# **ReedGroup**®

# VLDP Employer Training LeavePro<sup>tm</sup> Reference Manual

**Revised November 2017** 

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#### Accessing LeaveProtm

- In this lesson, you will learn how to:
  - Register as a new user in LeavePro<sup>tm</sup>
  - Log In to LeavePro<sup>tm</sup>
  - Change your Password





page

### Register as a new user in LeavePro<sup>tm</sup>



# **New User Registration**

Please use the fields below so we may verify you against your employer's information and begin the user registration process.



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### Register as a new user in LeavePro<sup>tm</sup>



#### **New User Creation**

Enter The fields below to create your user account.

#### Secure password tips:

Use at least 8 characters, containing at least one number, one upper case letter, and one lower case letter Do not use the same <u>password</u> you have used with us previously. Do not use dictionary words, your name, e-mail address, or other personal information that can be easily obtained. Do not use the same password for multiple online accounts.

| User Id              |        |      | ~ |   |   | (      | Supply a User ID.                 |
|----------------------|--------|------|---|---|---|--------|-----------------------------------|
| Password             |        |      | 4 |   |   | $\geq$ | Password and<br>Email to create a |
| Confirm Password     |        |      | K |   | 1 |        | user                              |
| Correspondence Email |        |      | K | / |   |        |                                   |
| Confirm Email        |        |      | K |   |   |        |                                   |
|                      | cancel | Next |   |   |   |        |                                   |

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## Change your Password



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## LeavePro<sup>TM</sup> for Employers > Check on Disability Claims

- In this lesson, you will learn how to:
  - Search for an employee
  - $\circ$  View employee information
  - View and print claim information
  - Create new leave request
  - Change dates of leave request
  - Cancel leave request



## **Employer Home Page**

HOME MY REPORTS **EMPLOYEES** Click the **Employees** My Home Tab for information Home - My Home about your Welcome to interactive Absence Manager (iAM), your se vice resource for employee leave administration. Click on each of the tabs at the top of the page to navigate through the site. Use the eset your password or set up your e-mail address to receive report notifications and other communications from this application. Click on Site Settings & Preferences link at the top of the pa Help at the top right for additional iAN site help. employees Here's what you'll fin oyees - Search, view and edit employees' personal, job and leave information, as well create a new leave request and view an employee's leave history. Access leave summary information and view and print detailed leave chronology Click the My Reports - Create, access and customize leave reports. Save your customized settings and create scheduled recurring reports My Reports Tab to access reports



## Search for an employee

|  | HOME   | EMPLOYEES                              | MY REPORTS                 | ADMINISTRATORS' TOOLS |  |
|--|--|--|----------------------------|-----------------------|--|
| Type any part of an<br>employee's name             | Employee Search<br>Employee Search<br>Search for employees by their first or last  | st name, e-mail address, or employee r | number in the field below. |                       |  |
| Click Go   | Find an Employee   | Go                                     |                            |                       |  |
| Click the <b>employee</b> you<br>are searching for | 2 results returned.<br>Alan, Josh<br>Employee Number: 21730<br>Email: JAlan@reedgroupdemo.co<br>Sherwood, Alicia<br>Employee Number: 11145<br>Email: ASherwood@reedgroupde | emo.com                                |                            |                       |  |



# View employee information

|        | HOME  |                                     | EMPLOYEES                                 | MY REP           | ORTS A   | ADMINISTRAT   | ORS' 1  | FOOLS                         | 5   |             |                    |                    |
|--------|---|-------------------------------------|---|------------------|--|---|---|-------------------------------|---|-------------|--------------------|--------------------|
| e page | Alicia Sherv  | wood: E                             | mployee Home                              |                  |  |   |   |                               | _   |             |                    |                    |
| ce 🔨   | < Select a different em                                   | ployee                              |   | Croato New Leave | Poquest  |   |   |                               |   |             |                    |                    |
| /es    | Open Leaves   | Sence                               |   | Cleate New Leave | <u>Nequest</u>   |   |   |                               |   |             |                    |                    |
|        | ☆ Time Off Request  | s can be mad                        | e by clicking on an open le               | eave.            |  |   |   |                               |   |             |                    |                    |
| tion   | LCSVE ID<br>439866306607                                  | Leave T<br>Employe                  | it <b>le</b><br>e Health Condition - 6607 | _                | _  | Start Da<br>04/20/20  | te<br>15  | End<br>05/3                   | Date<br>1/2015                                |             |                    |                    |
|        | Leave ID<br>221001951925<br>224087764563<br>Personal Info | Leave T<br>1925<br>4563<br>ormation | itle                                      |                  | Job Infor  | Start Da  | te  | End                           | Date  |             | contin<br>contin   | ue<br>ue           |
|        | Name:<br>Email Address:                                   | Alicia She<br>ASherwoo              | rwood<br>d@reedgroupdemo.com              |                  | Employee #:<br>Hire Date:<br>Job Status:<br>Job Title:<br>Work State:<br>Hours Worke<br>Last 12 Mon<br>Work Addres | ed 1114<br>Thurs<br>Active<br>SALE<br>CA<br>CA<br>1600<br>ths:<br>ss: 1015<br>Suite<br>Westr<br>UNITE<br>ule: Sun<br>8:00 | 5<br>day, Au<br>REP<br>5 WEST<br>210<br>minster,<br>ED STA<br>Mon<br>0:00 | MOOR<br>CO 800<br>TES<br>0:00 | 2, 1999<br>DRIVE<br>021<br><u>Wed</u><br>0:00 | Thu<br>8:00 | <b>Fri</b><br>8:00 | <b>Sat</b><br>8:00 |
|        | 1   |                                     |   |                  |  |   |   |                               |   |             |                    |                    |
|        | Leave Plan B  | alance Sl                           | ieet                                      |                  |  |   |   |                               |   |             |                    |                    |

# The Employee Home page provides:

- Leaves of Absence
  - o Open Leaves
  - o Incomplete Leaves
- Job Information
- Personal Information
- Leave Plan Balance Sheet

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### View and print claim information

Click the **Leave ID** you would like to view

| HOME  |                                     | EMPLOYEES                                  | MY REPORTS  | ADMINISTRA  | TORS' TOOL   | S                                  |      |                  |          |
|---|-------------------------------------|--|---|---|--|------------------------------------|------|------------------|----------|
| Alicia Sherv  | wood: E                             | mployee Home                               |   |   |  |                                    |      |                  |          |
| Leaves of Ab  | sence                               |  | Create New Leave Request  |   |  |                                    |      |                  |          |
| Dpen Leaves   | s can be mad                        | le by clicking on an open le               | eave.   |   |  |                                    |      |                  |          |
| eave ID<br>39866306607                                | Leave 1<br>Employ                   | <b>Fitle</b><br>ee Health Condition - 6607 |   | Start Da<br>04/20/20  | ate En<br>015 05/  | d Date<br>31/2015                  |      |                  | -        |
| eave ID<br>21001951925<br>24087764563<br>Personal Inf | Leave 1<br>1925<br>4563<br>ormation | lītle                                      | Job Inf   | Start Da  | ate En   | d Date                             |      | contin<br>contin | ue<br>ue |
| Name:<br>Email Address:                               | Alicia She<br>ASherwoo              | erwood<br>od@reedgroupdemo.com             | Employee<br>Hire Date<br>Job Statu<br>Job Title:<br>Work Sta<br>Hours Wo<br>Last 12 N<br>Work Add | e #: 1114<br>:: Thurs<br>Is: Activ<br>: SALE<br>te: CA<br>forked 1600<br>Months:<br>dress: 1015<br>Suite<br>West<br>UNIT<br>hedule: Sun | 15<br>sday, August<br>E REP<br>55 WESTMOO<br>210<br>tminster, CO 8<br>ED STATES<br>Mon Tue | 12, 1999<br>R DRIVE<br>0021<br>Wed | Thu  | Fri              | Sat      |
|   |                                     |  |   | 8:00  | 0:00 0:00  | 0:00                               | 8:00 | 8:00             | 8:00     |

| Leave Plan Name       | Entitlement Amount | Used | Remaining | Leave Reasons                                  |
|-----------------------|--------------------|------|-----------|--|
| Short Term Disability | 26 cw              | 0    | 26        | Employee Health Condition, Pregnancy/Maternity |
| Long Term Disability  | Unlimited          | 0    |           | Long Term Disability                           |



## View and print claim information

|     |                            | HOME   | EMPLOYEES   | MY REPORTS  | ADMINISTRATORS' TOOLS  |                                 |
|-----|----------------------------|--|---|---|--|---------------------------------|
| Vie | w claim information.       | Employee Summary Char  | nge dates of leave Change facts of I  | eave Cancel leave   |  |                                 |
| •   | Data racaivad              | Alicia Sherwood  | Leave of Absence  | : #439866306607   |  |                                 |
| •   |                            | Please review the information below<br>circumstances. If applicable, you m | v regarding the employee's leave. If this<br>av also report intermittent time or confir | s is an open leave, you may cancel th<br>m the employee's return to work date | e leave (if not yet started) or change the<br>by clicking on the active (blue) links below | leave dates under certain<br>w. |
| •   | Leave little               | < go back to employee summary  | -,  |   | .,   |                                 |
| •   | Time Period                | Date Received: 04/08/2015  | 0   |   |  |                                 |
| •   | Leave Type 📃 💊             | Time Period: 04/20/2015 - 0  | h Condition - 6607, (Open) Cano<br>5/31/2015 Change dates of leav                       | el leave - Change facts of leave<br>e   | 9  |                                 |
| •   | Leave Schedule             | Available Actions: Print leave   | ve details  |   |  |                                 |
| •   | Hours Summary              | Leave Schedules  |   |   |  |                                 |
|     | As of this period          | Continuous   |   |   |  |                                 |
|     | As of leave end            | 4/20/2015 - 5/31/2017<br>Sun   | Mon Tue Wed Thu Fri S   | at  |  |                                 |
| •   | Leave Summary              | Hours Scheduled 8:00   | 0:00 0:00 0:00 8:00 8:00 8  | :00   |  |                                 |
|     | Last day worked            |  | f 04/20/2015)   |   |  |                                 |
|     | Estimated RTW              | Hours summary (as o  | 104/20/2015)  |   |  |                                 |
| •   | Forms and Notifications    | Hours used:  |   | Hours available:  |  |                                 |
|     |                            | Hours Summary (as o  | f leave end 05/31/2015)   |   |  |                                 |
| Pri | int claim information: 🚺   | Hours used:  |   | Hours available:  |  |                                 |
| Cli | ck Print leave details 🛛 🐴 | Leave Summary  |   |   |  |                                 |
|     |                            | Last Day Worked: 04/17/201   | 5   |   |  |                                 |
|     |                            | Estimated partial return to we<br>Actual partial return to work:           | ork: not supplied   |   |  |                                 |
|     |                            | Estimated full duty return to work   | work: 06/01/2015  |   |  |                                 |
|     |                            |  |   |   |  |                                 |
|     |                            | Forms and Notification   | ns  |   |  |                                 |
|     |                            | There are currently no forms or noti<br>should be here please contact you  | fications available for you to download<br>r leave manager.                             | online or you do not have permission  | to view this information. If you feel there  | are notifications or forms that |



11/21/2017

## View and print claim information

#### Print Leave Detail Report: 439866306607

#### Personal Information:

Name: Alicia Sherwood E-mail Address: ASherwood@reedgroupdemo.com

#### Employment Information:

Employee #: 11145 Hire Date: 8/12/1999 Status: Active

Title: SALE REP Location: Work Address: 10155 WESTMOOR DRIVE Suite 210 Westminster, CO 80021 United States Work State: California Work Schedule: Sun Mon Tues Wed Thurs Fri Sat 8:00 0:00 0:00 0:00 8:00 8:00 8:00

Employment Contacts:

| Jim Miller (Human Resources)         | Mary Thompson (Supervisor)                 |
|--------------------------------------|--|
| Phone Number:                        | Phone Number: (303) 500-5878               |
| Email Address: JMiller@reedgroup.com | Email Address: MThompson@reedgroupdemo.com |

#### Leave Information:

| Leave Reason: Employee<br>Leave Title: Employee<br>Leave Type: Continuo<br>Leave Schedule:<br>Continuous<br>4/20/2015 - 5/31/2018 | yee H<br>Healt<br>us Lea<br>5 | ealth C<br>h Con<br>ave | Conditi<br>dition - | on<br>•6607 |      |      |      |
|---|-------------------------------|-------------------------|---------------------|-------------|------|------|------|
|   | Sun                           | Mon                     | Tue                 | Wed         | Thu  | Fri  | Sat  |
| Hours Scheduled   | 8:00                          | 0:00                    | 0:00                | 0:00        | 8:00 | 8:00 | 8:00 |
| Leave Plan(s):<br>Status: Open  |                               |                         |                     |             |      |      |      |

