

Department of Accounts Payroll Bulletin

Calendar Year 2005

May 25, 2005

Volume 2005-06

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the Payroll
Bulletin.....*

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June to November, 2005**

The Payroll Bulletin is published periodically to provide CIPPS agencies guidance regarding Commonwealth payroll operations. If you have any questions about the bulletin, please call Cathy McGill at (804) 371-7800 or Email at

cathy.mcgill@doa.virginia.gov

State Payroll Operations

Director Lora L. George

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PAYROLL BEST PRACTICES

PBP

Beginning in this bulletin whenever you see this symbol, **PBP**, it means that the suggested procedure has been identified as the most efficient, cost-effective process - a **Payroll Best Practice**. If you believe that your agency has a procedure that qualifies as a Payroll Best Practice, please share it with us by sending an email to cathy.mcgill@doa.virginia.gov. Be sure to put Payroll Best Practice in the subject line.

PAYROLL PROCESSING - FISCAL YEAR-END 2005

Introduction

This Payroll Bulletin addresses payroll processing for Fiscal Year-End 2005, Fiscal Year 2006 benefit rates (including healthcare rate tables), and the June - November 2005 payroll operations calendar. **Please provide a copy of this bulletin to all appropriate personnel within your agency.**

**Key Payroll
Operations
Dates for June
2005**

- **June 15** - Healthcare reconciliations and related IATs are due to DOA for the May coverage month.
- **June 20** – Last certification date for **non-salaried and special payrolls** that will post to FY2005. Without exception, all payrolls certified after June 20 will post to FY2006. *See **Payroll Expenditures** section of this bulletin.*

Continued on next page

PAYROLL PROCESSING - FISCAL YEAR-END 2005, continued

**Payroll
Expenditures**

Salaried payroll expenditures for the June 10 - 24 pay period (July 1, 2005 payday) will be charged to FY2006 without exception. CARS postings for this payday will be controlled by DOA. To execute this requirement, all payrolls certified on June 21, 2005 or later will be charged to FY2006.

Non-salaried and special pays certified prior to June 21 will be charged to FY2005. These payruns are for non-salaried (e.g., hourly) and special payrolls only. *Salaried payroll certifications for the period ending June 24th will not be permitted on these dates.* If you plan to certify on either of these dates, contact Annie Callanta, via e-mail annie.callanta@doa.virginia.gov or (804) 371-7799.

**“P” and “N”
Vouchers**

Agencies are not required to use the “P” or “N” on payroll vouchers processed through CIPPS. CIPPS payrolls post to CARS as a batch type 9, which does not require the “P/N” voucher process.

**Flexible
Benefits**

Mass transactions to deactivate the flexible benefit deductions (Deduction 21, Dependent Care and Deduction 22, Medical Reimbursement) and zero the amount and goal fields will be executed by DOA on June 30. Data entry of new flexible benefit deductions must be completed by agencies prior to calculating the 6/25-7/9 pay period.

PBP: Decrement the Goal. The most efficient way to set up a flex account deduction for the new plan year is to establish the deduction so that the goal amount is decremented each time a payment is deducted. To do this, the deduction frequency is changed from “00” to “09”, the amount per pay period is entered and the goal amount for the **full** plan year is entered. Let the system **automatically fill in the utility field**, then go back and **put a “1” in the eighth position**. At the end of the calendar year, the year-to-date amount will be cleared, but the amount remaining in the goal field will equal half of the amount for the plan year. This way you will not need to reestablish goal amounts in January for the flex benefit accounts.

Example:

During FY05 David Namesmith elected to have \$25.00 per pay period (\$600 annually) deducted for Dependent Care and \$50.00 per pay period (\$1,200 annually) deducted for Medical Reimbursement. As of June 30 his deductions year to date are \$300 and \$600, respectively. For FY 06, he elects to have the same amounts withheld each pay period. On July 1 his payroll office changes the frequency of Deduction 21 and Deduction 22 back to 09 and replaces the Goal amounts as follows. Deduction 21: \$25 x 24 = new goal of \$600. Deduction 22: \$50.00x24 = new goal of \$1200. Once the utility field has been automatically filled, a “1” is put in the eighth position so that the goal will be decremented.

