

# MEDICAL CLAIM PROCESS FOR EXECUTIVES THROUGH ESS/MSS

The manual will elaborate the entire medical claim reimbursement process for Executives of Coal India.

The process flow is as mentioned below:

- >>>Applicant applying through his/her ESS credentials and SUBMIT.
- >>> Claims moved to concerned HODs MSS for approval .
- >>> After HODs approval claim moves to the approval levels as maintained.
- >>> After workflow approvals are completed claim to be processed for payment.
- >>> Run T code: HRBPSIN\_AC\_INFU for posting to IT0015.
- >>> Payment of the same shall be made through monthly payroll. If 'Off-cycle requested' button is ticked by applicant, then it can be paid through off-cycle

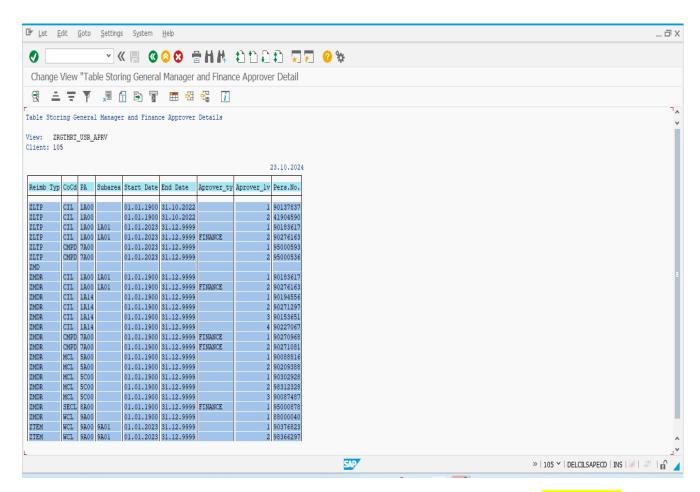


#### Prerequisites to follow before the process

Need to maintain a table **ZRGTHRT\_USR\_APRV** (SM30)

T code for this table is **ZHCM USR APPV** 

The table is used to maintain the approver level through which the claims will flow to approvers after HOD. The existing system allows it to flow up to 5 levels after HOD's approval.

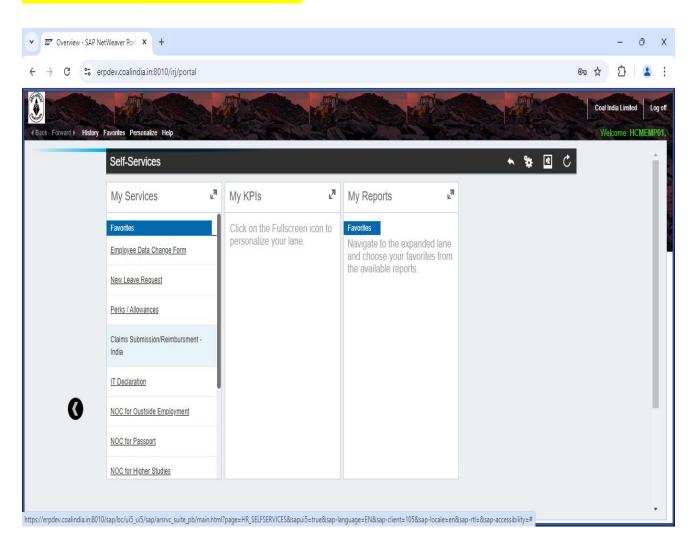


In this table we need to maintain Reimbursement Type **ZMDR**, Company Code, PA, PSA, Start date, End date, Approval Level & EIS Number as per level.