Date Submitted: 04/08/2015 Initial Requested Start Date: 04/20/2015 Initial Requested End Date: 05/31/2015

Estimated RTW Date: 06/01/2015

#### Leave Plan Details:

Job Protected Leave Plan Time Used Time Remaining

From To Determination Leave Type Leave Plan

#### Leave Chronology:

| Date/Time              | Event  |
|------------------------|--|
| 04/08/2015 6:55 AM MDT | Self Service Intake completed, Assigned case manager |

# The Leave Detail Report provides:

- Personal Information
- Employment Information
- Leave Information
- Leave Plan Details
- Leave Chronology

From your browser, select the print function to print the report to either paper or a PDF



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# Create new leave request

#### Click **<u>Create New Leave Request</u>**

| HOME  |   | EMPLOYE  | ES   | MY  | Y REPOR  | TS  | ADMINIS  | STRAT  | ORS' 1  | FOOLS  | 5   |   |  |  |  |
|---|---|--|--|---|--|---|--|--|---|--|---|---|--|--|--|
|   |   |  |  |   |  |   |  |  |   |  |   |   |  |  |  |
| Alicia Sherw  | ood: E  | mployee He   | ome  | Croate New  |  | aquart  |  |  |   |  |   |   |  |  |  |
| Personal Info   | rmation   |  |  |   |  | Job In  | formatio   | n  |   |  |   |   |  |  |  |
| Name:<br>Email Address:<br>Gender:<br>Date of Birth:<br>Marital Status:<br>Correspondence<br>Address:<br>Phone Numbers: | Alicia She<br>ASherwoo<br>Female<br>Saturday,<br>Married<br>11156 FIII<br>Westmins<br>UNITED S<br>Home: (30<br>Work: (30) | rwood<br>d@reedgroupdemo.<br>November 30, 1968<br>more Ave.<br>ter, CO 80021<br>STATES<br>I3) 888-1234<br>3) 888-5678  | com  |   |  | Employe<br>Hire Date<br>Job Statu<br>Job Title<br>Work Sta<br>Hours W<br>12 Month<br>Work Ad  | e #:<br>::<br>:<br>ite:<br>orked Last<br>is:<br>dress:<br>hedule:  | 11145<br>Thurse<br>Active<br>SALE<br>CA<br>1600<br>10155<br>Suite<br>Westr<br>UNITE<br>Sun   | WEST<br>210<br>minster,<br>2D STA<br>Mon  | gust 12<br>MOOR<br>CO 800<br>TES<br>Tue  | , 1999<br>DRIVE<br>021<br>Wed   | Thu   | Fri  | Sat  |  |
|   | HOME  | HOME Alicia Sherwood: E Select a different employee Leaves of Absence Personal Information Name: Email Address: Gender: Date of Birth: Correspondence Address: Phone Numbers: Home: (30) | HOME EMPLOYE<br>Alicia Sherwood: Employee<br>Sect a different employee<br>Leaves of Absence<br>Personal Information<br>Name: Alicia Sherwood<br>Email Address: ASherwood@reedgroupdemo.<br>Gender: Female<br>Date of Birth: Saturday, November 30, 1968<br>Marital Status: Married<br>Correspondence 11156 FIIImore Ave.<br>Address: Vestminster, CO 80021<br>UNITED STATES<br>Phone Numbers: Home: (303) 888-1234<br>Work: (303) 888-5678 | HOME       EMPLOYEES         Alicia Sherwood: Employee Home         State different employee         Leaves of Absence         Dersonal Information         Mame:       Alicia Sherwood@reedgroupdemo.com         Email Address:       ASherwood@reedgroupdemo.com         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Married!       Married!         Correspondence:       11156 Fillmore Ave.         Address:       Married!         Phone Numbers:       Home: (303) 888-1234         Work:       (303) 888-5678 | HOME       EMPLOYEES       Million         Alicia Sherwood: Employee Home       Sector different employee       Create New         Leaves of Absence       Create New         Personal Information       Create New         Marital Address:       ASherwood@reedgroupdemo.com         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Marital Status:       Married         Correspondence       1156 Fillmore Ave.         Address:       Westminster, CO 80021         UNITED STATES         Phone Numbers:       Home: (303) 888-1234         Work: (303) 888-5678 | HOME       EMPLOYEES       MY REPOR         Alicia Sherwood: Employee Home         Select a different employee         Leaves of Absence       Create New Leave R         Personal Information         Name:       Alicia Sherwood@reedgroupdemo.com         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Marital Status:       Married         Correspondence       11156 Fillmore Ave.         Address:       Westminster, CO 80021         UNITED STATES         Phone Numbers:       Home: (303) 888-1234         Work: (303) 888-5678 | HOME       EMPLOYEES       MY REPORTS         Alicia Sherwood: Employee Home       State different employee         Leaves of Absence       Create New Leave Request         Personal Information       Job In         Name:       Alicia Sherwood@reedgroupdemo.com         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Marital Status:       Married         Correspondence:       1156 Fillmore Ave.         Mddress:       Work State         Phone Numbers:       Home: (303) 888-1234         Work:       Work: (303) 888-5678 | HOME       EMPLOYEES       MY REPORTS       ADMINIS         Alicia Sherwood: Employee Home       Create New Leave Request       Image: Create New Leave Request         Leaves of Absence       Create New Leave Request       Job Information         Name:       Alicia Sherwood@reedgroupdemo.com       Job Information         Name:       Alicia Sherwood@reedgroupdemo.com       Employee #:         Gender:       Female       Job Status:         Date of Birth:       Saturday, November 30, 1968       Job Status:         Marital Status:       Married       Work State:         Correspondence       11156 Fillmore Ave.       Hours Worked Last         Address:       Westminster, CO 80021       Work State:         Work:       (303) 888-1234       Work (303) 888-5678         Phone Numbers:       Home: (303) 888-5678       Work Schedule: | HOME       EMPLOYEES       MY REPORTS       ADMINISTRAT         Alicia Sherwood: Employee Home       Sector different employee       Sector different employee         Leaves of Absence       Create New Leave Request         Personal Information       Job Information         Name:       Alicia Sherwood         Email Address:       ASherwood@reedgroupdemo.com         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Marital Status:       Married         Correspondence       11156 Fillmore Ave.         Address:       Westminster, CO 80021         UNITED STATES       Work Address:         Phone Numbers:       Home: (303) 888-1234         Work: (303) 888-5678       Work Schedule:         Suite:       Suite         Work Schedule:       Suite | HOME       EMPLOYEES       MY REPORTS       ADMINISTRATORS'T         Alicia Sherwood: Employee Home       Create New Leave Request         Leaves of Absence       Create New Leave Request         Personal Information       Job Information         Name:       Alicia Sherwood@reedgroupdemo.com         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Married       Correspondence 411156 Fillmore Ave.         Address:       Westminster, CO 80021         UNITED STATES       Home (303) 888-1234         Work: (303) 888-5678       Work Schedule:         Sun Mon       8:00 | HOME       EMPLOYEES       MY REPORTS       ADMINISTRATORS' TOOLS         Alicia Sherwood: Employee Home       Create New Leave Request         Leaves of Absence       Create New Leave Request         Personal Information       Job Information         Name:       Alicia Sherwood         Email Address:       Alicia Sherwood         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Married       Correspondence         Correspondence:       11145         UNITED STATES       Work State:         Phone Numbers:       Home: (303) 888-1234         Work: (303) 888-5678       Work Schedule:         Suite 210       Work Schedule:         Suite 210       Work Schedule:         Suite 210       Work Schedule:         Suite 210       Work Schedule: | HOME       EMPLOYEES       MY REPORTS       ADMINISTRATORS' TOOLS         Alicia Sherwood: Employee Home       Secure adifferent employee         Leaves of Absence       Create New Leave Request         Personal Information       Job Information         Name:       Alicia Sherwood@reedgroupdemo.com         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Marital Status:       Married         Correspondence:       11156 Fillmore Ave.         Address:       Westminster, CO 80021         UNITED STATES       Home: (303) 888-1234         Phone Numbers:       Home: (303) 888-5678 | HOME       EMPLOYEES       MY REPORTS       ADMINISTRATORS' TOOLS         Alicia Sherwood: Employee Home       Secure offferent employee         Leaves of Absence       Create New Leave Request         Personal Information       Job Information         Name:       Alicia Sherwood@reedgroupdemo.com         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Married       Wastminster, CO 80021         UNITED STATES       Home Status:         Phone Numbers:       Home: (303) 888-1234         Work: (303) 888-5678       Work Schedule:         Suit Status:       Suit November 200 0:00         Work Schedule:       Suit November 200 0:00         UNITED STATES       Work: (303) 888-5678 | HOME       EMPLOYEES       MY REPORTS       ADMINISTRATORS' TOOLS         Alicia Sherwood: Employee Home       Starte different employee         Leaves of Absence       Create New Leave Request         Personal Information       Job Information         Name:       Alicia Sherwood@reedgroupdemo.com         Email Address:       ASherwood@reedgroupdemo.com         Gender:       Ferale         Dato f Birth:       Saturday, November 30, 1968         Marital Status:       Married         Correspondence       11156 Fillmore Ave.         Address:       Westminster, CO 80021         Work: (303) 888-1523       Work: (303) 888-5678         Phone Numbers:       Home: (303) 888-5678 | HOME       EMPLOYEES       MY REPORTS       ADMINISTRATORS' TOOLS         Alicia Sherwood: Employee Home       Create New Leave Request         Leaves of Absence       Create New Leave Request         Personal Information       Job Information         Name:       Alicia Sherwood         Email Address:       ASherwood@reedgroupdemo.com         Gender:       Female         Date of Birth:       Saturday, November 30, 1968         Married       Correspondence         Correspondence       11156 Fillmore Ave.         Westminster, CQ 80021       Work State:         WintED STATES       Nom Tue         Phone Numbers:       Home: (303) 888-5678 |

| Leave Plan Balance    | Sheet              |      |           |  |
|-----------------------|--------------------|------|-----------|--|
| Leave Plan Name       | Entitlement Amount | Used | Remaining | Leave Reasons                                  |
| Short Term Disability | 26 cw              | 0    | 26        | Employee Health Condition, Pregnancy/Maternity |
| Long Term Disability  | Unlimited          | 0    |           | Long Term Disability                           |



ADMINISTRATORS' TOOLS

#### Create new leave request

#### **View Personal Information**

Note: If anything appears incorrect either Navigator does not have correct information or employee requested an update with Reed Group. Please make sure Navigator is updated with employee information or call the ReedGroup service center to open the new leave at 877-928-7021.

#### Alicia Sherwood: New Leave Request

HOME

EMPLOYEES

| Employee Information   |                  |                          |         |
|--|------------------|--------------------------|---------|
| Title: First Name: * Alicia  | Middle Name:     | Last Name: *<br>Sherwood | Suffix: |
| Email  |                  |                          |         |
| Work Email ASherwood@reedgrou  | updemo.com       |                          |         |
|  |                  |                          |         |
|  |                  |                          |         |
| Notification Preferences   |                  |                          |         |
| Notification Preferences<br>Preferred address for sending leave-related                  | i correspondence |                          |         |
| Notification Preferences Preferred address for sending leave-related Mail                | i correspondence |                          |         |
| Notification Preferences Preferred address for sending leave-related Mail Personal Email | i correspondence |                          |         |

MY REPORTS

#### Click Next

Or click **Cancel** to disregard leave request Or click **Save and finish later** request

### Create new leave request

#### Employment Info

Please verify that all employee job information is correct. Should a change be required in a non-editable field please contact

80021

 $\sim$ 

| View  | Emp   | loyme | nt a | nd | Job |
|-------|-------|-------|------|----|-----|
| Infor | matic | n     |      |    |     |

Note: If anything appears incorrect either Navigator does not have correct information or employee requested an update with Reed Group. Please make sure Navigator is updated with employee information

You are also prompted for Health Care Provider information

Click Next Or click Cancel to disregard leave request Or click Save and finish later request

| Most Recent Hire Date *                          | Employee Status   |  |   |
|--|---|--|---|
|  |   | Job Tille  | 7   |
| 8/12/1999  | Active V  | SALE REP   |   |
| *  | Temp or Rehired? * Adjus  | sted Service Date Termination Date   | e Part Time   |
| fornia 🗸 🗸                                       | No V 8/12   | /1999 💼  | 🛍 No 🗸  |
| Management       Management       Not Selected V | Pay Type         Supervisor           V         Not Selected      | Union Member? Union Named V  | ne  |
| 08/12/1999                                       |   |  |   |
| ۵  |   |  |   |
|  |   |  |   |
| Work Address Line 2                              | City *  | Country *  |   |
| Suite 210  | Westminster   | United States  | s <b>V</b>  |
|  | Management Mot Selected  08/12/1999 Work Address Line 2 Suite 210 | *       Temp or Rehired? *       Adjust 8/12         ornia       No       8/12         tegory       Management       Pay Type       Supervisor         Not Selected       Image: Selected       Not Selected         08/12/1999       Image: Selected       Image: Selected         Work Address Line 2       City *         Suite 210       Image: Selected | *       Temp or Rehired? *       Adjusted Service Date       Termination Date         omia       No       8/12/1999       Image: Complexity of the service Date       Termination Date         tegory       Management       Pay Type       Supervisor       Union Member?       Union Name         Not Selected       V       Not Selected       No       V       V         08/12/1999       Image: City *       Country *       Country *       United States         Suite 210       Suite 210       Vestminster       United States |

