



myETF Employer
Income Continuation
Insurance
Enrollment Setup
File Resource



August 16, 2017



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myETF Employer ICI Enrollment Data Request File Layout

What is the ICI Enrollment Setup for myETF?

As part of the effort to prepare myETF Employer Online Services for employer use in January 2018, employers who offer ETF-administered Income Continuation Insurance (ICI) must submit data elements associated with employees who are or could potentially be covered by ETF-administered ICI. The required data includes ICI enrollment elections, annual data, and lapsed coverage information. **Annual data will be submitted twice for employers who offer ETF-administered ICI, once at the end of 2017 for calendar year 2016, and again at the end of January of 2018 for calendar year 2017.** Each field appears in a set sequence and has specific attributes associated with it. Attributes are characteristics of fields. The list that follows contains the attributes detailed in [Table 2](#) below:

- Sequence Number: order of fields
- Field Name: text label of the field
- Field Description: definition of the field
- Required?: setting indicating whether or not this field is required
- Field Format/Valid Values: indicates the generic format of the field or valid values if applicable

Employers who offer ETF-administered ICI insurance will submit the three data spreadsheets defined below in an Excel or CSV data format. Please note that this is the only way to send ETF ICI information for myETF setup. No manual option will be available:

- ICI Enrollment Elections Data (Table 2 below)
- Annual Data (Table 3 below)
- ICI Lapsed Coverage Data (Table 4 below)



Definitions for Key Terms Used in this Document

Table 1 myETF Terminology	
Term	Definition
Billing Location	<p>A secondary level under the employer that is used for billing-related setup and processing. myETF supports one or more billing locations per employer. All billing-related employer configurations and financial transactions are associated with a billing location.</p> <p>Most ETF employers have only one billing location. However, an example of an employer with multiple billing locations is Central Payroll (a reporting agency). Central Payroll submits wage/contribution reports on behalf of multiple employers (for example, state agencies). In this scenario, the employer (Central Payroll) has multiple billing locations (state agencies). Each billing location has its own employer account.</p>
Comma-Separated Value (CSV)	<p>CSV is a delimited text file that uses a comma to separate field values. Each line of the file is a data record and consists of one or more fields, each separated by commas. The use of a comma as a field separator is the source of the name for this file format.</p>
Employer	<p>Either an actual employer (for example, City of Madison) or a reporting agency (for example, Central Payroll) that submits wage/contribution information to ETF on behalf of one or more employer(s).</p>
Job Category	<p>Used to categorize employee groups for the purpose of deriving contribution rates, perform various validations, insurance calculations, etc. See Appendix 6 of the myETF Employer Payroll File Resource for a complete list of job category codes.</p>



ICI Enrollment Elections

Employers will submit a record for each current employee **with an ICI election**. This includes current and future-dated elections.

Table 2 ICI Enrollment Elections				
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values
1	SSN	Employee SSN	Conditionally Required Either the SSN or ITIN (Individual Taxpayer Identification Number) is required. Do not provide both.	999999999
2	ITIN	Employee ITIN (Individual Taxpayer Identification Number)	Conditionally Required Either the SSN or ITIN is required. Do not provide both.	999999999
3	Last Name	Employee last name	Yes	Text Maximum length is 50 characters.
4	First Name	Employee first name	Yes	Text Maximum length is 50 characters.
5	Middle Name	Employee middle name	No	Text Maximum length is 50 characters.



Table 2 ICI Enrollment Elections				
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values
6	DOB	Employee date of birth	Yes	99999999 YYYYMMDD All eight characters are required. For example, January 1, 2016 is entered as 20160101.
7	Gender	Employee gender	Yes	Valid Values: <ul style="list-style-type: none"> • M = Male • F = Female
8	Employer (ER) ETF ID	ETF ID of the employer. Employer ETF ID is the employer's existing seven character employer ID with the following exception: <ul style="list-style-type: none"> • State 'employers' reporting under a central billing location are now referred to as a '(state) billing location.' The central billing location will be the Employer ETF ID and your current Employer ETF ID will become the Billing Location ID. <p>For example, if your Employer ETF ID is 1111111 and the 'Central Location' has an ETF Employer ID of 2222222, you would enter 2222222 in this field as your ETF Employer ID and 1111111 as the Billing Location ID.</p>	Yes	9999999



Table 2 ICI Enrollment Elections				
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values
9	Billing Location ID	<p>An employer/reporting agency can report on behalf of one or multiple billing locations. Billing locations are the entities for which employers/reporting agencies report.</p> <p>Billing Loc ID will be the same seven character code as the employer ETF ID with the following exception:</p> <ul style="list-style-type: none"> State 'employers' reporting under a central billing location are now referred to as a '(state) billing location.' The central billing location will be the Employer ETF ID and your current Employer ETF ID will become the Billing Location ID. <p>For example, if your Employer ETF ID is 1111111 and the 'Central Location' has an ETF Employer ID of 2222222, you would enter 2222222 in this field as your ETF Employer ID and 1111111 as the Billing Location ID.</p>	Yes	9999999
10	Job Category	<p>Employee job category</p> <p>This will be the job category the employee will have after 1/1/2018</p>	Yes	Valid two character Job Category codes. For a complete list of codes, please see Appendix 6 of the myETF Employer Payroll File Resource
11	Work Status	Employee work status	Y	<p>Valid Value for this file:</p> <ul style="list-style-type: none"> ACT = WRS Eligible IRS = WRS Eligible-over IRS Limit