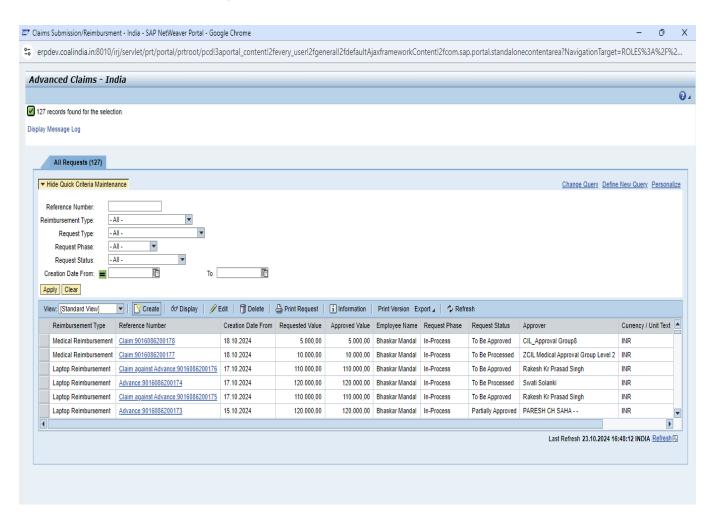
#### **ESS Applicant login steps:**

Initial login page >>> My Services >>> Claims
Submission/Reimbursement-India



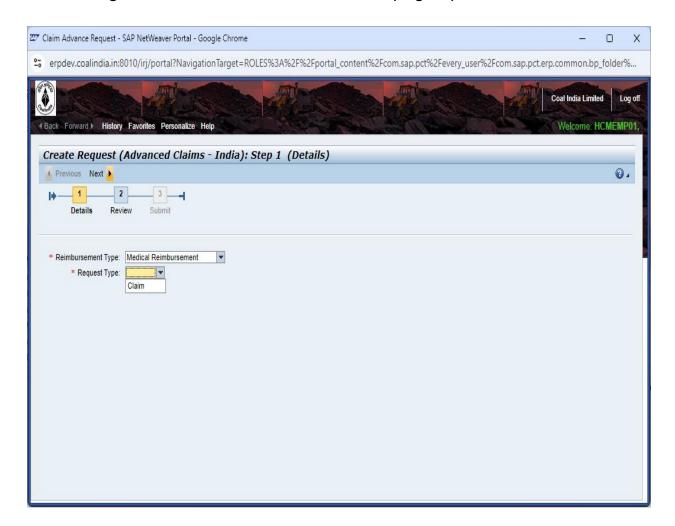


#### The below mentioned page opens and click on Create:





On clicking on Create, the below mentioned page opens:

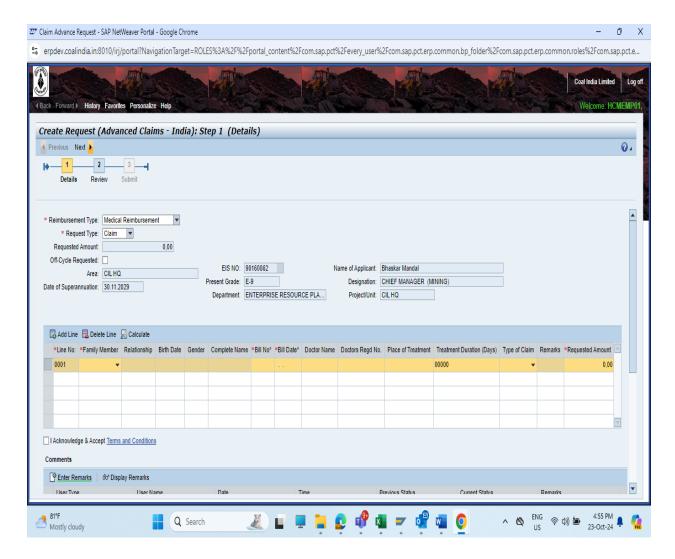


### Reimbursement Type will be: Medical Reimbursement. Request type will be Claim.

On entering these details, the entry page for applicant opens where applicant needs to enter all the mandatory fields and submit his/her application.



#### Entry page for applicants:



In the upper part of the applicant page you can see fields will be auto filled as those will be fetched from info types.



The mandatory fields that needs to be filled by the applicants are mentioned below:

**Family Member:** The drop down will show the list of family members who has been marked as Medical Dependant "Yes" in IT0021. On selecting the family member, the fields Relationship, Birth date, Gender & Complete Name will be auto filled.

