

Department of Accounts

Payroll Bulletin

Calendar Year 2006

June 21, 2006

Volume 2006-10

In This Issue of the Payroll Bulletin.....

- **Revised Payroll Operations Calendar – June**
- **Payroll Processing – FY 2007**
- **Benefit/Deduction Rate Changes**
- **FY 07 Healthcare Rate Tables**
- **Payroll Operations Calendar – July to November, 2006**

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

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Introduction

This Payroll Bulletin addresses changes to the payroll processing calendar for June, 2006 and payroll processing for Fiscal Year 2007, Fiscal Year 2007 benefit rates (including healthcare rate tables), a revised June, 2006 calendar and the July - November 2006 payroll operations calendar. **Please provide a copy of this bulletin to all appropriate personnel within your agency.**

Please be aware that all information related to FY 2007 is subject to final enactment of the Appropriation Act.

REVISED PAYROLL OPERATIONS CALENDAR – JUNE

Key Payroll Operations Dates for FYE 06

- **June 26 – Semi-monthly salary certification deadline for PPE 6/24, Payday June 30.** These expenditures will be charged to FY 06 and adjustments will be made to reduce FY 07 appropriation by the same amount. **No July check dates will be allowed.** *Voucher numbers for wage payrolls that normally would have been charged to FY 07 should begin with FY07; otherwise they will not be included in the appropriation adjustments.*
- **June 28 –** Last day to request temporary treasury loan to cover insufficient nongeneral fund cash for June 30 payroll.
- **June 28 –** Last opportunity to certify wage/special payrolls charged to **FY 06.** **You must use a June 30 check date. No certifications for next-day check dates or checks dated for July will be permitted.** *Voucher numbers for wage payrolls that normally would have been charged to FY 07 should begin with FY07; otherwise they will not be included in the appropriation adjustments.*
- **June 28 -** CIPPS will close at 2:00 p.m. due to fiscal year end table maintenance and processing. Deduction rates and health insurance premiums will be updated to new rates for FY 07; data for new plan year for Flex accounts will be entered by DOA (see Flexible Benefit section below). *Reports for 2nd Quarter Tax Reconciliation will be distributed first week of July.*
- **June 29 –** Leave keying deadline for PPE 6/24.

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REVISED PAYROLL OPERATIONS CALENDAR – JUNE, continued

Payroll Expenditures FY 06

Salaried payroll expenditures for the June 10 - 24 pay period will be charged to FY2006. Payday has been changed to June 30, 2006. Final certification must take place by Monday, June 26. Expenditures associated with this payroll will be charged to FY 2006. Only check dates during the month of June will be accepted.

June 28 will be the last day that non-salaried and special pays may be certified for FY 2006. These payruns are for non-salaried (e.g., hourly) and special payrolls only. Only check dates during the month of June will be accepted. Salaried payroll certifications for the period ending June 24th will not be permitted on this date. Voucher numbers for wage payrolls that normally would have been charged to FY 07 should begin with FY07; otherwise they will not be included in the appropriation adjustments. These expenditures will be charged to the programmatic data existing on the HMBU1 screen as of June 28.

PAYROLL PROCESSING - FISCAL YEAR 2007

Key Payroll Operations Dates for FY 07

- **June 29 – FY 07 regular processing begins; however, agencies utilizing CIPPS Leave should not make changes to salary or programmatic data until FYE leave processing has been completed.** *Certifications will be accepted for non-salaried payruns with checks dated for July only.*
 - **June 30 –** CIPPS may be down until mass transactions and batch interfaces for programmatic changes have finished processing; agencies may begin to make programmatic changes to HMBU1 as soon as CIPPS becomes available. *Certifications will be accepted for non-salaried payruns with checks dated for July only.*
 - **July 1 through July 4 -** CIPPS files will be open; no edits or payruns.
 - **July 10 -** Semi-monthly salary certification deadline for PPE 7/09, Payday July 14.
 - **July 19 -** 2nd Quarter Recon of Taxable Wages due to DOA.
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CIPPS Security

If you make changes to those individuals with 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.

Payroll Expenditures FY 07

Salaried payroll expenditures for the June 25 – July 9 pay period will be charged to FY 2007. Changes to programmatic coding resulting from July 1 change to service area structure must be in place by the time this pay period is certified on July 10. Make sure the NSSA table has been updated first.

“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.

