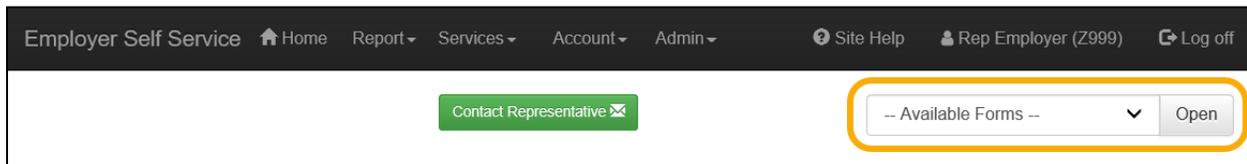




# Completing the e6000H - Employer Certification of Leave Balances and Final Salary

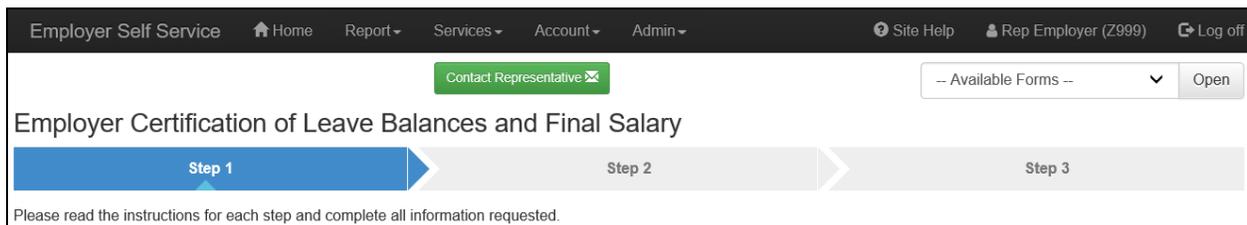
A member may file for retirement by completing the Form 6000, Notification of Retirement, or by submitting his or her retirement application online through Member Self Service. In order for Kentucky Public Pensions Authority (KPPA) to include future salary, service, and eligible sick and compensatory leave balances in the estimated retirement allowance, the employer must complete the Employer Certification of Leave Balances and Final Salary. Previously, this certification was available only as a section of the Form 6000, Notification of Retirement. KPPA is pleased to offer employers the ability to complete the certification electronically in Employer Self Service. The e6000H is the most efficient and secure method for employers to certify leave balances and final salary. Employers should submit the e6000H within three business days of notification of a member’s retirement in order for KPPA to promptly provide a calculation of benefits.

To access the e6000H – Employer Certification of Leave Balances and Final Salary wizard, log in to Employer Self Service, and locate the Available Forms drop-down list below the navigation bar on the far right side of the screen.



Select **e6000H – Employer Certification of Leave Balances...** from the list, then click the Open button. This will open the Wizard to complete the Employer Certification of Leave Balances and Final Salary.

The Wizard contains three (3) steps.



*Within the Employer Certification of Leave Balances and Final Salary wizard anything denoted with a red asterisk (\*) is a required field and must be completed in order to proceed to the next step.*



# Employer Reporting, Compliance & Education

## **Step 1 – Member Information:**

Complete the Member’s name, Member ID number, and termination date (format should be MM/DD/YYYY). The employer name and employer code will prepopulate.

Step 1

Complete the Member Name, Member ID, and Termination Date fields below then click next to proceed.

Employer Name: SAMPLE EMPLOYER  
Employer Code: Z999

Member Name:\*

Member ID:\*

Termination Date:\*

Click the  button at the bottom right of the screen to proceed to Step 2.

## **Step 2 – Sick Leave and Contract Days:**



*If your agency does not participate in a KPPA Sick Leave Program, or is not a School Board employer, step 2 will not be required.*

Select “Yes” or “No” to indicate if the member works an average of 21 days per month. If you select “No” you must provide an alternate average working days per month. This will affect how sick leave is calculated and converted to service credit.

Step 2

KRS will provide an estimated retirement allowance and benefits to the member using the sick leave reported on this form. These totals will be subject to post retirement audit and adjustment after retirement. Complete all required fields below then click next to proceed.

Does the member work an average of 21 days per month? \*  Yes  No

This Wizard will also recognize which Sick Leave Plan your agency elected. For the Standard Sick Leave Plan, input the Accumulated Sick Leave (in hours) and Hours in a Sick Leave Day as required on the screen.



# Employer Reporting, Compliance & Education

Standard Sick Leave Program: Your agency is participating in the standard sick leave program, please provide the following information.