Bill No: Medical bill no. is a mandatory field and needs to be filled.

Bill Date: Bill date must be current or past dates. No future bill dates will

be accepted by the system. Validation is present in the system.

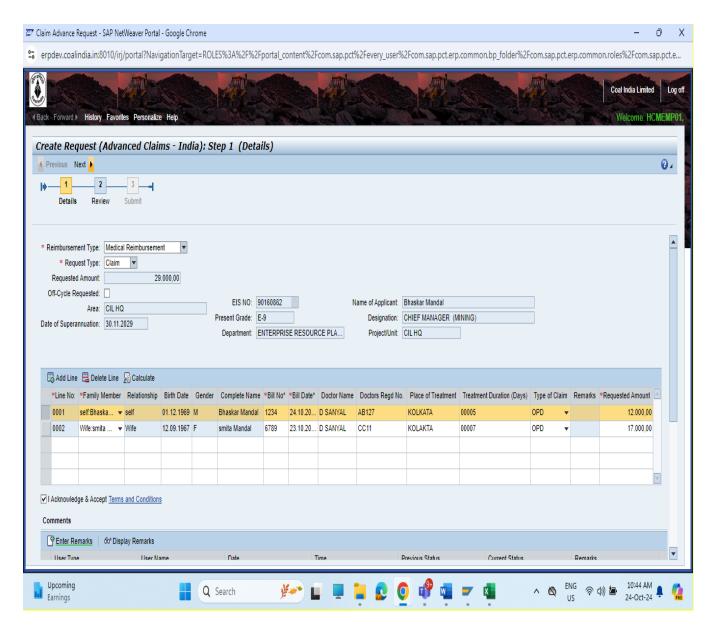
**Requested Amount :** Need to enter the bill amount in INR.

Fields: Doctors name, Doctors Regd. No., Place of Treatment, Treatment Duration days and Type of claim (OPD/IPD) are not mandatory but are suggested to be filled.

- \*\* If the applicant wants to upload the bills for 2 of his/her medical dependant members then he/she can do the same by clicking on the add line option.
- \*\* For entering remarks/comments, applicants need to click on "Enter remarks" tab and enter the same.
- \*\* Before submitting the application, applicants must note that documents uploading for the concerned (prescriptions, bill etc. as per business) is mandatory. Documents to be uploaded in the attachment section by selecting line nos. In every line you can enter 3 attachments of 800KB. Total size of all attachments are fixed to 2400KB.
- \*\* If you want to read Terms & condition click on the same to read it. Click on the checkbox: I Acknowledge & Accept & then Review & Submit. Refer to the screenshot below.