#### Work Schedule

Colorado

If work schedule is non-standard (e.g. Monday through Thursday, 10 hours per day) or the below work schedule is incorrect, please contact the Call Center to file your leave request. If work schedule is standard (e.g. Monday through Friday, 8 hours per day) and correct, please verify other job information and click Next to continue.

| Sun *<br>Hours Minutes<br>8 00 V | Mon *<br>Hours Minutes | Tue *<br>Hours Minutes | Wed *<br>Hours Minutes | Thu *<br>Hours Minutes<br>8 00 V | Fri <b>*</b><br>Hours Minutes<br>8 00 V | Sat *<br>Hours Minutes |        |      |
|----------------------------------|------------------------|------------------------|------------------------|----------------------------------|---|------------------------|--------|------|
| Current schedule                 | information is effecti | ve as of 08/12/1999    |                        |                                  |   |                        |        |      |
| Changes should b                 | e effective as of      |                        | 1                      |                                  |   |                        |        |      |
|                                  |                        |                        |                        |                                  |   | Save and finish later  | Cancel | Next |
|                                  |                        |                        |                        |                                  |   |                        |        |      |
|                                  |                        |                        |                        |                                  |   |                        |        |      |
|                                  |                        |                        |                        |                                  |   |                        |        |      |

# **SeedGroup**

## Create new leave request

#### Select a Leave Reason and optional brief description

Note: Short-Term Disability is either "Employee Health Condition: or Pregnancy/Maternaty"

*Do not request Long-Term Disability* 

Click Next Or click Cancel to disregard leave request Or click Save and finish later request

|  | EMPLOYEES        | MY REPORTS | ADMINISTRATORS' TOOLS | 5                            |
|--|------------------|------------|-----------------------|------------------------------|
|  |                  |            |                       |                              |
| Alicia Sherwood: N                       | lew Leave Reques | t          |                       |                              |
| Personal Information                     |                  |            |                       | Revisit Personal Information |
| Employment Info                          |                  |            |                       | Revisit Employment Info      |
| Leave Reason                             |                  |            |                       |                              |
| be notified of all leave requests.       |                  |            |                       |                              |
| Updates via the web apply only to your f | FML leave.       |            |                       |                              |



### Create new leave request

| Enter                     |
|---------------------------|
| <b>Provider/Treatment</b> |
| Dates                     |

Provider/Treatment Da

| Provider/Treatment       | Please enter information for all enabled fields.  |  |  |  |  |  |
|--------------------------|---|--|--|--|--|--|
| Dates                    | Provider/Treatment Dates  |  |  |  |  |  |
|                          | Provider 1  |  |  |  |  |  |
|                          | First Name: Last Name:  |  |  |  |  |  |
|                          |   |  |  |  |  |  |
|                          | Phone Number (xxx-xxx): Ext.  |  |  |  |  |  |
|                          | First Treatment Date:       Most Recent Treatment Date:       Next Treatment Date:         ID       ID       ID   |  |  |  |  |  |
|                          | Provider 2  |  |  |  |  |  |
|                          | First Name: Last Name:  |  |  |  |  |  |
|                          |   |  |  |  |  |  |
|                          | Phone Number (xxx-xxx): Ext.  |  |  |  |  |  |
|                          | First Treatment Date:       Most Recent Treatment Date:       Next Treatment Date:         Image: Imag |  |  |  |  |  |
|                          | Provider 3  |  |  |  |  |  |
|                          | First Name: Middle Name: Last Name:   |  |  |  |  |  |
|                          | Phone Number (xxx-xxx): Ext.  |  |  |  |  |  |
| Click Next               | Eirst Trastmant Data: Next Recent Trastmant Data: Next Trastmant Data:  |  |  |  |  |  |
| Or click Cancol to       |   |  |  |  |  |  |
|                          |   |  |  |  |  |  |
| disregard leave request  | Save and finish later Concol Nort   |  |  |  |  |  |
| Or click Save and finish | Cancel Next   |  |  |  |  |  |
| later request            |   |  |  |  |  |  |



### Create new leave request

Enter Illness/Injury date, a description, if this was work related and if you've filed a workers' compensation claim







### Create new leave request





## Create new leave request

#### Enter Leave Type

- Continuous
- Reduced Schedule
- If Reduced Schedule, enter the number of hours by day

#### Leave Type

Please select the Leave Type and follow the prompts. If the request is for an intermittent or reduced schedule leave, the schedule information must be completed. For all work absence types, enter dates for all enabled fields.

#### Leave Type

Continuous Leave You will not return to work until after the end of your leave

Reduced Schedule

You will stay at work but reduce the number of hours or days worked each week.



#### Click Next

Or click **Cancel** to disregard leave request

Or click Save and finish later request



### **Create new leave request**

#### Verify all entries

- Personal Information
- Employment Info
- Leave Reason
- Leave Dates
- Leave Type
- Leave Summary

| Personal Information      | Revisit Personal Information      |
|---------------------------|-----------------------------------|
| Employment Info           | Revisit Employment Info           |
| Leave Reason              | Revisit Leave Reason              |
| Provider/Treatment Dates  | Revisit Provider/Treatment Dates  |
| Employee Health Condition | Revisit Employee Health Condition |
| Leave Dates               | Revisit Leave Dates               |
| Leave Type                | Revisit Leave Type                |
| Leave Summary             | Revisit Leave Summary             |

#### Leave Confirmation

You have completed the leave intake process. Once you click submit an acknowledgement packet will be automatically generated, this letter will be mailed to you or you can click on your new leave and print the letter from this site. Please review all information and return completed forms promptly. Should you have any questions regarding your request, please call 1-800-111-1111.

#### Leave Confirmation

Your leave ID is 119025128412. Please reference this number when contacting us regarding this leave.

Save and finish later Cancel Submit

#### Click Next

Or click **Cancel** to disregard leave request

Or click Save and finish later request

**S** ReedGroup<sup>®</sup>

#### Create new leave request

10155 WESTMOOR DRIVE

Sun Mon Tue Wed Thu Fri

8:00 0:00 0:00 0:00 8:00 8:00 8:00

Westminster, CO 80021 UNITED STATES

Suite 210

On the Employee Home page, you will see a confirmation that the leave has been requested.

| HOME  | EMPLOYEES  | MY REPORTS  | ADMINISTRATORS'   | TOOLS                  |
|---|--|---|---|------------------------|
| Your leave of   | absence has been successfully created. Y   | 'our leave ID is 616502823813.  |   |                        |
| Alicia Sherv  | vood: Employee Hom   | e   |   |                        |
| Leaves of Ab  | sence  | Create New Leave Request  |   |                        |
| Open Leaves   |  | m   |   |                        |
| 😭 Time Off Requests   | can be made by clicking on an open le  | ave.  |   |                        |
| Leave ID<br>616502823813  | Leave Title<br>Short Term Disability   |   | Start Date<br>05/11/2015  | End Date<br>06/21/2015 |
| Personal Info   | rmation  | Job Info  | ormation  |                        |
| Name:<br>Email Address:<br>Gender:<br>Date of Birth:<br>Marital Status:<br>Correspondence<br>Address: | Alicia Sherwood<br>ASherwood@reedgroupdemo.com<br>Female<br>Saturday, November 30, 1968<br>Married<br>11156 FIIImore Ave.<br>Westminster, CO 80021 | Employee #<br>Hire Date:<br>Job Status:<br>Job Title:<br>Work State<br>Hours Worl<br>12 Months: | H: 11145<br>Thursday, Au<br>Active<br>SALE REP<br>CA<br>ked Last 1600 | ugust 12, 1999         |

| Leave Plan Balance    |                    |      |           |  |
|-----------------------|--------------------|------|-----------|--|
| Leave Plan Name       | Entitlement Amount | Used | Remaining | Leave Reasons                                  |
| Short Term Disability | 26 cw              | 0    | 26        | Employee Health Condition, Pregnancy/Maternity |
| Long Term Disability  | Unlimited          | 0    |           | Long Term Disability                           |

UNITED STATES

Home: (303) 888-1234

Work: (303) 888-5678

Phone Numbers:



Work Address:

Work Schedule:

Sat

ADMINISTRATORS' TOOLS

## Create new leave request

On the Leave of Absence page, the leave will have a determination of

"Pending Determination"

From here, the Reed Group service center begins processing

See the

Short-Term Disability process for more information

#### Alicia Sherwood - Leave of Absence: #616502823813

EMPLOYEES

Cancel leave

Please review the information below regarding the employee's leave. If this is an open leave, you may cancel the leave (if not yet started) or change the leave dates under certain circumstances. applicable, you may also report intermittent time or confirm the employee's return to work date by clicking on the active (blue) links below.

MY REPORTS

#### < go back to employee summary

HOME

Employee Summary

Date Received: 04/01/2015 Leave Title: Short Term Disability (Open) Cancel leave Time Period: 05/11/2015 - 06/21/2015 Change dates of leave Leave Type: Continuous Leave Available Actions: Print leave details

Change dates of leave

#### Leave Schedules

| Continuous<br>5/11/2015 - 6/21/2015 |      |      |      |      |      |      |      |
|-------------------------------------|------|------|------|------|------|------|------|
|                                     | Sun  | Mon  | Tue  | Wed  | Thu  | Fri  | Sat  |
| Hours Scheduled                     | 8:00 | 0:00 | 0:00 | 0:00 | 8:00 | 8:00 | 8:00 |

#### Hours Summary (as of 05/11/2015)

| Hours use  | e <b>d:</b><br>isability   | 0   | Hours available:<br>Long Term Disability | N/A              |                  |
|--|--|---|--|------------------|------------------|
| Hours Sum  | <b>mary</b> (as of lea   | ave end 06/21/2015)                                     |  |                  |                  |
| Hours use  | e <b>d:</b><br>isability   | 0   | Hours available:<br>Long Term Disability | N/A              |                  |
| Leave Sum  | mary   |   |  |                  |                  |
| Last Day Work  | ed: 05/08/2015   |   |  |                  |                  |
| Estimated part<br>Actual partial r<br>Estimated full<br>Actual full duty | tial return to work:<br>return to work: not<br>duty return to work<br>y return to work: no | not supplied<br>supplied<br>: 06/22/2015<br>ot supplied |  |                  |                  |
| From Date  | To Date  | Determination   | Reason                                   | Leave Type       | Leave Plan(s)    |
| 05/11/2015   | 06/21/2015   | Pending Determination                                   |  | Continuous Leave | Long Term Disabi |



### Change dates of leave request

On the Leave of Absence page, click Change dates of leave

| e, | HOME  | EMPLOYEES  | MY REPORTS  | ADMINISTRATORS' TOOLS   | 5                                     |
|----|---|--|---|---|---------------------------------------|
|    | Employee Summary Chan   | nge dates of leave Cancel leave  |   |   |                                       |
|    | Alicia Sherwood -   | Leave of Absence:  | #616502823813   | 3   |                                       |
|    | Please review the information below re<br>approvide, you may also report interm<br>< go back to emprayee summary<br>Date Received: 04/01/2015<br>Leave Title: Short Term Disa<br>Time Period: 05/11/2015 - 06/2<br>Leave Type: Continuous Leave<br>Available Actions: Print leave | egarding the employee's leave. If this is a<br>ittent time or confirm the employee's retu-<br>tionity, (Open) Cancel leave<br>21/2015 Change dates of leave<br>e details | an open leave, you may cancel the<br>im to work date by clicking on the | e leave (if not yet started) or change the leav<br>active (blue) links below. | ve dates under certain circumstances. |
|    | Leave Schedules   |  |   |   |                                       |
|    | Continuous<br>5/11/2015 - 6/21/2015<br>Sun<br>Hours Scheduled 8:00  | Mon Tue Wed Thu Fri S<br>0:00 0:00 0:00 8:00 8:00 8:   | at<br>00  |   |                                       |
|    | Hours Summary (as of  | 05/11/2015)  |   |   |                                       |
|    | Hours used:<br>Long Term Disability   | 0  | Hours available:<br>Long Term Disability                                | N/A   |                                       |
|    | Hours Summary (as of  | leave end 06/21/2015)  |   |   |                                       |
|    | Hours used:<br>Long Term Disability   | O  | Hours available:<br>Long Term Disability                                | N/A   |                                       |
|    | Leave Summary   |  |   |   |                                       |
|    | Last Day Worked: 05/08/2015<br>Estimated partial return to work<br>Actual partial return to work:<br>Estimated full duty return to w<br>Actual full duty return to work   | rk: not supplied<br>not supplied<br>vork: 06/22/2015<br>: not supplied   |   |   |                                       |
|    | From Date To Date   | Determination  | Reason  | Leave Type Leav   | ve Plan(s)                            |
|    | 05/11/2015 06/21/2015   | Pending Determination  |   | Continuous Leave Long   | g Term Disability                     |
|    | Forms and Notification  | ns   |   |   |                                       |

There are currently no forms or notifications available for you to download online or you do not have permission to view this information. If you feel there are notifications or forms that should be here please contact your leave manager.