Table 2 ICI Enrollment Elections														
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values										
12	Report Gen Type	<p>Three-digit code that identifies an employee work Report Generation Type (e.g. bi-weekly).</p> <p>Notes:</p> <p>1. Most employers will have one reporting cycle and use common codes (e.g. weekly, bi-weekly, monthly, etc.).</p> <p>2. Employers that have multiple reporting cycles can have a payroll file with multiple report generation types, such as bi-weekly and monthly for different job categories.</p>	Y	<p>Valid Values: The first character of the code is alpha and the two characters that follow are numeric. See Appendix 4 of the myETF Employer Payroll File Resource for a complete list of codes. The most commonly used codes are as follows:</p> <table border="0"> <tr> <td><u>Code</u></td> <td><u>Report Type</u></td> </tr> <tr> <td>W00</td> <td>Weekly</td> </tr> <tr> <td>M00</td> <td>Monthly</td> </tr> <tr> <td>B00</td> <td>Bi-Weekly</td> </tr> <tr> <td>S00</td> <td>Semi-Monthly</td> </tr> </table>	<u>Code</u>	<u>Report Type</u>	W00	Weekly	M00	Monthly	B00	Bi-Weekly	S00	Semi-Monthly
<u>Code</u>	<u>Report Type</u>													
W00	Weekly													
M00	Monthly													
B00	Bi-Weekly													
S00	Semi-Monthly													
13	Employee Program	Employee ICI Program	Yes	<p>Valid Values:</p> <ul style="list-style-type: none"> S = State L = Local UW = UW faculty / academic staff 										
14	ICI Standard	Employee elected ICI Standard	Yes	<p>Valid Value:</p> <ul style="list-style-type: none"> Y = Yes, Employee has this election N = No, Employee does not have this election <p>Note: all records should be 'Y.'</p>										
15	ICI Standard Effective Date	<p>Effective date of the employee ICI Standard election</p> <p>For ICI Standard Effective Date before 1/1/2018, populate 20180101</p>	Yes	<p>99999999 YYYYMMDD</p> <p>All eight characters are required. For example, January 1, 2018 is entered as 20180101.</p>										
16	ICI Supplemental	Employee elected ICI Supplemental	Yes	<p>Valid Value:</p> <ul style="list-style-type: none"> Y = Yes, employee has this election N = No, employee does not have this election 										



Table 2 ICI Enrollment Elections				
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values
17	ICI Supplemental Effective Date	Effective date of the employee's ICI Supplemental election For ICI Supplemental Effective Date before 1/1/2018, populate 20180101	No	99999999 YYYYMMDD All eight characters are required. For example, January 1, 2018 is entered as 20180101.
Local Only and UW faculty/academic staff				
18	Elimination Period	Employee elected elimination period associated with the employee's ICI elections	Conditionally Required	Valid two/three character Elimination Period codes. For a complete list of codes, please see Appendix 2 – Elimination Period Codes .



ICI Annual Data

Employers will submit a record for each WRS eligible employees **with or without** an ICI election. The information on those employees **without** a current ICI election is necessary to accommodate employees who may add ICI during the enrollment period.

Table 3 ICI Annual Data				
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values
1	SSN	Employee SSN	Conditionally Required Either the SSN or ITIN (Individual Taxpayer Identification Number) is required. Do not provide both.	999999999
2	ITIN	Employee ITIN (Individual Taxpayer Identification Number)	Conditionally Required Either the SSN or ITIN is required. Do not provide both.	999999999
3	Last Name	Employee last name	Yes	Text Maximum length is 50 characters.
4	First Name	Employee first name	Yes	Text Maximum length is 50 characters.
5	Middle Name	Employee middle name	No	Text Maximum length is 50 characters.



Table 3 ICI Annual Data				
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values
6	DOB	Employee date of birth	Yes	99999999 YYYYMMDD All eight characters are required. For example, January 1, 2018 is entered as 20180101.
7	Gender	Employee gender	Yes	Valid Values: <ul style="list-style-type: none"> • M = Male • F = Female
8	Employer (ER) ETF ID	ETF ID of the employer. Employer ETF ID is the employer's existing seven character employer ID with the following exception: <ul style="list-style-type: none"> • State 'employers' reporting under a central billing location are now referred to as a '(state) billing location.' The central billing location will be the Employer ETF ID and your current Employer ETF ID will become the Billing Location ID. <p>For example, if your Employer ETF ID is 1111111 and the 'Central Location' has an ETF Employer ID of 2222222, you would enter 2222222 in this field as your ETF Employer ID and 1111111 as the Billing Location ID.</p>	Yes	9999999
9	Employee Program	Employee ICI Program	Yes	Valid Values: <ul style="list-style-type: none"> • S = State • L = Local • UW = UW faculty / academic staff
10	Year	Default to Current Calendar Year: <ul style="list-style-type: none"> • 2017 when submitting in calendar year 2017 • 2018 when submitting in calendar year 2018 	Yes	9999