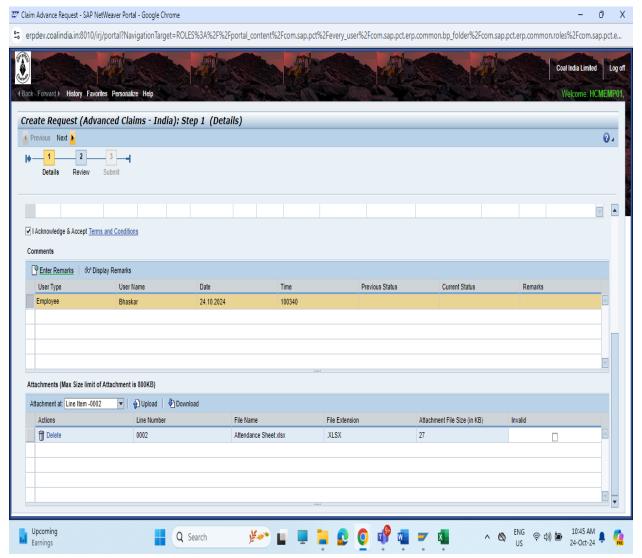


#### Applicant page screenshot Top part :





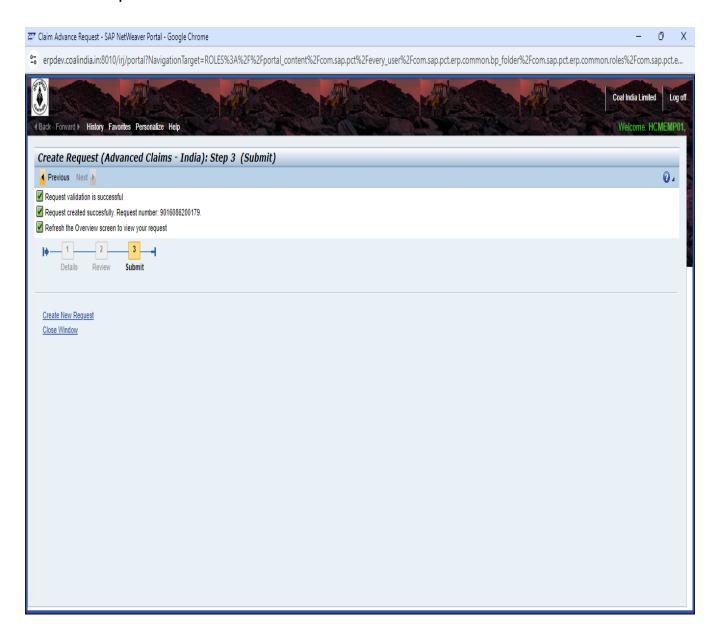
#### Applicant page screenshot Bottom part :



Click on Review & Submit.



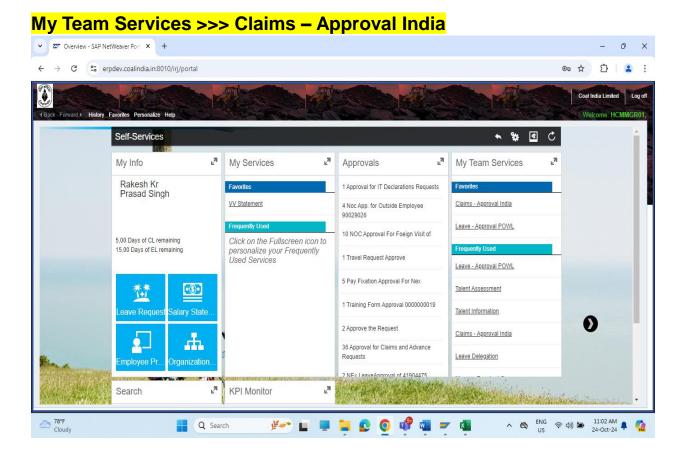
On submitting the application, system will generate a 13-digit application number as per the below mentioned screenshot :



Generation of application number means that your claim has been submitted to concerned HOD that will be fetched from Organisational Structure.

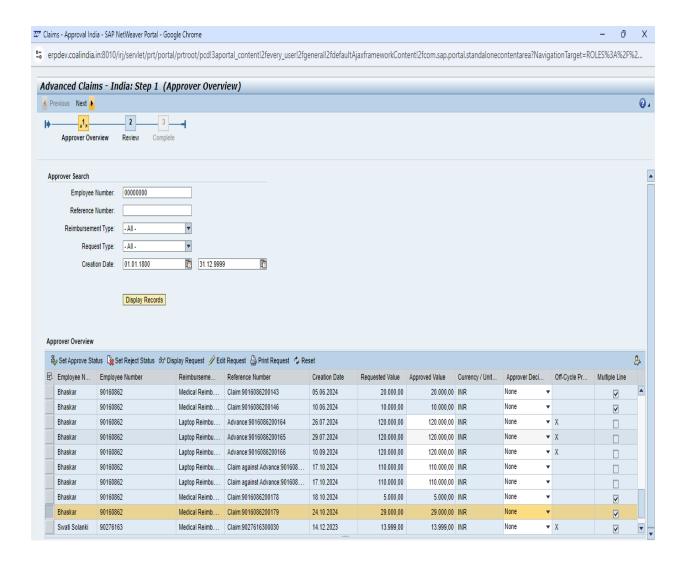
\*\* Kindly note that is HOD is not maintained in Org. structure of the concerned department then the application is directly move the concerned that has been maintained in Level 1 under table : **ZRGTHRT\_USR\_APRV.** 