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## Change dates of leave request

| On the Leave Change page, | HOME                                       | EMPLOYEES                        | MY REPORTS                          | ADMINISTRATORS' TOOLS                     |             |  |  |
|---------------------------|--|----------------------------------|-------------------------------------|---|-------------|--|--|
| enter the updated         | Alicia Sherwood: I                         | Leave Change                     |                                     |   |             |  |  |
| start dates               | Leave Change                               |                                  |                                     |   |             |  |  |
| and end dates             | Input the new leave dates.<br>Leave Change |                                  |                                     |   |             |  |  |
|                           | Start date of leave: * End da<br>5/11/2015 | ate of leave: <b>*</b><br>5/2015 | * Leave End Date cannot b<br>lator) | e earlier than current Requested End Date | c 6/21/2015 |  |  |
|                           | Leave Id: 616502823813                     |                                  |                                     |   |             |  |  |
|                           | Reason for leave request: Cor              | ntinuous Leave                   |                                     |   |             |  |  |
|                           | Leave type: Continuous Leave               | Leave type: Continuous Leave     |                                     |   |             |  |  |
|                           | Requested leave start date: 5/11/2015      |                                  |                                     |   |             |  |  |
|                           | Requested leave end date: 6/2              | 21/2015                          |                                     |   |             |  |  |
| Click Next                |  |                                  |                                     |   | Cancel Next |  |  |

Or click Cancel to disregard request for change of leave dates



## Change dates of leave request

| Leave Summary (as of 04/01/2015)         Hours used:         Long Term Disability       0         Date Information       Leave Information         Leave Id: 616502823813       Short Term Disability         Reason for leave request:       Short Term Disability         Leave type:       Continuous Leave         Requested leave end date:       7/5/2015         Estimated return to work date (full duty):       6/22/2015         Yofts or Comments       Leave Plan(s)         Notes or Comments       Leave Information  | P   | ease review the details of this leave request.<br>e Leave Confirmation page.   | . To make changes, use the revis       | it links above to return to any part of the leave request | process. When complete, click Submit to |
|---|---|--|--|---|---|
| Hours Summary (as of 04/01/2015)         Hours used:       Hours available:         Long Term Disability       0         Leave Information       Leave Id: 616502823813         Reason for leave request:       Short Term Disability         Leave type:       Continuous Leave         Requested leave start date:       5/11/2015         Requested leave end date:       7/5/2015         From Date       Determination       Work Type       Leave Plan(s)         D5/111/2015       07/05/2015       Pending Determination       Continuous Leave         Notes or Comments       Long Term Disability       Long Term Disability | L   | eave Summary   |  |   |   |
| Hours used:<br>Long Term Disability0Hours available:<br>Long Term DisabilityLeave InformationLeave Id: 616502823813<br>Reason for leave request:<br>  | H   | ours Summary (as of 04/  | 01/2015)                               |   |   |
| Long Term Disability0Long Term DisabilityLeave InformationLeave InformationLeave InformationLeave InformationLeave InformationLeave request: Short Term DisabilityLeave type: Continuous LeaveRequested leave start date: 5/11/2015Requested leave end date: 7/5/2015Estimated return to work date (full duty): 6/22/2015York Type Leave Plan(s)Dot/11/2015 07/05/2015 Pending DeterminationContinuous LeaveLong Term DisabilityLeave Plan(s)Continuous LeaveLeave Plan(s)Continuous LeaveLeave Plan(s)Continuous LeaveLeave Plan(s)Continuous LeaveLeave Plan(s)Continuous LeaveLong Term Disability                                   |   | Hours used:  |  | Hours available:  |   |
| Leave Information         Leave Id: 616502823813         Reason for leave request: Short Term Disability         Leave type: Continuous Leave         Requested leave start date: 5/11/2015         Requested leave end date: 7/5/2015         Estimated return to work date (full duty): 6/22/2015         You have a start date: 5/11/2015         Prom Date To Date Determination       Work Type Leave Plan(s)         05/11/2015       07/05/2015         Pending Determination       Continuous Leave         Notes or Comments   |   | Long Term Disability   | 0                                      | Long Term Disability                                      |   |
| From Date         To Date         Determination         Work Type         Leave Plan(s)           05/11/2015         07/05/2015         Pending Determination         Continuous Leave         Long Term Disability   | Reaso<br>Leave<br>Reque<br>Reque<br>Estim | eason for leave request: Short Tere<br>eave type: Continuous Leave<br>equested leave start date: 5/11/2015<br>equested leave end date: 7/5/2015<br>stimated return to work date (full du | rm Disability<br>15<br>uty): 6/22/2015 |   |   |
| Notes or Comments   |   | rom Date To Date   | Determination                          | Work Type   | Leave Plan(s)                           |
|   |   | otes or Comments   |  |   |   |

On the Leave Summary page, verify the **leave change** is correct

Enter an optional **note or** comment

#### Click Next

Or click **Cancel** to disregard request for change of leave dates

# 

## **Cancel leave request**

On the Leave of Absence page, click Cancel leave

| HOME   |   | MV DEDODTS  |   |                                |
|--|---|---|---|--------------------------------|
| TIOME  | LINFLOTLES  | MIT REPORTS   | ADMINISTRATORS TOOLS                        |                                |
| Employee Summary Chang   | ge dates of leave Cancel leave  |   |   |                                |
| Alicia Sherwood -  | Leave of Absence:   | #616502823813   |   |                                |
| Please review the information below re-<br>applicable, you may also export intermit  | garding the employee's leave. If this is a<br>tent time or confirm the employee's retur | n open leave, you may cancel the lea<br>m to work date by clicking on the act | we (if not yet started) or change the leave | dates under certain circumstan |
| < go back to employee summary  |   |   |   |                                |
| Date Received: 04/01/2015<br>Leave Title:   Short Term Disat<br>Time Period: 05/11/2015 - 06/2<br>Leave Type: Continuous Leave<br>Available Actions: Print leave | ojlity , (Open) Cancel leave<br>1/2015 Change dates of leave<br>details                 |   |   |                                |
| Leave Schedules  |   |   |   |                                |
| Continuous   |   |   |   |                                |
| 5/11/2015 - 6/21/2015  |   |   |   |                                |
| Hours Scheduled 8:00 (   | won lue wed inu fri Sa<br>D:00 0:00 0:00 8:00 8:00 8:0                                  |   |   |                                |
|  |   |   |   |                                |
| Hours Summary (as of   | 05/11/2015)   |   |   |                                |
| Hours used:  |   | Hours available:  |   |                                |
| Long Term Disability   | 0   | Long Term Disability  | N/A   |                                |
| Hours Summary (as of   | leave end 06/21/2015)   |   |   |                                |
|  |   |   |   |                                |
| Hours used:<br>Long Term Disability  | 0   | Hours available:<br>Long Term Disability                                      | N/A   |                                |
| Leave Summary  |   |   |   |                                |
| Last Day Worked: 05/08/2015  |   |   |   |                                |
| Estimated partial return to work   | k: not supplied   |   |   |                                |
| Actual partial return to work: I<br>Estimated full duty return to wo   | not supplied<br>ork: 06/22/2015   |   |   |                                |

| From Date  | To Date    | Determination         | Reason | Leave Type       | Leave Plan(s)        |
|------------|------------|-----------------------|--------|------------------|----------------------|
| 05/11/2015 | 06/21/2015 | Pending Determination |        | Continuous Leave | Long Term Disability |

Actual full duty return to work: not supplied



### **Cancel leave request**

On the Cancel Leave page, click the

Cancel Leave checkbox

to confirm request to cancel

|   |   |  | 1                            |
|---|---|--|------------------------------|
| HOME EMPLOYEES  | MY REPORTS                                    | ADMINISTRATORS' TOOLS                        |                              |
|   |   |  |                              |
| Alicia Sherwood: Leave Cancel   |   |  |                              |
| Cancel Leave  |   |  |                              |
| he summary information regarding this leave is listed below. Please   | review this information and check the box ind | licating that you want to cancel the descrit | ed leave, then click Submit. |
| the box is not checked indicating you wish to cancel this leave, no a | ction will be taken after clicking Submit.    |  |                              |
| eave Summary  |   |  |                              |
| Louro cumuly  |   |  |                              |
| Hours Summary (as of 04/01/2015)                                      |   |  |                              |
| Hours used:   | Hours available:                              |  |                              |
|   |   |  |                              |
| Leave Information   |   |  |                              |
| Leave Id: 6 6502823813  |   |  |                              |
| Reason for leave request: Short Term Disability                       |   |  |                              |
| Leave type: Continuous Leave  |   |  |                              |
| Requested leave start date: 5/11/2015                                 |   |  |                              |
| Requested leave end date: 6/21/2015                                   |   |  |                              |
| Estimated return to work date (full duty): 6/22/2015                  |   |  |                              |
| From Date To Date Determination                                       | Work Typ                                      | e Leave Pla                                  | ı(s)                         |
| 05/11/2015 06/21/20 5 Pending Determ                                  | nination Continuou                            | us Leave Long Term                           | Disability                   |
| Cancelleave   |   |  |                              |
|   |   |  |                              |
| Yes, please cancel this leave of absence? - < back to leave           | summary                                       |  |                              |

#### Click Submit

Or click **Cancel** to disregard request for change of leave dates

# **SeedGroup**

Submit

Cancel

## **Running Reports**

In this lesson, you will learn how to:

- Run Ad-Hoc reports (on demand)
- Run Report Subscriptions (recurring reports)
- Set report parameters:
  - $\circ$  Dates
  - $\odot$  Leave reason
  - $\circ$  Work Type
  - $\circ$  Location
  - $\circ$  Division
  - $\circ \text{Visibility}$
- Choose a report file format: Excel, CSV, PDF



### **Accessing Reports**

To create, run and view reports click the

#### My Reports tab

| Wy Reports tab   | Access reports that give you the information you need to manage your employees' absences. Configure your Operational reports in the way that works best for you absence type and locations. Run ad hoc reports or schedule your preferred reports to run at regular intervals and receive notifications when they are available. |  |        |
|--|--|--|--------|
|  | New Report Subscription New Ad-Hoc Report  | Filter report list by  |        |
| You can create new<br>report <b>Subscription</b> or<br>new <b>Ad-Hoc</b> reports |  | Report Type: All   | Go     |
| •  | Ad-Hoc Reports   |  |        |
|  | Name: Ad-hoc: Estimated RTW Report, 2015-04-02   | Expires: 04/16/2015 view details   |        |
| Reports that have  | Name: Ad-hoc: Estimated RTW Report, 2015-04-02   | Expires: 04/16/2015 view details   |        |
| already been run are   | Scheduled Reports - Operational  |  |        |
| listed. Click <b>view</b><br>details to view the<br>report                       | Name: Monthly Closed Leave Report  | Report Date: 04/02/2015 Next Run Date: 05/92015 view of the second secon | etails |
| If the report list is long,<br>you may filter for<br>certain report types        |  |  |        |

MY REPORTS

**EMPLOYEES** 

HOME

My Reports - Home



MY REPORTS

#### An Ad-Hoc report runs only when you requ it to run, e.g. on demand

# Ad-Hoc Reports > Select Report

EMPLOYEES

|                                  | HOME   | Emil EO TEEO                         |      |
|----------------------------------|--|--------------------------------------|------|
| only when you request            | My Reports Create New R  | eport                                |      |
| it to run, e.g. on<br>demand     | My Reports - Crea  | te New Ad-Hoc Re                     | port |
|                                  | Step 1: Select Report 1  | Гуре                                 |      |
|                                  | <b>Operational Reports</b>   |                                      |      |
| Click the <b>circle</b> next to  | <ul> <li>Estimated RTW<br/>Estimated RTW Report</li> <li>Closed Leave<br/>Closed Leave Report</li> </ul> |                                      |      |
| run                              | Leave Status and Time     Leave Status and Time  | <b>; Used</b><br>Jsed Report         |      |
|                                  | New Leaves Received<br>New Leaves Received R   | Report                               |      |
|                                  | Open Leave Inventory<br>Open Leave Inventory R   | leport                               |      |
|                                  | Intermittent Leave Cert<br>Intermittent Leave Certific   | tification<br>ication Report         |      |
|                                  | Notifications And Chan<br>Notifications And Change   | nges Summary<br>es Summary           |      |
|                                  | Notifications And Chan<br>Notifications And Change   | nges Detail<br>es Detail             |      |
|                                  | Employee Lost Days Semployee Lost Days Semployee Lost Days Sur   | ummary<br>mmary                      |      |
|                                  | Exhausted Denied<br>Exhausted Denied   |                                      |      |
| Click Next                       | Restriction Accommod     Restriction Accommodat  | dations Detail<br>ions Detail Report |      |
| Or click <b>cancel</b> to select | Registered Portal Users     Registered Portal Users  | 's<br>Report                         |      |
| Parameters                       |  |                                      |      |
|                                  |  | cancel                               | lext |

HOME





# 

### Ad-Hoc Reports > Select Format & email notification





A confirmation of your report request displays here

You may continue to use LeavePro<sup>tm</sup> or other computer tasks while the report runs

You will receive an email when report completes if you requested it

You can see that a report is still running if the Expire Date is "n/a"

To view complete reports, click **view details**.