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PAYROLL PROCESSING - FISCAL YEAR-END 2005, continued

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> GU      100XX,9999999900                                ON H0ZDC
-----EMPLOYEE DEDUCTIONS-----
COMPANY--> 100XX  EMPLOYEE NUMBER--> 9999999900
NAME-----> DAVID                                NAMESMITH

NO      NAME          AMT/PCT      GOAL      UTILITY
CALC GN FR  PRTY  START DATE  END DATE    DED MTD    DED YTD
R_  21  DEP  CARE          25.00      600.00  000000010022000100
   85  1  09  000  00/00/0000  00/00/0000          .00      300.00
R_  22  MED  REIM          50.00     1200.00  000000010022000100
   85  1  09  000  00/00/0000  00/00/0000          .00      600.00
   00          .00          .00  000000000000000000
   00  0  00  000  00/00/0000  00/00/0000          .00          .00
   00          .00          .00  000000000000000000
   00  0  00  000  00/00/0000  00/00/0000          .00          .00

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If you do not utilize the “decrement” function, then the new goal amount must be the sum of half of the new FY 06 flexible spending account annual amount and the year-to-date amount as of 6/24; otherwise, the deduction will not be taken. You will also need to reenter goal amounts in January for the remaining 6 months of the plan year.

VRS Rate Schedule

There is no change in the contribution rates for VRS administered programs for FY 2006. Contribution rates for VRS administered programs are at the rates listed below. **No action is required by agencies.**

Benefit Name	Rate	Expenditure Code
Group Insurance (See note below)	0.00%	1114
Retiree Health Insurance Credit	1.04%	1116
Retirement-		
State employees	8.91%	1111
State Police	21.49%	1111
Judicial	35.55%	1111
VaLORS	21.99%	1111
Long-Term Disability-		
State employees	1.65%	1117
State Police	1.65%	1117
VaLORS	1.65%	1117

Note: Group Insurance (Ded # 20) will be calculated in CIPPS at a rate of 0.80% and reported to VRS. However, there will be no charge posted to agency expenditures for FY2006.

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PAYROLL PROCESSING - FISCAL YEAR-END 2005, continued

DGS Parking Fees

DGS has announced an increase in the Capital area parking facilities rate schedule for FY 2006 as follows:

		<u>Current Rate</u>	<u>New Rate</u>
Capitol Area Facilities	Automobiles	\$37.00	\$39.00
	Motorcycles	18.50	19.50
	Board members	13.50	14.50
	One day parking	3.00	3.00

The new payroll deduction amount of \$19.50 will begin for the payroll period 6/25-7/9, and be reflected on employees July 15, 2005 paycheck. On June 30 the Department of Accounts will make the necessary changes in the DGS parking deduction for all affected agencies currently using the Commonwealth Integrated Personnel and Payroll System (CIPPS).

Optional Group Life Premium Update

Effective July 1, 2005 (July 15, 2005 payday), the Optional Group Life premium rates will be reduced. Actual rates will be provided once VRS has made them available. The rates are based on the age of the member or spouse on January 1, 2005.

Reports documenting the coverage and premium amounts will be distributed around the middle of June. The file to change the Deduction 35 amounts will be loaded on June 30. Be sure to review the Report U024, OPTIONAL GROUP LIFE PREMIUM LISTING, and Report U025, OPTIONAL GROUP LIFE ERROR REPORT, in sufficient time to identify and make any necessary adjustments prior to certification.