HODs needs to login to his/her MSS and follow the below mentioned path to check and approve the claim :



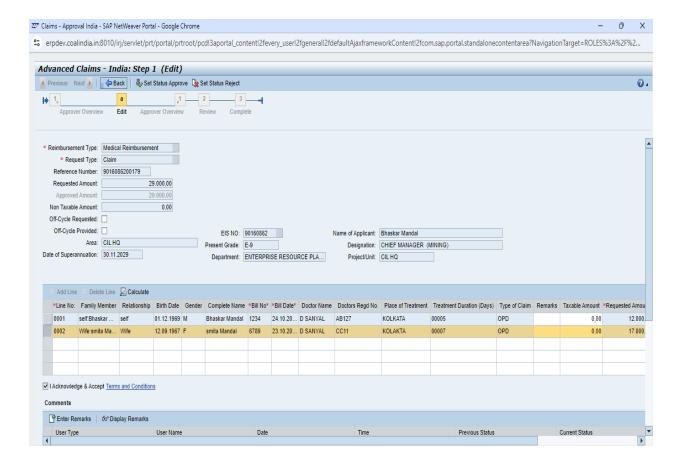
#### **Click on Claims- Approval India**

The approvers overview screen will show the claim as per the below mentioned screenshot



If approver wants to check the claim then he/she will select the claim line item and click on Edit request and check

Check the below mentioned screenshot:



If everything found ok the approver and click on "Set Status Approve" >>> Review >>> Complete.

If any data or document found wrong or missing in the application, approver can click on "Set Status Reject" and reject the claim. On rejecting, the application will be sent back to applicant for revision & resubmission are per approvers comment.

On HODs approval the application moves as per the levels maintained in table: **ZRGTHRT\_USR\_APRV.** 

Once the claim moves to the level where the FINANCE department is involved then if such claims are found where amount of claim needs to be bifurcated between Taxable & Non-Taxable, Finance department has the provision to do the same as per the below screenshot.

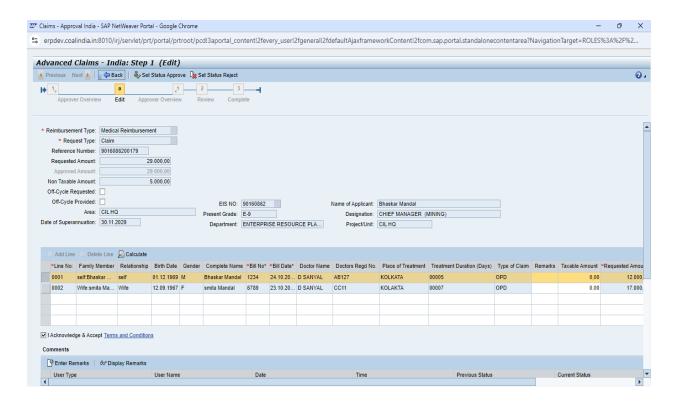
Kindly note that the Non-Taxable field is a mandatory field. If bifurcation

needs to be made, then Finance department needs to put the Non-taxable field. Formula set is: Approved amount- Non-Taxable amount=

Taxable amount (Auto calculated).

