

**FLORIDA DEPARTMENT OF EDUCATION
DOE INFORMATION DATA BASE REQUIREMENTS
VOLUME II: AUTOMATED STAFF INFORMATION SYSTEM
AUTOMATED STAFF DATA ELEMENTS**

Implementation Date: Fiscal Year 1997-98 July 1, 1997
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Element Name: Selected Benefits, Type/Value																																	
Definition/Domain																																	
<p>A code to identify up to fourteen types of benefits and their corresponding monetary values to which the school district contributed for the employee during the fiscal year being reported.</p> <p>Report the selected Benefits, Type in positions 1, 10, 19, etc. followed by the corresponding Selected Benefits, Value in the next eight positions.</p> <p>For Selected Benefits Type explanations, see Appendix I: Selected Benefits Definitions.</p> <table style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: left;"><u>CODE</u></th> <th style="text-align: left;"><u>DEFINITION</u></th> </tr> </thead> <tbody> <tr><td>A</td><td>Health and Hospitalization</td></tr> <tr><td>B</td><td>Life Insurance</td></tr> <tr><td>C</td><td>Social Security</td></tr> <tr><td>D</td><td>Florida Retirement System</td></tr> <tr><td>E</td><td>Commercial or Mutual Insurance Annuity Plan</td></tr> <tr><td>F</td><td>Unemployment Compensation</td></tr> <tr><td>G</td><td>Worker's Compensation</td></tr> <tr><td>H</td><td>Uniform Allowances</td></tr> <tr><td>I</td><td>Terminal Pay</td></tr> <tr><td>J</td><td>Sick Leave Buy Back</td></tr> <tr><td>K</td><td>Cafeteria Plan</td></tr> <tr><td>L</td><td>Other</td></tr> <tr><td>M</td><td>Medicare</td></tr> <tr><td>N</td><td>Cafeteria Plan - Administrative Costs</td></tr> <tr><td>O</td><td>No Benefits</td></tr> </tbody> </table> <p style="text-align: center;">CONTINUED ON NEXT PAGE</p>		<u>CODE</u>	<u>DEFINITION</u>	A	Health and Hospitalization	B	Life Insurance	C	Social Security	D	Florida Retirement System	E	Commercial or Mutual Insurance Annuity Plan	F	Unemployment Compensation	G	Worker's Compensation	H	Uniform Allowances	I	Terminal Pay	J	Sick Leave Buy Back	K	Cafeteria Plan	L	Other	M	Medicare	N	Cafeteria Plan - Administrative Costs	O	No Benefits
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Length: 126	State Reporting Formats Requiring This Data Element: Staff Fiscal Year Benefits DB9 44x																																
Format: Alphanumeric																																	
Compatibility Requirement: Compatible																																	
Use Types: <input checked="" type="checkbox"/> State Report <input checked="" type="checkbox"/> Local Accountability																																	
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Reported in Survey Periods: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5																																	
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July 1, 1997

Element Name: Selected Benefits, Type/Value (continued)

Definition/Domain (continued)

The monetary value of the contribution to the selected employee benefit should be reported using two decimal places, as follows.

Examples: 00012500 = \$125.00

00000000 = 0 No benefits received.

Note: The selected Benefits, Value should be the actual amount of the benefit attributable to the reported Job Code and should include only the employer's cost. Do not included any employee contributions.