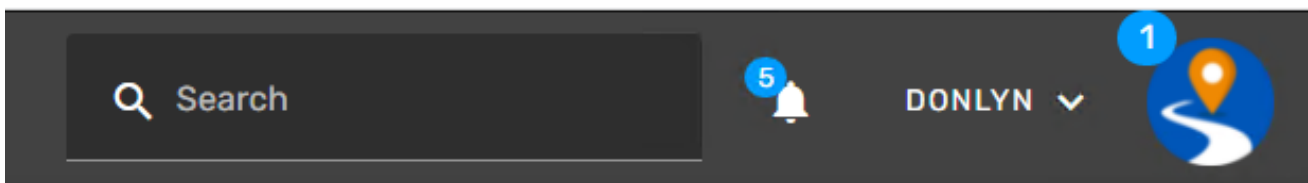
Assignment Title, Due Date, Recipients, Document Category and Document are required fields. Click SAVE and the recipient will receive notice that an assignment was assigned to them.

At least one recipient needs to be selected.

Assignment Title\* Due Date Departments Unions Positions

All Recipients Recipients Document Category Document\* Instructions

When documents have been assigned to a user from Document Assignments, the bell icon at the top right of the screen will indicate to the user that they have assignments for them to review or acknowledge.




When they click the bell, they will be able to see their list of assigned documents.

### My Assignments

Q Search

Assignment	Date Assigned
Avail	1/19/2022
Job Description Review	12/22/2021
All Recipients Test	12/22/2021
Review Resume	12/20/2021
Employee Handbook	12/20/2021



Select Document

Clicking on an assignment will allow the user to view, download, or print the document. They will need to enter in their PIN to verify they have acknowledged the assignment given.

\*If they do not have a PIN set up they will need to go to their profile and set one up.

### My Assignments

Q Search

Assignment	Date Assigned
Avail	1/19/2022
Job Description Review	12/22/2021
All Recipients Test	12/22/2021
Review Resume	12/20/2021
Employee Handbook	12/20/2021

#### Employee Handbook

Sent 12/20/2021 Due 12/31/2021

### Acme Transit Employee Handbook.pdf

Please read the assigned document and then enter your PIN to verify you have read the assigned document.

Once the PIN is entered, click ACKNOWLEDGE.

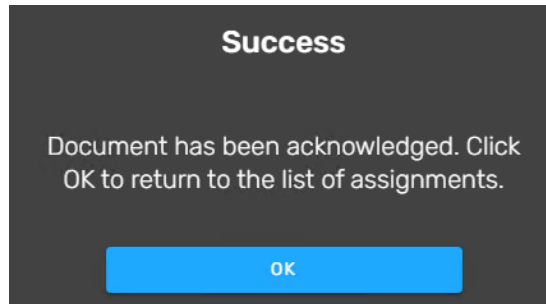
### Employee Handbook

Sent 12/20/2021 Due 12/31/2021

### Acme Transit Employee Handbook.pdf

Please read the assigned document and then enter your PIN to verify you have read the assigned document.

They will receive a Success popup, click OK.



It will return them to the My Assignments page and the assignment will no longer be on their list.