## Ad-Hoc Reports > Wait for Report to Run

 HOME
 EMPLOYEES
 MY REPORTS

 My Reports
 Sour request for the following Ad-Hoc report, Ad-hoc: Closed Leave Report, 2015-04-02, has been received and will be processed in the order that it was received.

#### My Reports - Home

Access reports that give you the information you need to manage your employees' absences. Configure your Operational reports in the way that works best for you – date ranges, leave reason, absence type and locations. Run ad hoc reports or schedule your preferred reports to run at regular intervals and receive notifications when they are available.







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### Ad-Hoc Reports > View Report

**Report Subscription > Select Report** 

**MY REPORTS** HOME EMPLOYEES **A Report Subscription** My Reports Create New Report runs recurrently into the My Reports - Create New Report Subscription future for the date Step 1: Select Report Type window you select **Operational Reports** Estimated RTW Click the **circle** next to Estimated RTW Report the report you'd like to Closed Leave Closed Leave Report run Leave Status and Time Used Leave Status and Time Used Report New Leaves Received New Leaves Received Report Open Leave Inventory Open Leave Inventory Report Intermittent Leave Certification Intermittent Leave Certification Report Notifications And Changes Summary Notifications And Changes Summary Notifications And Changes Detail Notifications And Changes Detail Employee Lost Days Summary Employee Lost Days Summary Exhausted Denied Exhausted Denied ACA Supplemental Hours Summary Click Next ACA Supplemental Hours Summary Report Restriction Accommodations Detail Or click **cancel** to Restriction Accommodations Detail Report Registered Portal Users disregard Ad-Hoc report Registered Portal Users Report request cancel Next

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|  | Report Subscription > Select Filters   |
|--|--|
| Several parameters are available for   | HOME EMPLOYEES MY REPORTS  |
| Report Subscriptions   | My Reports Create New Report Select Parameters   |
|  | Create New Report - Select Parameters  |
| Salact Data Window   | Step 2: Select Report Parameters & Format  |
|  | Please select your parameters for the Closed Leave report. All parameters are required.        |
| <ul> <li>Yesterday</li> <li>Last week, month, quarter</li> </ul>               | Report Parameters  |
| • This week, month quarter   | Last Week  |
| rou may use Shirt+Click to select a  | - ALL -  |
| multiple choices   | EMPHEALTH - Employee Health Condition<br>LTD - Long Term Disability                            |
| indiciple choices  | PREGMATERN - Pregnancy/Maternity   |
| Leave reason   | WorkType<br>- ALL -  |
| Work Type  | Continuous Leave<br>Intermittent Leave   |
| Location   | Medical Only Continuous, less than 6 days<br>Medical Only Intermittent<br>Medical Restrictions |
| Division   | - ALL -<br>Colorado  |
| Select Visibility As and Visibility Option                                     |  |
| Only selected person's direct reports  | Visibility As  |
| <ul> <li>My own and my peer's direct reports</li> <li>All employees</li> </ul> | NaTasha Grimes   Visibility Option   |
|  | Only selected person's direct reports<br>My own and my peers' direct reports<br>All employees  |
| Click <b>Continue</b>  | ALL -  |
| Or click <b>Back</b> to select report  | •  |
| Or click <b>cancel</b> to disregard report<br>request                          | cancel Back Continue   |

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#### Select the recurrence pattern HOME MY REPORTS ADMINISTRATORS' **EMPLOYEES** Select Parameters My Reports Create New Report Schedule Report Daily, weekly, monthly or yearly Create New Report - Schedule Recurrence Which days, weeks, day of month **Recurrence pattern** or month of year Recur every 1 week(s) on: Daily Weekly Sunday Monday Tuesday Monthly Friday Wednesday Thursday Yearly Saturday Range of recurrence Select the start and end dates of the Start: 4/2/2015 No end date 6 End after: 0 occurrences recurrence 12/31/2015 End by: Ô Click Next cancel Back Next Or click **Back** to select report Or click **cancel** to disregard report

### Report Subscription > Schedule Recurrence

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request



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|   | Report Su  |  |   |  |
|---|--|--|---|--|
| A confirmation of your report   | HOME   | EMPLOYEES  | MY REPORTS  | ADMINISTRATORS' TOOLS                              |
| request displays here   | My Reports View Report   | Detail   |   |  |
| Your report will run at the next occurrence   | Your report subscription<br>You may view these sub<br>View Report Detai  | , Yearly Closed Leave Report, has been scription details again by clicking on  | en created. Please review the det<br>the view details link on your My | ails for this subscription below.<br>Reports page. |
| Click <b>Schedule Copy</b> to run this<br>report again with different<br>parameters, deliver, or email<br>options | Yearly Closed Leave R<br>Schedule Copy<br>Report Run History<br>Delivery Format: Csv<br>Email Alerts: Yes, Send No<br>Next Run Status: Completed So<br>Report Details  | eport<br>Run Now<br>tifications<br>heduled Recurrence  |   |  |
| Click <b>Run Now</b> to run this report<br>again with the same<br>parameters, deliver, or email<br>options        | Report Type:       Closed Leave         Date Range:       LastWeek         Leave reason       EMPHEALTH         WorkType       Medical Only         Location       - ALL -         Visibility As       NaTasha Grim         Visibility Option Only selected       Division         Division       - ALL -         Schedule:       Run Yearly: E         Starting 04/02 | - Employee Health Condition, LTE<br>Continuous, less than 8 days, N<br>les<br>person's direct reports<br>very Apr 2.<br>/2015, with no end date. | 0 - Long Term Disability, PRE<br>ledical Restrictions                 | GMATERN - Pregnancy/Maternity                      |
| You may continue to use<br>LeavePro <sup>tm</sup> or other computer<br>tasks while the report runs                |  |  |   | Deactivate   |
| Click <b>Deactivate</b> to remove this <b>for an equation</b> report completely                                   |  |  |   |  |

## Report Subscription > Wait for Report to Run



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## Report Subscription > Wait for Report to Run

ADMINISTRATORS' TOOLS

**Next Run Date** tells you the next time the report is scheduled to run

HOME

My Reports - Home

My Reports

EMPLOYEES

| New Report Subscription New Ad-Hoc Report      | Filter report list by  |  |  |
|--|--|--|--|
|  | Report Type: All 🔹   |  |  |
|  | Active Reports Only  |  |  |
| Ad-Hoc Reports                                 |  |  |  |
| Name: Ad-hoc: Closed Leave Report, 2015-04-02  | Expires: 04/16/2015 view details 🔊                               |  |  |
| Name: Ad-hoc: Estimated RTW Report, 2015-04-02 | Expires: 04/16/2015 view details                                 |  |  |
| Scheduled Reports - Operational                |  |  |  |
| Name: Yearly Closed Leave Report               | Report Date: 04/02/2015 Next Run Date: 04/02/2016 view details 🕮 |  |  |
| Name: Monthly Closed Leave Report              | Report Date: 04/02/2015 Next Pup Date: 05/02/2015 View details 3 |  |  |

MY REPORTS

To view complete reports, click **view details** 



ADMINISTRATORS' TOOLS

### Report Subscription > View Report

MY REPORTS

EMPLOYEES

Once a report runs, the report

| file will appear on the Report       | My Reports View Report Detail  |
|--------------------------------------|--|
| Detail screen.                       | View Report Detail   |
|                                      | Yearly Closed Leave Report   |
|                                      | Schedule Copy Run Now  |
|                                      | Report Run History   |
|                                      | Delivery Format: Csv<br>Email Alerts: Yes, Send Notifications<br>Next Run Date: 04/02/2016<br>Next Run Status: Scheduled 04/02/2016<br>Run Date Download Expires<br>04/02/2015 Yearly Closed Leave 04/16/2015<br>Report_20150402174315.csv<br>Report Details   |
| Click the <b>report name</b> to open | Report Type:       Closed Leave         Date Range:       LastWeek         Leave reason       EMPHEALTH - Employee Health Condition, LTD - Long Term Disability, PREGMATERN - Pregnancy/Maternity         WorkType       Medical Only Continuous, less than 8 days, Medical Restrictions         Location       - ALL -         Visibility As       NaTasha Grimes         Visibility Option       Only selected person's direct reports         Division       - ALL -         Schedule:       Run Yearly: Every Apr 2.<br>Starting 04/02/2015, with no end date. |
| the report                           | Deactivate   |

HOME



## **Employer Reports**

| Daily Action Report                        | Shows start, end dates, effective days of pay (100/80/60) and if works compensation is involve. Acts as an advice-to-pay report for Short-Term Disability that employers can use to update respective local payroll systems.  |
|--|---|
| Open Leave Inventory Report                | For active employees during the leave period, this report shows all open leaves: leave number, location, reason, type, plan, status, denied reason, last day worked date, plan start & end, estimated RTW, time used and time remaining   |
| Closed Leave Report                        | For active employees during the leave period, this report shows approved closed leaves: leave number, location, reason, type, approved/requested start and end, RTW, leave closed date, leave closed reason   |
| Estimated RTW Report                       | For active employees during the leave period, this report shows approved leaves: leave number, location, reason, type, leave start and end, estimated RTW   |
| Intermittent Leave<br>Certification Report | For active employees during the leave period, this report shows all leave request data for intermittent leaves: leave number, location, plan, plan start and end, status, frequency & duration, hours requested & denied, and occurrence detail   |
| Leave Status and Time Used<br>Report       | For active employees during the leave period, this report shows requests that have been completed (no partial or incomplete requests) leaves: leave number, location, reason, type, plan, status, denied reason, last day worked date, plan start & end, estimated RTW, time used and time remaining    |
| New Leaves Received Report                 | For active employees during the leave period, this report shows all leave requests: leave number, location, reason, type, last day worked date, request start & end   |
| Notification & Changes<br>Summary Report   | List of authorized time periods an employee is away from work: authorized leave plans, start / end date and status of plans, estimated RTW, time used, last day worked  |
| Notification & Changes Detail<br>Report    | Detailed list including each day of authorized time periods an employee is away from work:<br>authorized leave plans, start / end date and status of plans, estimated RTW, time used, last day<br>worked  |
| Exhausted Denied Report                    | Shows all leaves that are denied or completely exhausted: leave number, location, reason, type, plan, status, denied date, denied reason, last day worked date, leave received date, plan start & end, estimated RTW, time used, time remaining at end of report period, time remaining at end of leave |



# Daily Action Report (DAR)

The Daily Action Report is a spreadsheet including the following columns. Employers can "subscribe" to the report in LeavePro<sup>™</sup> :

- Employee ID {VNAV #}
- Employee First name
- Employee Last Name
- Agency Number
- Agency Name
- Leave ID {e.g. Claim Number}
- Atl Leave ID
- Policy Type

- Last Day Worked
- Claim Status
- Benefit Start Date
- Benefit End Date
- Est RTW Date
- Claim Close Date
- Effective Dates of Pay
- Rates of Pay