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PAYROLL PROCESSING - FISCAL YEAR 2007, continued

Changes to Programmatic Data

Payroll Bulletin #2006-06 distributed on April 11 provided detailed information regarding the steps necessary to make changes to the programmatic data used for payroll expenditures effective FY 2007. **Do not begin to make changes to HMBU1 until June 30.** This bulletin is also available on our website: http://www.doa.virginia.gov/Payroll/Payroll_Bulletins/2006/2006_06.pdf

The change provides an opportunity for agencies to review and remove any obsolete coding existing in the HM9 table. Report U051 – Programmatic Data was distributed on May 5 to assist agencies in identifying account numbers no longer in use. Instructions on how to use the HM9U1 screen were included in Payroll Bulletin #2006-07 that was distributed on May 12.

Staff with security to input transactions in CIPPS have been given temporary access to the HM9U1 screen. Use the following instructions to remove accounts no longer needed in CIPPS. Deletions must be completed by August 31, at which time, security will be returned to normal. Questions about CIPPS security should be directed to Denise Halderman at 804-371-8912.

VRS Rate Schedule

Effective with the June 25 - July 9 pay period (July 14, 2006 payday), contribution rates for VRS administered programs are scheduled to change to the rates listed below **pending final approval of the Appropriation Act. No action is required by agencies.** DOA will adjust the rates in CIPPS.

Benefit Name	Rate	Expenditure Code
Retirement-		
State employees	10.74%	1111
State Police	21.71%	1111
Judicial	41.47%	1111
VaLORS	19.96%	1111
Group Insurance – Premium Holiday Ends – Agencies will be charged for Group Insurance in FY 07	Rates will be provided as soon as finalized	1114
Retiree Health Insurance Credit		1116
Long-Term Disability	1.78%	1117

Optional Group Life Premium Update

There are no changes in the Optional Group Life premium rates at this time.

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

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PAYROLL PROCESSING - FISCAL YEAR 2007, continued

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 28. **DOA will then establish the new plan year deduction amounts and goals and turn the deduction frequency to "09" from data provided through BES. No data entry will be required by agency personnel for flexible benefit deductions. Please review all transactions for accuracy.**

Flex account deduction for the new plan year will be established so that the goal amount is decremented each time a payment is deducted. This means that the goal amount for the **full** plan year will be entered and there will be a "1" in the eighth position of the utility field. 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 and no additional effort will be required to reestablish goal amounts in January for the flex benefit accounts.

*The only time you will need to make a change to the flex account deductions is if the employee has a qualifying event during the plan year that changes the amount of the deduction. Keep in mind that the deduction has been set for pre-taxability and to decrement the goal. **Do not change the utility field.***

Healthcare Premium Schedules

On July 1, 2006, new healthcare premiums listed on pages 6-10 of 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 (Includes basic dental)	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
COVA HDHP (High Deductible Health Plan)	50	90	93002
Kaiser Permanente HMO (Available in Northern Va only)	06	56	93003

DOA will enter premium changes into CIPPS to become effective with the 6/25-7/9 pay period (July 14, 2006 payday) on June 28, 2006. 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	\$20.00	\$189.00	\$209.00	\$40.00	\$378.00	\$418.00
D - Employee Plus One	\$49.50	\$337.50	\$387.00	\$99.00	\$675.00	\$774.00
F - Family	\$70.00	\$495.50	\$565.50	\$140.00	\$991.00	\$1,131.00
O - Employee Only - Part Time	\$209.00	\$0.00	\$209.00	\$418.00	\$0.00	\$418.00
T - Employee Plus One - Part Time	\$387.00	\$0.00	\$387.00	\$774.00	\$0.00	\$774.00
M - Family - Part Time	\$565.50	\$0.00	\$565.50	\$1,131.00	\$0.00	\$1,131.00

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	\$25.00	\$189.00	\$214.00	\$50.00	\$378.00	\$428.00
D - Employee Plus One	\$56.00	\$337.50	\$393.50	\$112.00	\$675.00	\$787.00
F - Family	\$79.00	\$495.50	\$574.50	\$158.00	\$991.00	\$1,149.00
O - Employee Only - Part Time	\$214.00	\$0.00	\$214.00	\$428.00	\$0.00	\$428.00
T - Employee Plus One - Part Time	\$393.50	\$0.00	\$393.50	\$787.00	\$0.00	\$787.00
M - Family - Part Time	\$574.50	\$0.00	\$574.50	\$1,149.00	\$0.00	\$1,149.00