Questions regarding coverage or premiums should be directed to Joe Chang at Minnesota Life at:

Joe Chang, Richmond Branch Office
joseph.chang@minnesotalife.com
Phone: 1-800-441-2258, ext. 101
Fax: 804-644-2460

CIPPS Security

If you make changes to who has authority to approve the Payroll Check Authorizations on your Authorized Signatories Form (DA-04-121), be sure that you also complete the CIPPS Security Authorization form to add or remove that person's access to CIPPS.

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PAYROLL PROCESSING - FISCAL YEAR-END 2005, continued

**Healthcare
Premium
Schedules**

On July 1, 2005, the new healthcare premiums specified in DHRM's *Spotlight* Spring 2005 Open Enrollment Issue, and listed on pages 6-10 in this bulletin, will take effect.

The new Healthcare Premium schedules distributed by DHRM are divided into two sections. The first section applies to active employees, the second to employees on LWOP. All healthcare providers are listed below and categorized alphabetically.

Provider	Active Provider Code	Involuntary Separation Provider Code	Project Code
COVA Care Basic	42	92	93002
COVA Care Out-of-Network (OON)	43	93	93002
COVA Care Expanded Dental (ED)	44	94	93002
COVA Care Out-of-Network and Expanded Dental (OON/ED)	45	95	93002
COVA Care Vision, Hearing and Expanded Dental (V/H/ED)	46	96	93002
COVA Care Out-of-Network and Vision, Hearing and Expanded Dental (Full)	47	97	93002
Kaiser Permanente HMO	06	56	93003

DOA will enter premium changes into CIPPS to become effective with the 6/25-7/9 pay period (July 15, 2005 payday) on July 1, 2005. DOA will automatically change these deductions for active employee deductions. If you have any questions about the schedules, contact Denise Halderman, via e-mail at denise.halderman@doa.virginia.gov or (804) 371-8912.

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COVA Care Basic (BES – CC0)

Provider Code: 42/92

<u>Employee Coverage Code</u>	<u>Semi-Monthly</u>			<u>Monthly</u>		
	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$18.00	\$170.00	\$188.00	\$36.00	\$340.00	\$376.00
D - Employee Plus One	\$45.00	\$303.00	\$348.00	\$90.00	\$606.00	\$696.00
F - Family	\$63.50	\$444.50	\$508.00	\$127.00	\$889.00	\$1,016.00
O - Employee Only - Part Time	\$188.00	0.00	\$188.00	\$376.00	0.00	\$376.00
T - Employee Plus One - Part Time	\$348.00	0.00	\$348.00	\$696.00	0.00	\$696.00
M - Family - Part Time	\$508.00	0.00	\$508.00	\$1,016.00	0.00	\$1,016.00

COVA Care OON (BES – CC1)

Provider Code: 43/93

<u>Employee Coverage Code</u>	<u>Semi-Monthly</u>			<u>Monthly</u>		
	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$22.50	\$170.00	\$192.50	\$45.00	\$340.00	\$385.00
D - Employee Plus One	\$51.00	\$303.00	\$354.00	\$102.00	\$606.00	\$708.00
F - Family	\$71.50	\$444.50	\$516.00	\$143.00	\$889.00	\$1,032.00
O - Employee Only - Part Time	\$192.50	0.00	\$192.50	\$385.00	0.00	\$385.00
T - Employee Plus One - Part Time	\$354.00	0.00	\$354.00	\$708.00	0.00	\$708.00
M - Family - Part Time	\$516.00	0.00	\$516.00	\$1,032.00	0.00	\$1,032.00

COVA Care ED (BES – CC2)