- Effective Dates of Pay
- Rates of Pay
- Effective Dates of Pay
- Rates of Pay
- Workers' Comp

|   | А           |        |         | В               |        | С                |            | D             |                 | E                    | F        |        | G             | Н            |             | I             | J         |             |               |
|---|-------------|--------|---------|-----------------|--------|------------------|------------|---------------|-----------------|----------------------|----------|--------|---------------|--------------|-------------|---------------|-----------|-------------|---------------|
| 1 | Employee ID | Er     | nploye  | e First name    | Em     | nployee Last Na  | me Agen    | cy Number     | Agen            | icy Name             | Leave II | Α (    | Atl Leave ID  | Policy Typ   | e Last D    | ay Worked     | Claim S   | tatus       |               |
| 2 | V11100445   | Pa     | aula    |                 | Wi     | lliams           |            | 30506         | Moto            | r Vehicle Board      | 103783   | 173    |               | Plan 1       |             | 6/14/2015     | Open      |             |               |
| 3 | V05623040   | Μ      | lichael |                 | Sm     | ith              |            | 30506         | Moto            | r Vehicle Board      | 103783   | 174    |               | Plan 1       |             | 6/10/2015     | Open      |             |               |
| 4 | V10676151   | Br     | ridget  |                 | Na     | рро              |            | 30506         | Moto            | r Vehicle Board      | 103783   | 175    |               | Plan 1       |             | 6/13/2015     | Closed    |             |               |
| 5 | V06346597   | Bernie |         | Ed              | gar    |                  | 30506      | Moto          | r Vehicle Board | 103783               | 176      |        | Plan 1        |              | 6/6/2015    | Approv        | ed        |             |               |
| 6 | V05213091   | Μ      | Maria   |                 | Brosky |                  |            | 30506         | Moto            | r Vehicle Board      | 103783   | 177    |               | Plan 1       |             | 5/10/2015     | Approv    | ed          |               |
| - |             | К      |         |                 | L      | M                | N          |               | 0               |                      | )<br>)   | 0      |               | R            | S           | 1             | т         | U           |               |
|   |             |        | 1       | Benefit Start D | ate    | Benefit End Date | Est RTW Da | te Claim Clos | e Date          | Effective Dates of F | ay Rates | of Pay | Effective Dat | tes of Pay R | ates of Pay | Effective Dat | es of Pay | Rates of Pa | Workers' Comp |
|   |             |        | 2       | 6/15/2          | 015    | 7/15/2015        | 7/16/20    | 15            |                 | 6/15/2015-7/15/20    | 15 `     |        | 8/11/2014-8   | /20/2014     | 80%         | 9/11/2014-8   | /20/2014  | 60%         | 6 Y           |
|   |             |        | 3       | 6/11/2          | 015    | 7/11/2015        | 7/12/20    | 15            |                 | 6/1/2015-7/11/201    | .6       | 100%   | 6             |              | 80%         |               |           | 60%         | 6 Y           |
|   |             |        | 4       | 5/1/2           | 015    | 5/5/2015         | 5/6/20     | 15 5/1        | 1/2015          | 5/1/2015-5/6/2017    | '        | 100%   | 6             |              | 80%         |               |           | 609         | 6 Y           |
|   |             |        | 5       | 6/7/2           | 015    | 8/6/2015         | 8/7/20     | 15            |                 | 6/7/2015-8/7/2018    | 3        | 100%   | 6             |              | 80%         |               |           | 609         | 6 N           |
|   |             |        | 6       | 5/11/2          | 015    | 7/10/2015        | 7/11/20    | 15            |                 | 5/11/2015-7/11/20    | 19       | 100%   | 6             |              | 80%         |               |           | 60%         | 6 N           |
|   |             |        |         |                 |        |                  |            |               |                 | 1                    |          |        |               |              |             |               |           | 1           |               |

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# Daily Action Report (DAR) – One Employee per Page

Follow these steps if you need to print one page per employee:

#### One time only

- Subscribe to DAR in LeavePro with desired date ranges including email notification
- Download the DAR template from portal
- Note what folder you've saved the DAR template

#### Each time DAR is delivered to your email

- Click through to the report from email notification
- Save as DARreport.xlsx to the same directory as the DAR template
- Open the DAR template and print document by clicking on Mailings-> Finish & Merge-> Print Documents-> OK



# **SeedGroup**

# Daily Action Report (DAR) – One Employee per Page

Additionally, you may edit the recipient list to filter, sort, unselect, etc.

- Click Edit Recipient List
- Filter, sort, etc. as needed

| relopes Labels Start Ma<br>Merge<br>Create   | il Select Edit<br>Recipients Recipient Lis<br>Start Mail Werge | Highlight Address G<br>Merge Fields Block | reeting Insert Merge<br>Line Field - 🗹 | Match Fields<br>Update Labels<br>Results | Find Recipient<br>Auto Check for Error<br>Preview Results | rs N |
|--|--|---|--|--|---|------|
| Mail Merge Red   | cipients<br>f recipients that will be used                     | l in vour merge. Use the opt              | tions below to add to or ch            | ange vour list. Use the c                | heckboxes to add or remove                                |      |
| recipients from  | the merge. When your list                                      | is ready, click OK.                       | 1                                      |  | [ [.  | _    |
| Pata Source  | Employee ID  | Employee First n                          | <ul> <li>Employee Last N</li> </ul>    | Agency Number 👻                          | Agency Name 👻 Le  | ea   |
| DARreport xl   | sx 🗸 V05059055   | Paula                                     | Smith                                  | 30403                                    | DEPT. GAME & IN 10  | 03   |
| DA Rreport.xl  | V06326218  | Michael                                   | Brosky                                 | 30133                                    | Auditor of Public 10                                      | 03   |
| DARreport.xl   | sx 🗸 V08221584   | Bridget                                   | Williams                               | 30226                                    | Board of Account 10                                       | 03   |
| DARreport  | sx V08221584   | Bernie                                    | Edgar                                  | 30174                                    | Board of Higher E 10                                      | 01   |
| DARreport.xl   | sx 🗸 V04341167   | Maria                                     | Smith                                  | 30417                                    | Board of Regents, 10                                      | 0    |
|  |  |   |  |  |   |      |
| •  |  |   |  |  | •   |      |
| Data Source  |  | efine recipient list                      |  |  |   |      |
| DARreport.xl   | SX 🔺   | A↓ Sort                                   |  |  |   |      |
|  |  | 🕼 Filter                                  |  |  |   |      |
|  |  | Tind duplicates                           |  |  |   |      |
|  | -  | On Find explosion                         |  |  |   |      |
|  | Refrach  | Find recipient                            |  |  |   |      |
| and the second sec | KEILESU  | Validate addresses                        |  |  |   |      |



# Daily Action Report (DAR)

The Daily Action Report is a spreadsheet including the following columns. Employers who are designated to receive the DAR can "subscribe" to the report in LeavePro<sup>tm</sup>:

- Employee ID {VNAV #}
- Employee First name
- Employee Last Name
- Agency Number
- Agency Name
- Leave ID {e.g. Claim Number}
- Atl Leave ID
- Policy Type

- Last Day Worked
- Claim Status
- Benefit Start Date
- Benefit End Date
- Est RTW Date
- Claim Close Date
- Effective Dates of Pay
- Rates of Pay

- Effective Dates of Pay
- Rates of Pay
- Effective Dates of Pay
- Rates of Pay
- Workers' Comp

| D             | E                                | F         | G            | Н          | I               | J            | К                  | L                | М            | N                | 0                      |
|---------------|----------------------------------|-----------|--------------|------------|-----------------|--------------|--------------------|------------------|--------------|------------------|------------------------|
| Agency Number | Agency Name                      | Leave ID  | Atl Leave ID | Policy Typ | Last Day Worked | Claim Status | Benefit Start Date | Benefit End Date | Est RTW Date | Claim Close Date | Effective Dates of Pay |
| 30403         | DEPT. GAME &<br>INLAND FISHERIES | 103783173 |              | Plan 1     | 7/10/2014       | Open         | 7/11/2014          | 8/20/2014        | 8/21/204     |                  | 7/11/2014-8/20/2014    |
|               |                                  |           |              |            |                 |              |                    |                  |              |                  |                        |

| Р            | Q                      | R            | S                      | Т            | U             |
|--------------|------------------------|--------------|------------------------|--------------|---------------|
| Rates of Pay | Effective Dates of Pay | Rates of Pay | Effective Dates of Pay | Rates of Pay | Workers' Comp |
| 100%         | 8/11/2014-8/20/2014    | 80%          | 9/11/2014-8/20/2014    | 60%          | Y             |

# **SeedGroup**

#### **Open Leave Inventory Report**

This report lists leave and employee information for all leaves that are marked as open that fit into passed in parameters. Besides potential filters through parameters above, the report automatically filters on the following:

Employee has a listed job that is active during the period of the leave being returned

#### **Open Leave Inventory Report**

#### ReedDemo

Total Number of Participants: 6 Work Type: All Leave Status: All Leave Reason: All Location: All Division: All Run by: demo1@rgl.net Visibility as: Edmond Dantez Visibility Option: Only selected person's direct reports

| Leave No.       | Location        | Work<br>State | Leave Reason                 | Relationship | Type       | Plan   | Plan<br>Status | Plan<br>Denied<br>Reason | Last Day<br>Worked<br>Date | Leave<br>Received<br>Date | Plan Start | Benefit<br>Start Da <u>te</u> | Plan End   | Est. RTW | Time Used | Time<br>Remaining |
|-----------------|-----------------|---------------|------------------------------|--------------|------------|--------|----------------|--------------------------|----------------------------|---------------------------|------------|-------------------------------|------------|----------|-----------|-------------------|
| Bohike, Luna    | 9849635 [2      |               |                              |              |            |        |                |                          |                            |                           |            |                               |            |          |           |                   |
| 570741255422    | UHSO            | W             | Employee Health<br>Condition |              | Continuous | CA-FRA | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 | ŝ.                            | 12/06/2009 |          | 88 hours  | 392 hours         |
| 570741256422    | UHSO            | W             | Employee Health<br>Condition |              | Continuous | CT-FML | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 01/03/2010 |          | 88 hours  | 552 hours         |
| 570741256422    | UHSO            | w             | Employee Health<br>Condition |              | Continuous | DC-FML | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 01/03/2010 |          | 88 hours  | 552 hours         |
| 570741255422    | UHSO            | w             | Employee Health<br>Condition |              | Continuous | FMLA   | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 12/06/2009 |          | 88 hours  | 392 hours         |
| 570741255422    | UHSO            | WI            | Employee Health<br>Condition |              | Continuous | ME-FML | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 11/22/2009 |          | 88 hours  | 312 hours         |
| 570741256422    | UHSO            | WI            | Employee Health<br>Condition |              | Continuous | OR-FML | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 12/06/2009 |          | 88 hours  | 392 hours         |
| 570741255422    | UHSO            | WI            | Employee Health<br>Condition |              | Continuous | RI-FML | Pending        |                          | 03/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 12/13/2009 |          | 88 hours  | 432 hours         |
| 570741256422    | UHSO            | WI            | Employee Health<br>Condition |              | Continuous | STD    | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 02/26/2010 |          | 11 days   |                   |
| 570741256422    | UHSO            | W             | Employee Health<br>Condition |              | Continuous | VT-FML | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 12/06/2009 |          | 88 hours  | 392 hours         |
| 570741255422    | UHSO            | WI            | Employee Health<br>Condition |              | Continuous | WA-FML | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 12/06/2009 |          | 88 hours  | 392 hours         |
| 570741256422    | UHSO            | WI            | Employee Health<br>Condition |              | Continuous | WI-FML | Pending        |                          | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                               | 09/27/2009 |          | 80 hours  | 0 hours           |
| 570741256422    | UHSO            | w             | Employee Health<br>Condition |              | Continuous | WI-FML | Denied         | Exhausted                | 09/13/2009                 | 09/20/2009                | 09/28/2009 |                               | 12/31/2009 |          | 80 hours  | 0 hours           |
| 555780799840    | UHSD            | WI            | Pregnancy / Maternity        |              | Continuous | CA-FRA | Denied         | Ineligible               |                            | 09/21/2009                | 09/29/2009 |                               | 12/17/2009 |          | 0 hours   | 480 hours         |
| 555780799840    | UHSD            | WI            | Pregnancy / Maternity        |              | Continuous | CA-POL | Pending        |                          |                            | 09/21/2009                | 09/29/2009 |                               | 12/17/2009 |          | 0 hours   | 704 hours         |
| 555780799840    | UHSD            | w             | Pregnancy / Maternity        |              | Continuous | CA-PFL | Denied         | Ineligible               |                            | 09/21/2009                | 09/29/2009 |                               | 12/17/2009 |          | 0 hours   | 240 hours         |
| 555780799840    | UHSO            | w             | Pregnancy / Maternity        |              | Continuous | CT-FML | Pending        |                          |                            | 09/21/2009                | 09/29/2009 |                               | 12/17/2009 |          | 0 hours   | 640 hours         |
| Execution Time: | 9/28/2009 3:34: | 59 PM         |                              |              |            |        |                |                          | -3                         |                           |            |                               |            |          |           | Page 1 of 5       |



#### **Closed Leave Report**

This report provides a list of employee and leave information for closed leaves.