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	\$26.00	\$189.00	\$215.00	\$52.00	\$378.00	\$430.00
D - Employee Plus One	\$61.50	\$337.50	\$399.00	\$123.00	\$675.00	\$798.00
F - Family	\$88.00	\$495.50	\$583.50	\$176.00	\$991.00	\$1,167.00
O - Employee Only - Part Time	\$215.00	\$0.00	\$215.00	\$430.00	\$0.00	\$430.00
T - Employee Plus One - Part Time	\$399.00	\$0.00	\$399.00	\$798.00	\$0.00	\$798.00
M - Family - Part Time	\$583.50	\$0.00	\$583.50	\$1,167.00	\$0.00	\$1,167.00

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	\$31.00	\$189.00	\$220.00	\$62.00	\$378.00	\$440.00
D - Employee Plus One	\$68.00	\$337.50	\$405.50	\$136.00	\$675.00	\$811.00
F - Family	\$97.00	\$495.50	\$592.50	\$194.00	\$991.00	\$1,185.00
O - Employee Only - Part Time	\$220.00	\$0.00	\$220.00	\$440.00	\$0.00	\$440.00
T - Employee Plus One - Part Time	\$405.50	\$0.00	\$405.50	\$811.00	\$0.00	\$811.00
M - Family - Part Time	\$592.50	\$0.00	\$592.50	\$1,185.00	\$0.00	\$1,185.00

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	\$30.50	\$189.00	\$219.50	\$61.00	\$378.00	\$439.00
D - Employee Plus One	\$69.50	\$337.50	\$407.00	\$139.00	\$675.00	\$814.00
F - Family	\$98.50	\$495.50	\$594.00	\$197.00	\$991.00	\$1,188.00
O - Employee Only - Part Time	\$219.50	\$0.00	\$219.50	\$439.00	\$0.00	\$439.00
T - Employee Plus One - Part Time	\$407.00	\$0.00	\$407.00	\$814.00	\$0.00	\$814.00
M - Family - Part Time	\$594.00	\$0.00	\$594.00	\$1,188.00	\$0.00	\$1,188.00

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	\$35.50	\$189.00	\$224.50	\$71.00	\$378.00	\$449.00
D - Employee Plus One	\$76.00	\$337.50	\$413.50	\$152.00	\$675.00	\$827.00
F - Family	\$107.00	\$495.50	\$602.50	\$214.00	\$991.00	\$1,205.00
O - Employee Only - Part Time	\$224.50	\$0.00	\$224.50	\$449.00	\$0.00	\$449.00
T - Employee Plus One - Part Time	\$413.50	\$0.00	\$413.50	\$827.00	\$0.00	\$827.00
M - Family - Part Time	\$602.50	\$0.00	\$602.50	\$1,205.00	\$0.00	\$1,205.00

COVA Care High Deductible (BES – CHD)

Provider Code: 50/90

<u>Employee Coverage Code</u>	<u>Semi-Monthly</u>			<u>Monthly</u>		
	Employee	Agency	Total	Employee	Agency	Total
S - Employee Only	\$0.00	\$167.50	\$167.50	\$0.00	\$335.00	\$335.00
D - Employee Plus One	\$0.00	\$310.00	\$310.00	\$0.00	\$620.00	\$620.00
F - Family	\$0.00	\$453.00	\$453.00	\$0.00	\$906.00	\$906.00
O - Employee Only - Part Time	\$167.50	\$0.00	\$167.50	\$335.00	\$0.00	\$335.00
T - Employee Plus One - Part Time	\$310.00	\$0.00	\$310.00	\$620.00	\$0.00	\$620.00
M - Family - Part Time	\$453.00	\$0.00	\$453.00	\$906.00	\$0.00	\$906.00

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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	\$19.50	\$182.50	\$202.00	\$39.00	\$365.00	\$404.00
D - Employee Plus One	\$48.00	\$325.50	\$373.50	\$96.00	\$651.00	\$747.00
F - Family	\$67.50	\$478.00	\$545.50	\$135.00	\$956.00	\$1,091.00
O - Employee Only - Part Time	\$202.00	\$0.00	\$202.00	\$404.00	\$0.00	\$404.00
T - Employee Plus One - Part Time	\$373.50	\$0.00	\$373.50	\$747.00	\$0.00	\$747.00
M - Family - Part Time	\$545.50	\$0.00	\$545.50	\$1,091.00	\$0.00	\$1,091.00

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.

