HBA Workers Compensation Leave Worklist Instructions

Click on "Detail" on the worklist:			
Detail Filter NYBEAS Administer Workforce	NYBEAS_WORKERS_COM	IP_DEFERRED HBA Work Compensa	ers 20 tion WL
_			
Click "Work It" to select the employe	e from the list:		
1 Vork It Enrollee ID# 0 12000 E	nrollee Name LWOP	HBA Name or PCONTROL	05/23/2019 2:07:44PN
Ŭ			
The screen below will populate. En	ter the information pe	rtinent to the empl	oyee's leave
of absence.			
Workers' Comp Duration			
	E		Empl Rcd #: 0
Sample, Sally		. 00000000	•
Workers' Comp Duration	E	ind View All First	1 of 1 🕨 Last
Effective Date 04/20/2019			
🖸 One Year			
◯ Two Year Assault Date	B1		
Comments			
			~
			\searrow
Save		Operated Vist	
Jave		Correct History	
View Worklist	ext in Worklist		

Be sure to enter the "Assault Date" when selecting the "Two-Year" eligibility:

Workers' Comp Duration			Find View All	First 🗹 🗸	4 of 4 🕑 Last
Effective Date 12/16/20)18				
One Year					
Two Year Ass	ault Date	31			
	Message f	rom webpage			×)
Comments		If Workers' Compensation is feentered. (24000,888)	or 2 years, Assault Da	ate must be	-
Save			Concern	OK	