Besides potential filters through report parameters above, the report automatically filters on the following:

- Only leaves that have an approved segment are considered
- Employee has a listed job that is active during the period of the leave being returned
- The leave is not closed because of a systemic cancellation (user cancellations are included)

| Closed  | Leave          | Re            | port                     |              |            |                                       |                                     |                 |                      |                        |
|---|----------------|---------------|--------------------------|--------------|------------|---------------------------------------|-------------------------------------|-----------------|----------------------|------------------------|
| ReedDe  | emo            |               |                          |              |            |                                       |                                     |                 |                      |                        |
| Report Period: (                                | 6/1/2009 - 9/2 | 28/2009       |                          |              | Ru         | n by: demo1@rg                        | l.net                               |                 |                      |                        |
| Total Number of                                 | f Participants | : 1           |                          |              | Vis        | sibility as: Edmon                    | d Dantez                            |                 |                      |                        |
| Work Type: All                                  |                |               |                          |              | Vis        | sibility Option: On                   | ly selected per                     | son's direct re | ports                |                        |
| Leave Reason:<br>Location: All<br>Division: All | All            |               |                          |              |            |                                       |                                     |                 |                      |                        |
| Leave No.                                       | Location       | Work<br>State | Leave Reason             | Relationship | Туре       | Approved/<br>Requested<br>Leave Start | Approved/<br>Requested<br>Leave End | RTW Date        | Leave<br>Closed Date | Leave Closed<br>Reason |
| Trakand, Elayı                                  | ne 981567      | [3]           |                          |              |            |                                       |                                     |                 |                      |                        |
| 680961030934                                    | NJMB           | CA            | Pregnancy /<br>Maternity |              | Continuous | 10/05/2009                            | 10/30/2009                          |                 | 09/23/2009           | CANCELLED              |



#### **Estimated RTW Report**

This report provides a list of employee and leave information including the Return to Work date for completed and approved leaves that the user running the report is allowed to see.

Besides potential filters through parameters above, the report automatically filters on the following:

- Only leaves that have an approved segment are considered
- Employee has a listed job that is active during the period of the leave being returned

#### Estimated RTW Report

#### ReedDemo

Report Period: 7/1/2009 - 11/27/2009 Total Number of Participants: 2 Work Type: All Leave Status: All Leave Reason: All Location: All Division: All

Run by: demo1@rgl.net Visibility as: Edmond Dantez Visibility Option: Only selected person's direct reports

| Leave No.<br>Clementine, L | Location<br>ina 9849771 | Work<br>State<br>[2] | Leave Reason F            | Relationship | Туре       | Est. RTW   | Leave<br>Status | Leave Start<br>Date | Leave End<br>Date |
|----------------------------|-------------------------|----------------------|---------------------------|--------------|------------|------------|-----------------|---------------------|-------------------|
| 972826485494               | NJMB                    | WI                   | Employee Health Condition |              | Continuous | 11/11/2009 | Open            | 09/21/2009          | 11/11/2009        |
| Trakand, Elay              | ne 981567 [:            | 3]                   |                           |              |            |            |                 |                     |                   |
| 946027518888               | NJMB                    | CA                   | Employee Health Condition |              | Continuous | 11/27/2009 | Open            | 09/14/2009          | 11/27/2009        |
| 581927232006               | NJMB                    | CA                   | Employee Health Condition |              | Continuous | 10/29/2009 | Open            | 09/29/2009          | 10/29/2009        |



#### **Intermittent Leave Certification Report**

Lists out leave request data and employee information for all intermittent leaves that fit into passed in parameters.

Besides potential filters through parameters above, the report automatically filters on the following:

• Employee has a listed job that is active during the period of the leave being returned

#### Intermittent Leave Certification Report

#### Bolton, Suzanne

|   | Leave #      | Employee ID | Location   | n Name    | Work<br>State | Leave<br>Status | Leave Reason                 | Relationship       | Plan       | Plan Start<br>Date | Plan End<br>Date | Plan Status      | Frequency and Duration   | Hours<br>Requested | Hours<br>Approved | Hours<br>Denied |
|---|--------------|-------------|------------|-----------|---------------|-----------------|------------------------------|--------------------|------------|--------------------|------------------|------------------|--|--------------------|-------------------|-----------------|
| [ | 331003998580 | 98344       |            |           | NY            | Open            | Family Health Cond           | lition Child       | FMLA       | 06/15/2011         | 10/20/2011       | Approved         | <ol> <li>8.00 hours, N/A every 2 week(s) for Incapacity;</li> <li>4.00 hours, N/A every 2 month(s) for Office Visit</li> </ol> | 20.00              | 20.00             | 0.00            |
|   | Occurrence   | # Occur     | rence Date | Occurrent | се Туре       | 0               | oourrence Hours<br>Requested | Occurrence Hours F | Pending Oc | ourrence Hours     | Approved         | Occurrence Hours | Denied   |                    |                   |                 |
|   | 5            | 06/         | 16/2011    | Incapa    | acity         |                 | 8.00                         | 0.00               |            | 8.00               |                  | 0.00             |  |                    |                   |                 |
|   | 6            | 06/3        | 30/2011    | Incapa    | acity         |                 | 8.00                         | 0.00               |            | 8.00               |                  | 0.00             |  |                    |                   |                 |
|   | 7            | 06/2        | 21/2011    | Office    | Visit         |                 | 4.00                         | 0.00               |            | 4.00               |                  | 0.00             |  |                    |                   |                 |

#### Clark, Ashley

| Leave #      | Employee ID | Location Name | Work<br>State | Leave<br>Status | Leave Reason              | Relationship | Plan | Plan Start<br>Date | Plan End<br>Date | Plan Status | Frequency and Duration                                   | Hours<br>Requested | Hours<br>Approved | Hours<br>Denied |
|--------------|-------------|---------------|---------------|-----------------|---------------------------|--------------|------|--------------------|------------------|-------------|--|--------------------|-------------------|-----------------|
| 883019307946 | 98235       |               | IA            | Closed          | Employee Health Condition | Self         | FMLA | 07/15/2010         | 07/14/2011       | Approved    | 8.00 hours, 3 time(s) every 1 month(s) for<br>Incapacity | 48.00              | 48.00             | 0.00            |

| Occurrence # | Occurrence Date | Occurrence Type | Occurrence Hours<br>Requested | Occurrence Hours Pending | Occurrence Hours Approved | Occurrence Hours Denied |
|--------------|-----------------|-----------------|-------------------------------|--------------------------|---------------------------|-------------------------|
| 131          | 04/13/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 132          | 04/26/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 133          | 05/04/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 134          | 05/17/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 135          | 06/21/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 136          | 06/10/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |

#### Jenner, John

| Leave #      | Employee ID | Location Name | Work<br>State | Leave<br>Status | Leave Reason              | Relationship | Plan | Plan Start<br>Date | Plan End<br>Date | Plan Status | Frequency and Duration                          | Hours<br>Requested | Hours<br>Approved | Hours<br>Denied |
|--------------|-------------|---------------|---------------|-----------------|---------------------------|--------------|------|--------------------|------------------|-------------|---|--------------------|-------------------|-----------------|
| 253685536258 | 98368       |               | CO            | Closed          | Employee Health Condition | Self         | FMLA | 07/01/2010         | 06/30/2011       | Approved    | 8.00 hours, N/A every 3 month(s) for Incapacity | 56.00              | 56.00             | 0.00            |

| Occurrence # | Occurrence Date | Occurrence Type | Occurrence Hours<br>Requested | Occurrence Hours Pending | Occurrence Hours Approved | Occurrence Hours Denied |
|--------------|-----------------|-----------------|-------------------------------|--------------------------|---------------------------|-------------------------|
| 42           | 04/06/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 43           | 04/19/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 45           | 05/26/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 46           | 06/08/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 47           | 06/22/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 48           | 05/09/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |
| 49           | 04/28/2011      | Incapacity      | 8.00                          | 0.00                     | 8.00                      | 0.00                    |



#### Leave Status and Time Used Report

This report lists the leaves, plans and usage time for leaves that fall within the in parameters passed. Besides potential filters through parameters above, the report automatically filters on the following:

- Employee has a listed job that is active during the period of the leave being returned
- Only takes requests that have been completed in the system into consideration
- Partial and incomplete system entries are not considered
- Considers closed leaves between start/end date parameters if the leave is closed.

#### Leave Status and Time Used Report

#### ReedDemo

Location: All Division: All

| Report Period: 6/28/2009 - 9/28/2009 |  |
|--------------------------------------|--|
| Total Number of Participants: 6      |  |
| Work Type: All                       |  |
| Leave Status: All                    |  |
| Leave Reason: All                    |  |

Run by: demo1@rgl.net Visibility as: Edmond Dantez Visibility Option: Only selected person's direct reports

| Leave No.        | Location | Work | Leave Reason              | Туре       | Plan   | Leave | Plan<br>Status | Plan Denied<br>Reason | Last Day<br>Worked<br>Date | Leave<br>Received<br>Date | Plan Start | Benefit<br>Start Date | Plan End   | ESC. RTW | Time Used | Time Remaining |
|------------------|----------|------|---------------------------|------------|--------|-------|----------------|-----------------------|----------------------------|---------------------------|------------|-----------------------|------------|----------|-----------|----------------|
| Bohlke, Luna 984 | 9635 [2] |      |                           |            |        |       |                |                       |                            |                           |            | 0.0000000000          |            |          |           |                |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | CA-FRA | Open  | Denied         | Ineligible            | 09/13/2009                 | 09/20/2009                | 12/07/2009 |                       | 02/26/2010 |          | 88 hours  | 392 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | CA-FRA | Open  | Pending        |                       | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                       | 12/06/2009 |          | 88 hours  | 392 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | CT-FML | Open  | Denied         | Ineligible            | 09/13/2009                 | 09/20/2009                | 01/04/2010 |                       | 02/26/2010 |          | 88 hours  | 552 hour       |
| 570741256422     | UHSO     | W    | Employee Health Condition | Continuous | CT-FML | Open  | Pending        |                       | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                       | 01/03/2010 |          | 88 hours  | 552 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | DC-FML | Open  | Denied         | Exhausted             | 09/13/2009                 | 09/20/2009                | 01/04/2010 |                       | 02/26/2010 |          | 88 hours  | 552 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | DC-FML | Open  | Pending        |                       | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                       | 01/03/2010 |          | 88 hours  | 552 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | FMLA   | Open  | Denied         | Ineligible            | 09/13/2009                 | 09/20/2009                | 12/07/2009 |                       | 02/26/2010 |          | 88 hours  | 392 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | FMLA   | Open  | Pending        |                       | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                       | 12/06/2009 |          | 68 hours  | 392 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | ME-FML | Open  | Denied         | Exhausted             | 09/13/2009                 | 09/20/2009                | 11/23/2009 |                       | 02/26/2010 |          | 88 hours  | 312 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | ME-FML | Open  | Pending        |                       | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                       | 11/22/2009 |          | 88 hours  | 312 hour       |
| 570741256422     | UHSO     | W    | Employee Health Condition | Continuous | OR-FML | Open  | Denied         | Ineligible            | 09/13/2009                 | 09/20/2009                | 12/07/2009 |                       | 02/26/2010 |          | 88 hours  | 392 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | OR-FML | Open  | Pending        |                       | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                       | 12/06/2009 |          | 88 hours  | 392 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | RI-FML | Open  | Denied         | Exhausted             | 09/13/2009                 | 09/20/2009                | 12/14/2009 |                       | 02/26/2010 |          | 88 hours  | 432 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | RIFFML | Open  | Pending        |                       | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                       | 12/13/2009 |          | 88 hours  | 432 hour       |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | STD    | Open  | Pending        |                       | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                       | 02/26/2010 |          | 11 days   |                |
| 570741256422     | UHSO     | WI   | Employee Health Condition | Continuous | VT-FML | Open  | Denied         | Ineligible            | 09/13/2009                 | 09/20/2009                | 12/07/2009 |                       | 02/26/2010 |          | 88 hours  | 392 hour       |
| 570741256422     | UHSO     | W    | Employee Health Condition | Continuous | VT-FML | Open  | Pending        |                       | 09/13/2009                 | 09/20/2009                | 09/14/2009 |                       | 12/06/2009 |          | 88 hours  | 392 hour       |



#### **New Leaves Received Report**

This report lists information for leaves that were opened between the passed in start and end dates from the parameter list. Besides potential filters through parameters above, the report automatically filters on the following:

Requested Start date of the leave must be within the range of valid job from/thru dates for the employee