Provider Code: 44/94

<u>Employee Coverage Code</u>	<u>Semi-Monthly</u>			<u>Monthly</u>		
	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$23.50	\$170.00	\$193.50	\$47.00	\$340.00	\$387.00
D - Employee Plus One	\$56.00	\$303.00	\$359.00	\$112.00	\$606.00	\$718.00
F - Family	\$80.50	\$444.50	\$525.00	\$161.00	\$889.00	\$1,050.00
O - Employee Only - Part Time	\$193.50	0.00	\$193.50	\$387.00	0.00	\$387.00
T - Employee Plus One - Part Time	\$359.00	0.00	\$359.00	\$718.00	0.00	\$718.00
M - Family - Part Time	\$525.00	0.00	\$525.00	\$1,050.00	0.00	\$1,050.00

COVA Care OON/ED (BES – CC3)

Provider Code: 45/95

<u>Employee Coverage Code</u>	<u>Semi-Monthly</u>			<u>Monthly</u>		
	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$28.00	\$170.00	\$198.00	\$56.00	\$340.00	\$396.00
D - Employee Plus One	\$62.00	\$303.00	\$365.00	\$124.00	\$606.00	\$730.00
F - Family	\$88.50	\$444.50	\$533.00	\$177.00	\$889.00	\$1,066.00
O - Employee Only - Part Time	\$198.00	0.00	\$198.00	\$396.00	0.00	\$396.00
T - Employee Plus One - Part Time	\$365.00	0.00	\$365.00	\$730.00	0.00	\$730.00
M - Family - Part Time	\$533.00	0.00	\$533.00	\$1,066.00	0.00	\$1,066.00

COVA Care V/H/ED (BES – CC4)

Provider Code: 46/96

<u>Employee Coverage Code</u>	<u>Semi-Monthly</u>			<u>Monthly</u>		
	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$27.50	\$170.00	\$197.50	\$55.00	\$340.00	\$395.00
D - Employee Plus One	\$63.00	\$303.00	\$366.00	\$126.00	\$606.00	\$732.00
F - Family	\$89.50	\$444.50	\$534.00	\$179.00	\$889.00	\$1,068.00
O - Employee Only - Part Time	\$197.50	0.00	\$197.50	\$395.00	0.00	\$395.00
T - Employee Plus One - Part Time	\$366.00	0.00	\$366.00	\$732.00	0.00	\$732.00
M - Family - Part Time	\$534.00	0.00	\$534.00	\$1,068.00	0.00	\$1,068.00

COVA Care FULL (BES – CC5)

Provider Code: 47/97

<u>Employee Coverage Code</u>	<u>Semi-Monthly</u>			<u>Monthly</u>		
	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$32.00	\$170.00	\$202.00	\$64.00	\$340.00	\$404.00
D - Employee Plus One	\$69.00	\$303.00	\$372.00	\$138.00	\$606.00	\$744.00
F - Family	\$97.50	\$444.50	\$542.00	\$195.00	\$889.00	\$1,084.00
O - Employee Only - Part Time	\$202.00	0.00	\$202.00	\$404.00	0.00	\$404.00
T - Employee Plus One - Part Time	\$372.00	0.00	\$372.00	\$744.00	0.00	\$744.00
M - Family - Part Time	\$542.00	0.00	\$542.00	\$1,084.00	0.00	\$1,084.00

KAISER PERMANENTE HMO (BES – KP)

Provider Code: 06/56

<u>Employee Coverage Code</u>	<u>Semi-Monthly</u>			<u>Monthly</u>		
	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$18.00	\$167.50	\$185.50	\$36.00	\$335.00	\$371.00
D - Employee Plus One	\$44.50	\$298.50	\$343.00	\$89.00	\$597.00	\$686.00
F - Family	\$62.50	\$438.50	\$501.00	\$125.00	\$877.00	\$1,002.00
O - Employee Only - Part Time	\$185.50	0.00	\$185.50	\$371.00	0.00	\$371.00
T - Employee Plus One - Part Time	\$343.00	0.00	\$343.00	\$686.00	0.00	\$686.00
M - Family - Part Time	\$501.00	0.00	\$501.00	\$1,002.00	0.00	\$1,002.00

Leave Without Pay (LWOP)

Medical LWOP For employees on LWOP due to medical leave, agency convenience, or layoffs, the employee is responsible for paying the employee share and the agency is responsible for paying the agency share of the healthcare premium. These employees will be identified as being on *Medical LWOP* on the following healthcare schedules.

