

BENEFITS POLICY CONVERSION LETTER INSTRUCTIONS

Go to **ZBNF002 - Benefits Policy Conversion Letter** under **KHRIS Transactions**

Reporting Period should show **All**

Under **Insurance Coordinator Name**, enter **your** name

Under **Insurance Coordinator Title**, enter **your job** title

Click on **Delta File**

Changed-on Date From 10/01/2011 (example)

Changed on Date To 10/07/2011 (example)

Note: This process should take place **every Friday** of the week (example on **Friday 10/07/11** you are using **Changed-on Date From 10/01/2011** to **Changed-On Date To 10/07/2011**). This will pick up anyone that has termed during the week. In turn, the conversion letter will be mailed in a timely manner. ****The employee only has **31 days** to convert their conversion to an individual whole life plan.

Click **Search Help** tab

Welcome

KHRIS Self-Service Center

Detailed Navigation

- Welcome
- KHRIS Processes
 - KHRIS Transactions
 - HRBEN0001 - Enrollment
 - HRBEN0003 - Participation Monitor
 - HRBEN0006 - Plan and Participation Overview
 - HRBEN0014 - Termination of Participation
 - HRBEN0015 - Confirmation Form
 - HRBEN0073 - Health Plan Costs
 - HRBEN0074 - Insurance Plan Costs
 - HRBEN0078 - FSA Contributions
 - PA20 - Display HR Master Data
 - PA30 - Maintain HR Master Data
 - PA40 - Personnel Actions
 - ZAU_SSN - Social Security Search
 - ZBNF002 - Benefits Policy Conversion Letter**

Benefits Policy Conversion Letter

Menu Save as Variant... Back Exit Cancel System Execute Sort Order Selection Fields Dynamic Selections OrgStructure Search Help

Period

Reporting Period All

Selection Criteria

Personnel Number
Employment Status
Personnel area
Personnel subarea
Employee group
Employee subgroup

Insurance Coordinator Name JOHN DOE
Insurance Coordinator Title INSURANCE COORDINATOR

Full File
 Delta File

Changed-On Date From 10/01/2011 Changed-On Date To 10/07/2011

Click "K" Organizational Assignment

Click Green Check

Welcome

Benefits Policy Conversion Letter

Menu | Save as Variant... | Back | Exit | Cancel | System | Execute | Sort Order | Selection Fields | Dynamic Selections | OrgStructure | Search Help

Period
Reporting Period: All

Selection Criteria
Personnel Number: []
Employment Status: []
Personnel area: []
Personnel subarea: []
Employee group: []
Employee subgroup: []

Insurance Coordinator Name: JOHN DOE
Insurance Coordinator Title: INSURANCE COORDINATOR

Changed-On Date From: 10/01/2011 | Changed-On Date To: 10/07/2011

Full File
 Delta File

Restrict Value Range (1)
HKy Short text
A Ownership matchcode (non applicable)
B PDC error indicator
C Personnel ID Number
D Part-time employees (D)
E Buyer
F Construction industry - organizational assignment
G Date of birth
H Sickness cert data (A)
I IC number
J Last name - first name - birth name
K Organizational assignment
L Time Data Administrator
M Schedules
N Last name - First name
O HR Master Record: Infotype 0302 (Additional Actions)
P Last name - First name (KR)
Person ID
Q Constituent Services Number (NL)
R Employee's application number
S Personnel numbers with trip data by organiz. assignment
T Personnel numbers with trip data
U System user name
V Person in charge of sales
Last name - First name - Middle name
More than 25 input options

Click Matchcode beside Organizational Unit

Click Green Check

Welcome

Benefits Policy Conversion Letter

Menu | Save as Variant... | Back | Exit | Cancel | System | Execute | Sort Order | Selection Fields | Dynamic Selections | OrgStructure | Search Help

Period
Reporting Period: All

Selection Criteria
Personnel Number: []
Employment Status: []
Personnel area: []
Personnel subarea: []
Employee group: []
Employee subgroup: []