Accumulated Sick Leave (in hours): \*

Hours in a Sick Leave Day: \*

Note: Contributions should not be withheld from standard sick leave lump sum payouts.

If your agency participates in the Alternate Sick Leave Plan, the Wizard will require you to input the Accumulated Sick Leave (in days), Hours in a Sick Leave Day, and Estimated Compensation to be Paid for Sick Leave.

Alternate Sick Leave Program: Your agency is participating in the alternate sick leave program, please provide the following information.

Accumulated Sick Leave (in days): \*

Hours in a Sick Leave Day: \*

Estimated Compensation to be Paid for Sick Leave: \*

Note: Contributions should be withheld from alternate sick leave lump sum payouts.

Step 2 also requires School Board employers to indicate the number of actual days worked through the expected termination date. When reporting the school year, input the year in which the school year will end (example: 2019-2020 school year reported as 2020).

School Board Certification (*school board employees only*): Indicate the number of actual days the member will have worked through the expected termination date. If the days occur in different school years, please list each school year separately below.

School Year*	Number of Actual Days*
<input type="text"/>	<input type="text"/>
School Year	Number of Actual Days
<input type="text"/>	<input type="text"/>

### **Step 3 – Employer’s Report of Final Salary:**

The final salary information should include three (3) months of salary prior to the member’s termination date plus any wages paid at, or beyond, their last day of employment. Retirement counselors use these figures when estimating the member’s retirement benefits. If the Employer Representative requires additional rows for salary information, they can add up to five more by clicking the [Add a New Row](#) button below the final salary fields.



Kentucky Public Pensions Authority

# Employer Reporting, Compliance & Education

**Step 3**

Due to the reporting process, there may be a delay from the time you report member records and the time it is available for KRS to use in benefit calculations. For this reason we ask that you verify the actual earned wages for the three months prior to the date you are completing this certification and each month thereafter through the member's anticipated date of termination. KRS will provide an estimated retirement allowance and benefits to the member using the salaries reported on this form. These totals will be subject to post retirement audit and adjustment after retirement. Input your PIN to complete this process.

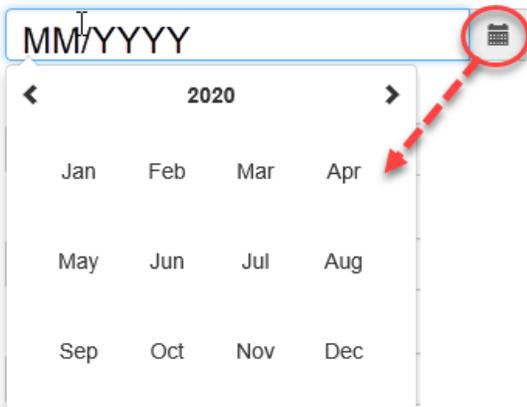
**Employer's Report of Final Salary**

Posting Month	Payment Reason	Salary
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

[Add a New Row](#)

## Posting Month

MM/YYYY



The date for the Posting Month must be in MM/YYYY format. You can also use the calendar to select the month and year for the salary reported.

## Payment Reason

- Regular pay
- Regular Pay w/ Add Creditable Comp
- Lump sum Compensatory Pay
- Lump Sum Compensatory Pay at Termination
- Bonus/Severance Payment
- Wages Paid After Termination but Earned Prior to Term
- Contract Payout

Select the appropriate Payment Reason. Contributions should not be withheld on any payments that are not reported to KPPA.



*Lump sum payments of accrued annual/vacation time or sick leave, excluding the alternate sick leave payment, is not reportable to KPPA.*

After completing the required final salary information input your 4-digit PIN and hit Submit to complete the process.



Kentucky Public  
Pensions Authority

## Employer Reporting, Compliance & Education

### Employer Certification

I certify that the leave balances and estimated final salary information provided above is accurate based upon our agency's records. I state that I have full knowledge of the penalty in KRS 523.100 related to falsification of records and that the information provided is true and accurate.

Entering your PIN number below will act as your digital signature for this document.

Enter PIN here:\*

Submit

You will receive a confirmation that you may print for your records for proof of submission. You do not need to send anything to KPPA. The wizard data uploads automatically to the member's account, and a retirement counselor will review the information and send any inquiries to the employer's Reporting Official.

If you have any questions about this process, or encounter any issues while you are using the e6000H Wizard please contact your ERCE Representative or call 1-888-696-8810.