Other LWOP For employees on LWOP for other reasons (e.g., personal, education), the employee is responsible for the entire healthcare premium. These employees will be identified as being on *Non-Medical LWOP* on the following healthcare schedules.

Employees on Military LWOP should contact DHRM's Office of Health Benefits for guidance.

Continued Coverage For employees on LWOP electing to continue healthcare coverage, the agency is responsible for entering the appropriate Employee Coverage Code (See pages 8 – 9) on the HMCU1 screen in CIPPS. The agency will then pay the entire healthcare premium every month, with the employee reimbursing the agency for the amount determined by the employee's LWOP type (e.g., Medical or Non-Medical), provider code, and employee coverage code.

LWOP Healthcare Tables On the following LWOP healthcare schedules, the **Agency Payment** refers to the amount initially paid by the agency (i.e. the full premium due) either through payroll deduction or the automated healthcare reconciliation process. **Employee Cost** refers to the amount the LWOP employee will reimburse the agency every month.

COVA Care Basic (BES – CC0)

Provider Code: 42

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Agency Payment - Med LWOP</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$36.00	\$376.00	\$170.00	\$340.00
DD - Employee Plus One	\$90.00	\$696.00	\$303.00	\$606.00
FF - Family	\$127.00	\$1,016.00	\$444.50	\$889.00
OO - Employee Only - Part Time	\$376.00	\$376.00	0.00	0.00
TT - Employee Plus One - Part Time	\$696.00	\$696.00	0.00	0.00
MM - Family - Part Time	\$1,016.00	\$1,016.00	0.00	0.00

COVA Care OON (BES – CC1)

Provider Code: 43

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Agency Payment - Med LWOP</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$45.00	\$385.00	\$170.00	\$340.00
DD - Employee Plus One	\$102.00	\$708.00	\$303.00	\$606.00
FF - Family	\$143.00	\$1,032.00	\$444.50	\$889.00
OO - Employee Only - Part Time	\$385.00	\$385.00	0.00	0.00
TT - Employee Plus One - Part Time	\$708.00	\$708.00	0.00	0.00
MM - Family - Part Time	\$1,032.00	\$1,032.00	0.00	0.00

COVA Care ED (BES – CC2)

Provider Code: 44

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Med LWOP Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$47.00	\$387.00	\$170.00	\$340.00
DD - Employee Plus One	\$112.00	\$718.00	\$303.00	\$606.00
FF - Family	\$161.00	\$1,050.00	\$444.50	\$889.00
OO - Employee Only - Part Time	\$387.00	\$387.00	0.00	0.00
TT - Employee Plus One - Part Time	\$718.00	\$718.00	0.00	0.00
MM - Family - Part Time	\$1,050.00	\$1,050.00	0.00	0.00

COVA Care OON/ED (BES – CC3)

Provider Code: 45

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Med LWOP Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$56.00	\$396.00	\$170.00	\$340.00
DD - Employee Plus One	\$124.00	\$730.00	\$303.00	\$606.00
FF - Family	\$177.00	\$1,066.00	\$444.50	\$889.00
OO - Employee Only - Part Time	\$396.00	\$396.00	0.00	0.00
TT - Employee Plus One - Part Time	\$730.00	\$730.00	0.00	0.00
MM - Family - Part Time	\$1,066.00	\$1,066.00	0.00	0.00

COVA Care V/H/ED (BES – CC4)