Insurance Coordinator Name: JOHN DOE
Insurance Coordinator Title: INSURANCE COORDINATOR

Changed-On Date From: 10/01/2011 | Changed-On Date To: 10/07/2011

Full File
 Delta File

Restrict Value Range
Restrictions
Personnel area: []
Personnel subarea: []
Employee group: []
Employee subgroup: []
Payroll area: []
Company Code: []
Cost Center: []
Organizational unit: []
Organizational key: []
Administrator group: []
Time administrator: []
Last name: []
First name: []

Pop Up Box will appear for you to select your **Organizational Unit**

Double Click on your **Organizational Unit**, the **Org Unit #** will populate in the box below.

The screenshot shows the KHRIS Self-Service Center interface. The main window is titled "Benefits Policy Conversion Letter". On the left is a "Detailed Navigation" menu with "ZBNF002 - Benefits Policy Conversion Letter" highlighted. The main area displays a table of search results for "Organizational Unit (1)".

Language Key	Org.unit	Start Date	End Date	Org.Unit Short Text
EN	10000001	01/01/1900	12/31/9999	Kentucky Human Resources
EN	10006001	01/01/1900	12/31/9999	Adair County Bd of Ed
EN	10006002	01/01/1900	12/31/9999	Allen County Bd of Ed
EN	10006003	01/01/1900	12/31/9999	Anchorage Independent
EN	10006004	01/01/1900	12/31/9999	Anderson County Bd of Ed
EN	10006005	01/01/1900	12/31/9999	Ashland Independent
EN	10006006	01/01/1900	12/31/9999	Augusta Independent
EN	10006007	01/01/1900	12/31/9999	Ballard County Bd of Ed
EN	10006008	01/01/1900	12/31/9999	Barbourville Independent
EN	10006009	01/01/1900	12/31/9999	Bardstown Independent
EN	10006010	01/01/1900	12/31/9999	Barren County Bd of Ed
EN	10006011	01/01/1900	12/31/9999	Bath County Bd of Ed
EN	10006012	01/01/1900	12/31/9999	Beechwood Independent
EN	10006013	01/01/1900	12/31/9999	Bell County Bd of Ed
EN	10006014	01/01/1900	12/31/9999	Belleuve Independent
EN	10006015	01/01/1900	12/31/9999	Berea Independent
EN	10006016	01/01/1900	12/31/9999	Boone County Bd of Ed
EN	10006017	01/01/1900	12/31/9999	Bourbon County Bd of Ed
EN	10006018	01/01/1900	12/31/9999	Bowling Green Independent
EN	10006019	01/01/1900	12/31/9999	Boyd County Bd of Ed
EN	10006020	01/01/1900	12/31/9999	Boyle County Bd of Ed
EN	10006021	01/01/1900	12/31/9999	Bracken County Bd of Ed
EN	10006022	01/01/1900	12/31/9999	Breathitt County Bd of Ed

Below the table is a "Restrictions" dialog box. The "Organizational unit" field is highlighted with a red box and a blue arrow points to it. Other fields include Personnel area, Personnel subarea, Employee group, Employee subgroup, Payroll area, Company Code, Cost Center, Organizational key, Administrator group, Time administrator, Last name, and First name.

Example

This screenshot shows the same application as the previous one, but with the "Restrictions" dialog box open and the "Organizational unit" field populated with the value "10006001". A blue arrow points to the populated field. The "Green Check" icon in the bottom left of the dialog box is also highlighted with a blue arrow.