Finance department is also allowed to edit the Approved amount if the Requested Amount is fully not approved. The editable fields are:

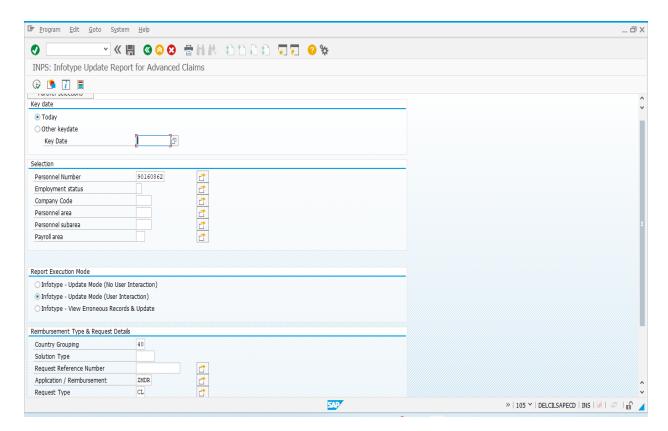
"Approved Amount" & "Non-Taxable Amount".





After all the approvals are completed in MSS, we need to run a T code to post the amount of medical claim in Info type.

T code: HRPBSIN\_AC\_INFU. (to execute this program only on Exit Mode of control record ) Take a note of the below screen shot



Selection screen can be controlled as per convenience.

In Report Execution Mode: Also try to select "Info Type- Update

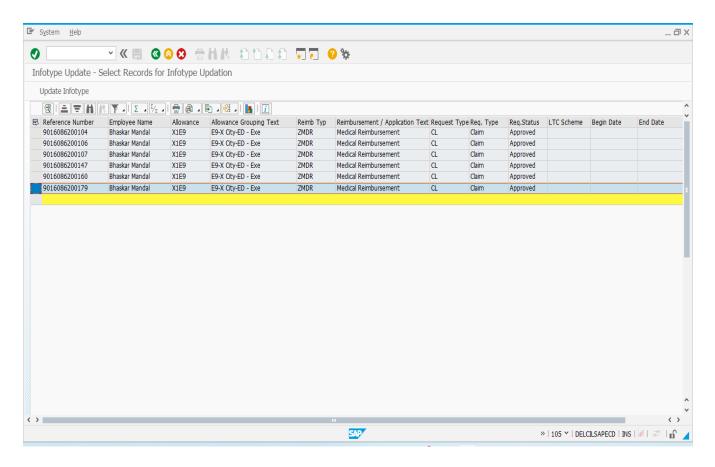
Mode" (User Interaction)

Request Type: CL

Application/ Reimbursement : ZMDR (for Medical Claims).



On executing the T code, the following page comes:

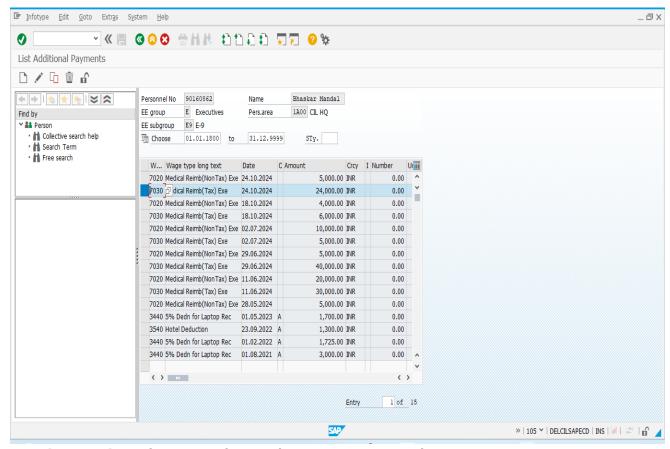


Check the claim that you want to post from the Creation date, select the line item and click on "Update Info type" tab to post the same on IT0015.

The line item will populated a message "Info type(s) Updated Successfully".



On checking IT0015 (Additional Payments) it is found that the amount is posted on the date when the program will run (system date). The bifurcation made by Finance team in respect of Taxable & Non-Taxable is also posted in IT0015



Medical Reimb (Non-Tax) Exe (Wagetype 7020).

Medical Reimb (Tax) Exe (Wagetype 7030).

If the amount is not bifurcated then the entire amount will be posted in wage type 7030. (As per business).







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### **PROJECT PASSION**



For more details visit - https://www.coalindia.in/en-us/home/erp\_connect.aspx