Provider Code: 46

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Med LWOP Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$55.00	\$395.00	\$170.00	\$340.00
DD - Employee Plus One	\$126.00	\$732.00	\$303.00	\$606.00
FF - Family	\$179.00	\$1,068.00	\$444.50	\$889.00
OO - Employee Only - Part Time	\$395.00	\$395.00	0.00	0.00
TT - Employee Plus One - Part Time	\$732.00	\$732.00	0.00	0.00
MM - Family - Part Time	\$1,068.00	\$1,068.00	0.00	0.00

COVA Care Full (BES – CC5)

Provider Code: 47

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Med LWOP Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$64.00	\$404.00	\$170.00	\$340.00
DD - Employee Plus One	\$138.00	\$744.00	\$303.00	\$606.00
FF - Family	\$195.00	\$1,084.00	\$444.50	\$889.00
OO - Employee Only - Part Time	\$404.00	\$404.00	0.00	0.00
TT - Employee Plus One - Part Time	\$744.00	\$744.00	0.00	0.00
MM - Family - Part Time	\$1,084.00	\$1,084.00	0.00	0.00

KAISER PERMANENTE (BES – KP)

Provider Code: 06

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Med LWOP Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$36.00	\$371.00	\$167.50	\$335.00
DD - Employee Plus One	\$89.00	\$686.00	\$298.50	\$597.00
FF - Family	\$125.00	\$1,002.00	\$438.50	\$877.00
OO - Employee Only - Part Time	\$371.00	\$371.00	0.00	0.00
TT - Employee Plus One - Part Time	\$686.00	\$686.00	0.00	0.00
MM - Family - Part Time	\$1,002.00	\$1,002.00	0.00	0.00

June 2005

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1 Payday for semimonthly salaried employees	2	3	4 9AM - CIPPS files open - no edits or payruns
5 9AM - CIPPS files open - no edits or payruns	6	7	8	9	10 Semimonthly salaried certification deadline period #1- (5/25-6/09)	11 9AM - CIPPS files open - no edits or payruns
12 9AM - CIPPS files open - no edits or payruns	13 CHARGE FY 2005	14 Leave keying deadline Post leave accruals (5/25-6/09) CHARGE FY 2005	15 May Healthcare Cert CHARGE FY 2005	16 Payday for semimonthly salaried employees CHARGE FY 2005	17 CHARGE FY 2005	18 9AM - CIPPS files open - no edits or payruns
19 9AM - CIPPS files open - no edits or payruns	20 CHARGE FY 2005	21 <u>Starting this day</u> CHARGE FY 2006	22	23	24	25 9AM - CIPPS files open - no edits or payruns
26 9AM - CIPPS files open - no edits or payruns	27 Semimonthly salaried certification deadline period #2- (6/10-6/24)	28	29 Leave keying deadline Post leave accruals (6/10-6/24) Fiscal Year End Leave Processing (Leave Liability)	30 Files Close at 2pm		

July 2005

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1 Payday for semimonthly salaried employees	2 9AM –CIPPS files open-no edits or payruns
3 9AM –CIPPS files open-no edits or payruns	4 <i>HOLIDAY</i>	5	6	7	8	9 9AM –CIPPS files open-no edits or payruns
10 9AM –CIPPS files open-no edits or payruns	11 Semimonthly salaried certification Period 1-(6/25-7/9)	12	13 Leave keying deadline Post leave accruals - (6/25-7/9)	14 2 nd Qtr. Recon of taxable wages due to DOA	15 Payday for semimonthly salaried employees	16 9AM –CIPPS files open-no edits or payruns
17 9AM –CIPPS files open-no edits or payruns	18	19	20	21	22	23 9AM –CIPPS files open-no edits or payruns
24 9AM –CIPPS files open-no edits or payruns	25	26 Semimonthly salaried certification Period 2-(7/10-7/24)	27	28 Leave keying Deadline Post leave accruals - (7/10-7/24)	29 June HC Certification due	30
31 9AM –CIPPS files open-no edits or payruns						