Click **Green Check**

Click Execute Button

Welcome

KHRIS
Self-Service Center

Benefits Policy Conversion Letter

Menu | Save as Variant... | Back | Exit | Cancel | System | **Execute** | Sort Order | Selection Fields | Dynamic Selections | OrgStructure | Search Help K (1 Active)

Period
Reporting Period: All

Selection Criteria

Personnel Number		
Employment Status		
Personnel area		
Personnel subarea		
Employee group		
Employee subgroup		

Insurance Coordinator Name: JOHN DOE
Insurance Coordinator Title: INSURANCE COORDINATOR

Full File
 Delta File

Changed-On Date From: 10/01/2011 | Changed-On Date To: 10/07/2011

After you click Execute, the following box will pop up. You will need to change from **Output Device LOCL** to **ZPDF**

Click Print

Welcome

KHRIS
Self-Service Center

SAP

Menu | System

Print

Output Device: **ZPDF**

Frontend Printer:

Spool Request

Name	PBFORM LOCL WTM0009
Cover Page Text	
Authorization	

Spool Control

Print Immediately
 Delete After Output
 New Spool Request
 Close Spool Request

Spool Retention Per.: 8 Day(s)
Storage Mode: Print only

Number of Copies

Number of Copies: 1

Cover Page Settings

SAP Cover Page: Do Not Print
Recipient(s):
Department:

Print | Print Preview

This is an **example** of what the **Conversion Letter** to be mailed to the employee will look like.

10/21/2011



Re: Group Life Insurance Conversion Rights

Termination Date of Employment:	08/31/2011
Basic Life and AD&D	End date : 08/31/2011
Optional Life \$10,000 >= 60	End date : 08/31/2011
Dependent Life Plan A	End date : 08/31/2011

Dear [REDACTED]:

You are receiving this letter to inform you of your Conversion Rights for the State Paid Life Insurance coverage that you were provided while covered under the Commonwealth of Kentucky plan.

The life insurance policy that you had can be continued after your employment has terminated providing your required contributions are current. The policy includes the free basic coverage and/or any additional policy that you may had with the Commonwealth. No evidence of insurability will be required to convert your life insurance coverage. However, you only have 31 days from the termination of your insurance to convert your coverage to an individual whole life policy with the insurance carrier.

The current policy with the Commonwealth provides you with a term life insurance policy at group rates. The conversion policy rates will be higher than your group rates because the conversion rates will be based on your age at the time employment ends and a whole life insurance conversion policy.

If you are interested in converting your state paid life insurance coverage to an individual whole life policy with the carrier, you may visit the Personnel Cabinet's Group Life Insurance website at <http://personnel.ky.gov/emprel/gli/> for a calculation table or contact their office direct for a policy rate at 502-564-4774 or 800-267-8352.

Sincerely,
JOHN DOE
INSURANCE COORDINATOR

NOTE: If you process a term and would like to generate a letter immediately and mail the same day, you may do this using the **below** example and changing the **Reporting Period** to **Today** by using the **drop down box** and include an **individual Personnel Number** instead of running it wide open. Also, change the file from **Delta File** to **Full File**.

Click **Execute** button

Welcome

KHRIS
Self-Service Center

Detailed Navigation

- Welcome
- KHRIS Processes
- KHRIS Transactions
 - HRBEN0001 - Enrollment
 - HRBEN0003 - Participation Monitor
 - HRBEN0006 - Plan and Participation Overview
 - HRBEN0014 - Termination of Participation
 - HRBEN0015 - Confirmation Form
 - HRBEN0073 - Health Plan Costs
 - HRBEN0074 - Insurance Plan Costs
 - HRBEN0078 - FSA Contributions
 - PA20 - Display HR Master Data
 - PA30 - Maintain HR Master Data
 - PA40 - Personnel Actions
 - ZAU_SSN - Social Security Search
 - ZBNF002 - Benefits Policy Conversion Letter**

Benefits Policy Conversion Letter

Menu | Save as Variant... | Back | Exit | Cancel | System | **Execute** | Sort Order | Selection Fields | Dynamic Selections | OrgStructure | Search Help

Period

Reporting Period: Today

Selection Criteria

Personnel Number	[Redacted]	[Dropdown]
Employment Status	[Dropdown]	[Dropdown]
Personnel area	[Dropdown]	[Dropdown]
Personnel subarea	[Dropdown]	[Dropdown]
Employee group	[Dropdown]	[Dropdown]
Employee subgroup	[Dropdown]	[Dropdown]

Insurance Coordinator Name: John Doe

Insurance Coordinator Title: Insurance Coordinator

Full File

Delta File