#### New Leaves Received Report ReedDemo

Report Period: 6/1/2009 - 9/28/2009 Total Number of Participants: 6 Work Type: All Leave Status: All Leave Reason: All Location: All Division: All Run by: demo1@rgl.net Visibility as: Edmond Dantez Visibility Option: Only selected person's direct reports

|                |              | Work     |                           |              |            | Last Day<br>Worked | Leave<br>Received | Requested   | Requested  |
|----------------|--------------|----------|---------------------------|--------------|------------|--------------------|-------------------|-------------|------------|
| Leave No.      | Location     | State    | Leave Reason              | Relationship | Туре       | Date               | Date              | Leave Start | Leave End  |
| Bohike, Luna   | 9849635 [2   | ]        |                           |              |            |                    |                   |             |            |
| 570741256422   | UH50         | WI       | Employee Health Condition |              | Continuous | 09/13/2009         | 09/20/2009        | 09/14/2009  | 02/26/2010 |
| 555780799840   | UH50         | wi       | Pregnancy / Maternity     |              | Continuous |                    | 09/21/2009        | 09/29/2009  | 12/17/2009 |
| Broadhead, R   | obinette 98  | 9410 [1] |                           |              |            |                    |                   |             |            |
| 191567017795   | CTAA         | RI       | Pregnancy / Maternity     |              | Continuous | 09/30/2009         | 09/25/2009        | 10/01/2009  | 12/01/2009 |
| Burrow, Mari   | kas 984997   | 9 [1]    |                           |              |            |                    |                   |             |            |
| 557588993867   | CTAA         | WI       | Employee Health Condition |              | Continuous | 09/23/2009         | 09/24/2009        | 09/24/2009  | 10/15/2009 |
| Clementine, I  | ina 984977   | 1 [2]    |                           |              |            |                    |                   |             |            |
| 972826485494   | NJMB         | wi       | Employee Health Condition |              | Continuous | 09/20/2009         | 09/25/2009        | 09/21/2009  | 11/11/2009 |
| 206105963822   | NJMB         | WI       | Pregnancy / Maternity     |              | Continuous | 09/30/2009         | 09/25/2009        | 10/01/2009  | 12/01/2009 |
| Cullen, Carlis | le 989162 [: | L]       |                           |              |            |                    |                   |             |            |
| 834324538164   | CTAA         | CA       | Employee Health Condition |              | Continuous | 09/13/2009         | 09/23/2009        | 09/14/2009  | 11/27/2009 |
| Hale, Jasper   | 989410 [1]   |          |                           |              |            |                    |                   |             |            |
| 750689580542   | B020         | RI       | Employee Health Condition |              | Continuous |                    | 09/21/2009        | 09/23/2009  | 10/23/2009 |
| Trakand, Elay  | me 981567    | [3]      |                           |              |            |                    |                   |             |            |
| 680961030934   | NJMB         | CA       | Pregnancy / Maternity     |              | Continuous | 10/02/2009         | 09/23/2009        | 10/05/2009  | 10/30/2009 |
| 946027518888   | NJMB         | CA       | Employee Health Condition |              | Continuous | 09/11/2009         | 09/23/2009        | 09/14/2009  | 11/27/2009 |
| 581927232006   | NJMB         | CA       | Employee Health Condition |              | Continuous |                    | 09/23/2009        | 09/29/2009  | 10/29/2009 |



#### **Notification & Changes Summary Report**

This report lists information about the authorized time periods an employee is away from work. It identifies the leave plans the employee is authorized to use while away, the start and end dates of those leave plans, and the status of the leave plans. Records marked as T (Today) indicate the Start Date, End Date, or RTW Date is the current date.

| Data Element        | Definition  |
|---------------------|---|
| Recordtype          | New , Changed, Today or null                                    |
| FirstName           | Employees First Name  |
| LastName            | Employees Last Name   |
| EmployeeNumber      | Employees Employee Number                                       |
| LeaveIDExternal     | The Reed system identifier for this leave                       |
| OrganizationName    | From the client roster  |
| WorkState           | Employee's work state   |
| AbsenceReason       | The reason for the absence                                      |
| LeaveType           | Intermittent, Continuous, Reduced, Med Restriction No Lost Time |
| PlanName            | The leave plan covering the lost time                           |
| OpenDate            | The date the case was opened                                    |
| CaseStatus          | The current case status; open, closed, denied etc               |
| AuthStatus          | Approved, Denied, Pending                                       |
| AuthFromDate        | Authorization From Date   |
| AuthThruDate        | Authorization Through Date                                      |
| DenialReason        | Reason plan was denied  |
| EstimatedPartialRTW | Estimated return to work date (partial duty)                    |
| ActualPartialRTW    | Actual return to work date (partial duty)                       |
| EstimatedFullRTW    | Estimated return to work date (full duty)                       |
| ActualFullRTW       | Actual return to work date (full duty)                          |
| TimeUsed            | Hours lost on this leave plan so far on this absence only.      |
| LastDayWorked       | Last Day Worked   |
| UnionName           | From the client roster  |
| PTOFlag             | If employee requested PTO                                       |
| РауТуре             | From the client roster (primary source)                         |
| FullTime            | From the client roster (primary source)                         |
| EmploymentStatus    | From the client roster (primary source)                         |
| Exempt              | From the client roster (primary source)                         |
| SupervisorName      | From the client roster (primary source)                         |



#### **Notification & Changes Detail Report**

This report includes the lost time hours for every date covered by any leave plan. There will be multiple rows, one for each plan active for any part of that date. All statuses (Pending, Approved, Denied) are included in the report. The data included will be for the date range specified by the user. New and Changed data outside that range will also be shown for the leaves included in the report.

| Data Element             | Definition  |
|--------------------------|---|
| Recordtype               | New , Changed, or null  |
| FirstName                |   |
| MiddleName               |   |
| LastName                 |   |
| EmployeeNumber           | From the client roster  |
| LeavelD                  | The Reed system identifier for this leave                       |
| LeaveldExternal          |   |
| EmployeeNumber           | From the client roster  |
| LostTimeDate             | mm/dd/yyyy format   |
| PlanName                 | The leave plan covering the lost time – there will be a row for |
|                          | each plan applicable for the day or part of day. There can be   |
|                          | several leave plans active on the same day.                     |
| HoursLost                | Decimal(5,2)  |
| AuthStatus               | Denied, Pending, Approved                                       |
| IntermittentOccurenceTyp | Office Visit, Incapacity  |
| е                        |   |
| Start Time               | This is not a field tracked in LeavePro™                        |
| EstimatedPartialRTW      | Estimated return to work date (partial duty)                    |
| ActualPartialRTW         | Actual return to work date (partial duty)                       |
| PTOFlag                  | If employee requested PTO                                       |
| РауТуре                  | From the client roster (primary source)                         |
| FullTime                 | From the client roster (primary source)                         |
| EmploymentStatus         | From the client roster (primary source)                         |
| Exempt                   | From the client roster (primary source)                         |
|                          |   |



### **Exhausted Denied Report**

This report includes all leaves that are denied or completely exhausted, sorted by employee.

#### **Exhausted Denied Report**

#### ReedDemo

Report Period: 10/1/2013 - 10/31/2013 Total Number of Participants: 5 Work Type: All Run by: ReedDemo@ReedGroup.com Visibility as: Kenneth Ames Visibility Option: All employees

#### Leave Reason: All

Location: All Division: All

| Leave No.         | Location  | Work<br>State | Leave Reason                | Туре         | Plan     | Plan Statu | Denied Auth<br>s Status Date | Plan Denied<br>Reason             | Last Day<br>Worked<br>Date | Leave<br>Received<br>Date | Plan Start | Plan End   | Est. RTW   | Time Used | Time Remaining I<br>as of End of<br>Report Period | lime Remaining<br>as of End of<br>Leave |
|-------------------|-----------|---------------|-----------------------------|--------------|----------|------------|------------------------------|-----------------------------------|----------------------------|---------------------------|------------|------------|------------|-----------|---|---|
| Amutavi, Sarah 90 | 8588 [3]  |               |                             |              |          |            |                              |                                   |                            |                           |            |            |            |           |   |   |
| 808911370740      |           | OR            | Employee Health Condition   | Continuous   | FMLA     | Denied     |                              | Exhausted                         | 10/11/2013                 | 10/11/2013                | 10/11/2013 | 10/17/2013 |            | 0         | 0   | 0                                       |
| 808911370740      |           | OR            | Employee Health Condition   | Continuous   | OFLA-SHC | Denied     |                              | Exhausted                         | 10/11/2013                 | 10/11/2013                | 10/11/2013 | 10/17/2013 |            | 0         | 0   | 0                                       |
| Beaupre, Matthew  | 98581 [2] |               |                             |              |          |            |                              |                                   |                            |                           |            |            |            |           |   |   |
| 245080444556      |           | OR            | Employee Health Condition   | Continuous   | ADA      | Denied     | 2013-07-05                   | Nonconcurrent                     | 07/02/2013                 | 07/05/2013                | 07/09/2013 | 02/28/2014 |            | 0         | 0   | 0                                       |
| 245080444558      |           | 90            | Employee Health Condition   | Continuous   | FMLA     | Approved   | 2013-07-05                   |                                   | 07/02/2013                 | 07/05/2013                | 07/09/2013 | 09/24/2013 |            | 480       | 0   | 0                                       |
| 245080444556      |           | OR            | Employee Health Condition   | Continuous   | FMLA     | Deried     | 2013-07-05                   | Administrative                    | 07/02/2013                 | 07/05/2013                | 09/25/2013 | 02/28/2014 |            | 0         | 0   | 0                                       |
| 245080444556      |           | OR            | Employee Health Condition   | Continuous   | OFLA-SHC | Approved   | 2013-07-06                   |                                   | 07/02/2013                 | 07/05/2013                | 07/03/2013 | 09/24/2013 |            | 450       | 0   | 0                                       |
| 245080444656      |           | OR            | Employee Health Condition   | Continuous   | OFLA-SHC | Denied     | 2013-07-05                   | Administrative                    | 07/02/2013                 | 07/05/2013                | 09/25/2013 | 02/28/2014 |            | 0         | 0   | 0                                       |
| Breen, George 98  | 552 [1]   | _             |                             |              |          |            |                              |                                   |                            |                           |            |            |            |           |   |   |
| 936997483876      |           | CA            | Workplace<br>Accommodations | No Lost Time | ADA      | Approved   | 2013-08-21                   |                                   | 07/51/2013                 | 08/21/2013                | 06/01/2013 | 09/30/2013 |            | 0         | 0   | 0                                       |
| 936997463876      |           | CA            | Workplace<br>Accommodations | No Lost Time | ADA      | Denied     | 2013-08-21                   | Certification Not Returned        | 07/31/2013                 | 08/21/2013                | 10/01/2013 | 11/11/2013 |            | 0         | 0   | 0                                       |
| Lenehan, Michael  | 98330 [1] |               |                             |              |          |            |                              |                                   |                            |                           |            |            |            |           |   |   |
| 634542296060      |           | AZ.           | Employee Health Condition   | Continuous   | FMLA     | Approved   | 2013-09-24                   |                                   | 0924/2013                  | 09/24/2013                | 09/24/2013 | 09/27/2013 |            | 32        | 448   | 448                                     |
| 634542296060      |           | AZ            | Employee Health Condition   | Continuous   | FMLA     | Denied     | 2013-09-24                   | Medical information<br>incomplete | 09/24/2013                 | 09/24/2013                | 09/28/2013 | 10/07/2013 |            | 0         | 443   | 448                                     |
| Mano, Michael 98  | 306 [1]   |               |                             |              |          |            |                              |                                   |                            |                           |            |            |            |           |   |   |
| 596917574647      |           | MD            | Employee Health Condition   | Continuous   | FMLA     | Pending    |                              |                                   | 02/28/2013                 | 07/18/2013                | 03/01/2013 | 05/23/2013 | 10/01/2013 | 480       | 0   | 0                                       |
| 598917574647      |           | MD            | Employee Health Condition   | Continuous   | FMLA     | Denied     |                              | Exhausted                         | 02/28/2013                 | 07/18/2013                | 06/24/2013 | 10/01/2013 | 10/01/2013 | 0         | 0   | 0                                       |

# **S**ReedGroup<sup>®</sup>

#### **Restriction Accommodations Detail Report**

This report is on Restrictions data so that employees with ADA, LTD or STD leaves and employment restrictions can be managed. Given that a client uses the Restrictions Module and/or the ADA, Disability, LTD Modules then information is present a report.

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#### Restriction Accommodations Detail ReedDemo Report Period: 01/01/2015 - 02/19/2015 Run by: kzappolo@reedgroup.com Total Number of Participants: 5 Visibility as: Leave Type: All Visibility Option: All employees Leave Status: All Location: All Division: All Employee Division Org Division Org Location Leave No. Employee ID Location Name Code Name Work State Leave Reason Name Fratini, Kevin 98436 461842954639 98436 CA Employee Health Condition Fratini, Kevin 01 Fratini, Kevin 461842954639 98436 CA Employee Health Condition 01 Fratini, Kevin 461842954639 98436 CA Employee Health Condition 01 461842954639 98436 Fratini, Kevin CA Employee Health Condition 01 Gregory, Sean 98417 Gregory, Sean 549709167412 98417 TX Employee Health Condition 11.

Gregory, Sean

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11.

Employee Health Condition

Employee Health Condition