August 2005

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1 Payday for semimonthly salaried employees	2	3	4	5	6 9AM –CIPPS files open-no edits or payruns
7 9AM –CIPPS files open-no edits or payruns	8	9	10 Semimonthly salaried certification deadline period #1-(7/25-8/9)	11	12 Leave keying deadline Post leave accruals - (7/25-8/9)	13 9AM –CIPPS files open-no edits or payruns
14 9AM –CIPPS files open-no edits or payruns	15	16 Payday for semimonthly salaried employees	17	18	19	20 9AM –CIPPS files open-no edits or payruns
21 9AM –CIPPS files open-no edits or payruns	22	23	24	25	26 Semimonthly salaried certification period#2-(8/10-8/24)	27 9AM –CIPPS files open-no edits or payruns
28 9AM –CIPPS files open-no edits or payruns	29	30 Leave keying Deadline Post leave accruals -(8/10-8/24)	31 July HC Certification due			

September 2005

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1 Payday for semimonthly salaried employees	2	3 9AM –CIPPS files open-no edits or payruns
4 9AM –CIPPS files open-no edits or payruns	5 HOLIDAY	6	7	8	9	10 9AM –CIPPS files open-no edits or payruns
11 9AM –CIPPS files open-no edits or payruns	12 Semimonthly salaried certification deadline period #1-(8/25-9/9)	13	14 Leave keying deadline Post leave accruals - (8/25-9/9)	15	16 Payday for semimonthly salaried employees	17 9AM –CIPPS files open-no edits or payruns
18 9AM –CIPPS files open-no edits or payruns	19	20	21	22	23	24 9AM –CIPPS files open-no edits or payruns
25 9AM –CIPPS files open-no edits or payruns	26 Semimonthly salaried certification period# 2-(9/10-9/24)	27	28 Leave keying Deadline Post leave accruals 9/10-9/24)	29	30 Payday for semimonthly salaried employees August HC Certification due	

October 2005

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1 9AM –CIPPS files open-no edits or payruns
2 9AM –CIPPS files open-no edits or payruns	3	4	5	6	7 Semimonthly salaried certification deadline period #1-(9/25- 10/9)	8 9AM –CIPPS files open-no edits or payruns
9 9AM –CIPPS files open-no edits or payruns	10 HOLIDAY	11	12 Leave keying Deadline Post leave accruals - (9/25-10/9)	13 3 rd Qtr Recon of taxable wages due to DOA.	14 Payday for semimonthly salaried employees	15 9AM –CIPPS files open-no edits or payruns
16 9AM –CIPPS files open-no edits or payruns	17	18	19	20	21	22 9AM –CIPPS files open-no edits or payruns
23 9AM –CIPPS files open-no edits or payruns	24	25	26 Semimonthly salaried certification period#2- (10/10-10/24)	27	28 Leave keying Deadline Post leave accruals (10/10-10/24)	29 9AM –CIPPS files open-no edits or payruns
30 9AM –CIPPS files open-no edits or payruns	31 September HC Certification due					

November 2005

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1 Payday for semimonthly salaried employees	2	3	4	5 9AM –CIPPS files open-no edits or payruns
6 9AM –CIPPS files open-no edits or payruns	7	8	9 Semimonthly salaried certification deadline period #1 (10/25-11/9)	10	11 HOLIDAY	12 9AM –CIPPS files open-no edits or payruns
13 9AM –CIPPS files open-no edits or payruns	14 Leave keying deadline Post leave accruals (10/25-11/9)	15	16 Payday for semimonthly salaried employees	17	18	19 9AM –CIPPS files open-no edits or payruns
20 9AM –CIPPS files open-no edits or payruns	21	22	23 Semimonthly salaried certification period 2-(11/10-11/24)	24 HOLIDAY	25 HOLIDAY	26 9AM –CIPPS files open-no edits or payruns
27 9AM –CIPPS files open-no edits or payruns	28	29 Leave keying Deadline Post leave accruals (11/10-11/24)	30 October HC Certification due			