Table 3 ICI Annual Data				
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values
11	Annual WRS Earnings	The actual total amount of WRS reportable earning accrued by an employee during the prior calendar year, or an estimated amount of WRS reportable earnings to be received in the next 12 months. Report 2016 Total WRS Earning when submitting in calendar year 2017. Report 2017 Total WRS Earning when submitting in calendar year 2018.	Yes	999999999 Decimal is implied. For an individual with an Annual WRS Earning amount of = \$4500.00. Populate 450000
12	Annual WRS Earning Type	Description of whether the Annual WRS Earnings is an actual or estimated value.	Yes	Valid Values: <ul style="list-style-type: none"> ES = Estimated Earning AC = Actual Earning
13	FTE %	An employee's current percentage of employment at the employer through which he/she is enrolled in ICI coverage.	Yes	999 Cannot exceed 100.
14	Leave of Absence (LOA)	Y/N indicator if an employee had a temporary leave from employment not resulting in termination during the previous calendar year.	Yes	Valid Values: <ul style="list-style-type: none"> Y = Yes, employee had a temporary leave. N = No, employee did not have a temporary leave.
State Only				
15	Prior Year Sick Leave Hours Balance	Total sick leave hours accrued by an employee as of the last complete pay period of the prior calendar year (for state employees other than UW faculty/academic staff).	Conditionally Required	999999999 Decimal is implied. For Example 425.00. Populate 42500
16	Premium Category	Calculated premium category associated with the employee's ICI elections	Conditionally Required	Valid one character Premium Category codes. For a complete list of codes, please see Appendix 1 – Premium Category Codes .



ICI Lapsed Coverage

Employers will submit ICI Lapsed Coverage information. These employees will not have an ICI Enrollment Record. This information is not required, however, we suggest providing information for anyone who lapsed coverage in the past year (2016) and/or current year (2017). Providing this information will assist the employer if the employee re-enrolls.

Table 4 ICI Lapsed Coverage				
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values
1	SSN	Employee SSN	Conditionally Required Either the SSN or ITIN (Individual Taxpayer Identification Number) is required. Do not provide both.	999999999
2	ITIN	Employee ITIN (Individual Taxpayer Identification Number)	Conditionally Required Either the SSN or ITIN is required. Do not provide both.	999999999
3	Last Name	Employee last name	Yes	Text Maximum length is 50 characters.
4	First Name	Employee first name	Yes	Text Maximum length is 50 characters.
5	Middle Name	Employee middle name	No	Text Maximum length is 50 characters.



Table 4 ICI Lapsed Coverage				
Sequence Number	Field Name	Field Description	Required?	Field Format / Valid Values
6	DOB	Employee date of birth	Yes	99999999 YYYYMMDD All eight characters are required. For example, January 1, 2016 is entered as 20160101.
7	Gender	Employee gender	Yes	Valid Values: <ul style="list-style-type: none"> • M = Male • F = Female
8	Employer (ER) ETF ID	ETF ID of the employer. Employer ETF ID is the employer's existing seven character employer ID with the following exception: <ul style="list-style-type: none"> • State 'employers' reporting under a central billing location are now referred to as a '(state) billing location.' The central billing location will be the Employer ETF ID and your current Employer ETF ID will become the Billing Location ID. <p>For example, if your Employer ETF ID is 1111111 and the 'Central Location' has an ETF Employer ID of 2222222, you would enter 2222222 in this field as your ETF Employer ID and 1111111 as the Billing Location ID.</p>	Yes	9999999
9	Lapse in Coverage	Y/N indicator if an employee had a lapse in coverage for ICI Benefits and currently does not have an ICI election. * If member did not have a lapse, do not include them on the file	Yes	Valid Values: <ul style="list-style-type: none"> • Y = Yes, employee has a lapse in coverage and does not have a current ICI election. • N = No, employee currently has an ICI election or did not have a lapse in coverage. <p>Note, all records should be 'Y.'</p>



APPENDICES

Appendix 1 – Premium Category Codes

[Table 5](#) provides a complete list of all of the available premium category codes. Premium Category associated with state (non UW faculty/academic staff) ICI Enrollment.

Table 5 Premium Category Codes	
Code	Description
1	Category 1
2	Category 2
3	Category 3
4	Category 4
5	Category 5
6	Category 6



Appendix 2 – Elimination Period Codes

[Table 6](#) provides a complete list of the elected calendar day elimination period codes for ICI Coverage. Elimination periods associated with local and UW faculty/academic staff ICI Enrollment.

Table 6 Elimination Period Codes			
Code	Elimination Period	Local Employers	UW Faculty/ Academic Staff
30	30 Day	✓	✓
60	60 Day	✓	
90	90 Day	✓	✓
120	120 Day	✓	
125	125 Day		✓
180	180 Day	✓	✓