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**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</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$40.00	\$418.00	\$209.00	\$418.00
DD - Employee Plus One	\$99.00	\$774.00	\$387.00	\$774.00
FF - Family	\$140.00	\$1,131.00	\$565.50	\$1,131.00
OO - Employee Only - Part Time	\$418.00	\$418.00	\$209.00	\$418.00
TT - Employee Plus One - Part Time	\$774.00	\$774.00	\$387.00	\$774.00
MM - Family - Part Time	\$1,131.00	\$1,131.00	\$565.50	\$1,131.00

COVA Care OON (BES – CC1)

Provider Code: 43

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$50.00	\$428.00	\$214.00	\$428.00
DD - Employee Plus One	\$112.00	\$787.00	\$393.50	\$787.00
FF - Family	\$158.00	\$1,149.00	\$574.50	\$1,149.00
OO - Employee Only - Part Time	\$428.00	\$428.00	\$214.00	\$428.00
TT - Employee Plus One - Part Time	\$787.00	\$787.00	\$393.50	\$787.00
MM - Family - Part Time	\$1,149.00	\$1,149.00	\$574.50	\$1,149.00

COVA Care ED (BES – CC2)

Provider Code: 44

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$52.00	\$430.00	\$215.00	\$430.00
DD - Employee Plus One	\$123.00	\$798.00	\$399.00	\$798.00
FF – Family	\$176.00	\$1,167.00	\$583.50	\$1,167.00
OO - Employee Only - Part Time	\$430.00	\$430.00	\$215.00	\$430.00
TT - Employee Plus One - Part Time	\$798.00	\$798.00	\$399.00	\$798.00
MM - Family - Part Time	\$1,167.00	\$1,167.00	\$583.50	\$1,167.00

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COVA Care OON/ED (BES – CC3)

Provider Code: 45

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$62.00	\$440.00	\$220.00	\$440.00
DD - Employee Plus One	\$136.00	\$811.00	\$405.50	\$811.00
FF - Family	\$194.00	\$1,185.00	\$592.50	\$1,185.00
OO - Employee Only - Part Time	\$440.00	\$440.00	\$220.00	\$440.00
TT - Employee Plus One - Part Time	\$811.00	\$811.00	\$405.50	\$811.00
MM - Family - Part Time	\$1,185.00	\$1,185.00	\$592.50	\$1,185.00

COVA Care V/H/ED (BES – CC4)

Provider Code: 46

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$61.00	\$439.00	\$219.50	\$439.00
DD - Employee Plus One	\$139.00	\$814.00	\$407.00	\$814.00
FF - Family	\$197.00	\$1,188.00	\$594.00	\$1,188.00
OO - Employee Only - Part Time	\$439.00	\$439.00	\$219.50	\$439.00
TT - Employee Plus One - Part Time	\$814.00	\$814.00	\$407.00	\$814.00
MM - Family - Part Time	\$1,188.00	\$1,188.00	\$594.00	\$1,188.00

COVA Care Full (BES – CC5)

Provider Code: 47

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$71.00	\$449.00	\$224.50	\$449.00
DD - Employee Plus One	\$152.00	\$827.00	\$413.50	\$827.00
FF - Family	\$214.00	\$1,205.00	\$602.50	\$1,205.00
OO - Employee Only - Part Time	\$449.00	\$449.00	\$224.50	\$449.00
TT - Employee Plus One - Part Time	\$827.00	\$827.00	\$413.50	\$827.00
MM - Family - Part Time	\$1,205.00	\$1,205.00	\$602.50	\$1,205.00

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COVA Care High Deductible (BES – CHD)

Provider Code: 50

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$0.00	\$335.00	\$167.50	\$335.00
DD - Employee Plus One	\$0.00	\$620.00	\$310.00	\$620.00
FF - Family	\$0.00	\$906.00	\$453.00	\$906.00
OO - Employee Only - Part Time	\$335.00	\$335.00	\$167.50	\$335.00
TT - Employee Plus One - Part Time	\$620.00	\$620.00	\$310.00	\$620.00
MM - Family - Part Time	\$906.00	\$906.00	\$453.00	\$906.00

KAISER PERMANENTE (BES – KP)

Provider Code: 06

<u>Employee Coverage Code</u>	<u>Employee Cost (Monthly)</u>		<u>Agency Payment</u>	
	Medical LWOP	Non-Medical LWOP	Semi-Monthly	Monthly
SS - Employee Only	\$39.00	\$404.00	\$202.00	\$404.00
DD - Employee Plus One	\$96.00	\$747.00	\$373.50	\$747.00
FF - Family	\$135.00	\$1,091.00	\$545.50	\$1,091.00
OO - Employee Only - Part Time	\$404.00	\$404.00	\$202.00	\$404.00
TT - Employee Plus One - Part Time	\$747.00	\$747.00	\$373.50	\$747.00
MM - Family - Part Time	\$1,091.00	\$1,091.00	\$545.50	\$1,091.00

June 2006

10 of 16

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1 Payday for semimonthly salaried employees	2	3
4	5	6	7	8	9	10
11	12 Semimonthly salaried certification Period# 1-(5/25-6/09)	13	14	15 Leave keying Deadline (5/25-6/09) May Healthcare Certification due	16 Payday for semimonthly salaried employees	17
18	19	20	21	22	23	24
25	26 Semimonthly salaried certification Period #2 (6/10-6/24), charged to FY 06 – must have check date of June 30. NO PAYRUNS FOR FY07	27 NO PAYRUNS FOR FY07	28 Last Day to certify Special/Wage payrolls for FY 06 – must have check date of June 30. CIPPS down at 2pm for FYE processing and Qtr Roll NO PAYRUNS FOR FY07	29 Leave keying Deadline (6/10-6/24) FY 07 Payroll Processing Begins – July check dates only	30 Payday for semimonthly salaried employees CIPPS Files down until mass trans for programmatic changes are done	

July 2006

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1 CIPPS Files Open – No payruns or edits
2 CIPPS Files Open – No payruns or edits	3 HOLIDAY CIPPS Files Open – No payruns or edits	4 HOLIDAY CIPPS Files Open – No payruns or edits	5	6	7	8
9	10 Semimonthly salaried certification Period# 1-(6/25-7/09)	11	12	13 Leave keying Deadline (6/25-7/09)	14 Payday for semimonthly salaried employees	15
16	17	18	19 2nd Qtr Recon of taxable wages due to DOA.	20	21	22
23	24	25	26 Semimonthly salaried certification Period #2 (7/10-7/24)	27	28	29
30	31 Leave keying Deadline (7/10-7/24) June Healthcare Certification due					

August 2006

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1 Payday for semimonthly salaried employees	2	3	4	5
6	7	8	9	10 Semimonthly salaried certification Period# 1 (7/25-8/09)	11	12
13	14	15 Leave keying Deadline (7/25-8/09)	16 Payday for semimonthly salaried employees	17	18	19
20	21	22	23	24	25	26
27	28 Semimonthly salaried certification Period #2 (8/10-8/24)	29	30	31 Leave keying Deadline (8/10-8/24) July Healthcare Certification due		

September 2006

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1 Payday for semimonthly salaried employees	2
3	4 HOLIDAY	5	6	7	8	9
10	11 Semimonthly salaried certification Period#1 (8/25-9/09)	12	13	14 Leave keying Deadline (8/25-9/09)	15 Payday for semimonthly salaried employees	16
17	18	19	20	21	22	23
24	25 Semimonthly salaried certification Period#2 (9/10-9/24)	26	27	28 Leave keying Deadline (9/10-9/24)	29 Payday for semimonthly salaried employees August Healthcare Certification due	30

October 2006

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
8	9 HOLIDAY	10 Semimonthly salaried certification Period #1(9/25-10/09)	11	12 3 rd Qtr Recon of taxable wages due to DOA.	13 Leave keying Deadline (9/25-10/09)	14
15	16 Payday for semimonthly salaried employees	17	18	19	20	21
22	23	24	25	26 Semimonthly salaried certification Period#2 (10/10-10/24)	27	28
29	30	31 Leave keying Deadline (10/10-10/24) September Healthcare Certification due				

November 2006

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1 Payday for semimonthly salaried employees	2	3	4
5	6	7	8	9 Semimonthly salaried certification Period #1(10/25-11/09)	10 HOLIDAY	11
12	13	14	15 Leave keying Deadline (10/25-11/09)	16 Payday for semimonthly salaried employees	17	18
19	20	21	22	23 HOLIDAY	24 HOLIDAY	25
26	27 Semimonthly salaried certification Period#2 (11/10-11/24)	28	29	30 Leave keying Deadline (11/10-11/24) October Healthcare Certification due		