TO: Agency HR/Payroll Training Contacts

FROM: FISA-OPA Training

DATE: April 3, 2023

SUBJECT: Payroll Information Administration System Virtual Instructor-Led Training Schedule

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NYCAPS agencies: Please log into NYCAPS HRB to waitlist your employees to attend a P*i* Admin Training session.

Non-NYCAPS agencies: Please complete and send the accompanying P*i* Admin Training Request form via **Remedy** ticket. If a class is full, your employees will be placed on the waitlist.

Class Name	Class Dates & Class Time	NYCAPS Course Code	Course Session Nbr
Payroll Information Administration System Virtual Instructor-Led Training	**Day 1** – Tuesday, 7/18/2023 (9:30am – 1:00pm) **Day 2** – Wednesday, 7/19/2023 (9:30am – 1:00pm) **Day 3** – Thursday, 7/20/2023 (9:30am – 1:00pm) **Day 4** – Tuesday, 7/25/2023 (9:30am – 1:00pm) **Day 5** – Wednesday, 7/26/2023 (9:30am – 1:00pm) **Day 6** – Thursday, 7/27/2023 (9:30am – 1:00pm)	1P*i*A	H230

Attendees **must** attend the six (6) sessions (3½ hours each session) from start to finish in order to receive a Certificate of Completion.
Attendees **must** have access to CityShare (*https://cityshare.nycnet/*) and be able to access Webex.
The above dates/times are subject to change without notice.

COURSE DESCRIPTION

Payroll Information Administration System Virtual Instructor-Led Training

This course will enable City employees responsible for updating employee payroll records to use the Payroll Information (P*i*) Administration System to view and update employee payroll records. At the end of the course, participants will be able to use the P*i* Admin System to view employee pay records and to process employee payroll transactions. Topics that will be covered in the class include the following:

- Overview of the Payroll Management System (PMS) and its relation to the P*i* Administration System.
- Navigation in P*i* Admin, and reviewing Employee Inquiry Screens.
- Processing Elected Deductions, Direct Deposit, Taxes, One Time Payment/Deductions, and Miscellaneous Deduction transactions.
- Overview of the Retroactive Subsystem in PMS; processing Pending Pay Details, and Pending Deductions transactions.
- Processing Retro Pay Trigger, Retro Leave Trigger, and Request for Supplemental Payroll transactions.
- Running and Exporting Reports in the P*i* Administration System.
- How to use the Pay Cycle reports from RMDS (Reports Management Distribution System) to review the agency payroll in order to ensure accurate payments for employees.
- Best practices for processing and reviewing employee records and payroll transactions during pay calc week and pay week.

COURSE PREREQUISITE(S):
1. Participants should be P*i* Admin users who did not previously attend this course.
2. Prior to attending training, participants must be authorized to access P*i* Admin by their agency P*i* Admin Security Officer.
3. To successfully complete P*i* Admin training, participants must have basic desktop computer skills, including navigating Windows, using Chrome or Edge browsers, MS Office Excel and Adobe Reader.

SECTION	UNIT	TOPIC
ONE	UNIT I:	SYSTEM OVERVIEW
	UNIT II:	OVERVIEW OF PMS
	UNIT III:	GETTING STARTED
	UNIT IV:	EMPLOYEE INQUIRY SCREENS
TWO	UNIT V:	ELECTED DEDUCTIONS
	UNIT VI:	DIRECT DEPOSIT
	UNIT VII:	TAXES
	UNIT VIII:	ONE TIME PAYMENT/DEDUCTION
THREE	UNIT IX:	OVERVIEW OF RETRO PROCESSING AND PENDING PAY
FOUR	UNIT X:	PENDING PAY DETAILS
	UNIT XI:	PENDING DEDUCTIONS
FIVE	UNIT XII:	MISCELLANEOUS DEDUCTIONS/GOAL
	UNIT XIII:	RETRO PAY TRIGGER
	UNIT XIV:	RETRO LEAVE TRIGGER
SIX	UNIT XV:	REQUEST FOR SUPP PAYROLL
	UNIT XVI:	REPORTS PT. 1 (PI REPORTS)
	UNIT XVI:	REPORTS PT. 2 (RMDS PAY CYCLE REPORTS)

Attendees **<u>must</u>** attend the six (6) sessions (3½ hours each session) from start to finish in order to receive a Certificate of Completion.

REQUEST FOR P*i* TRAINING (Non-NYCAPS Agencies)

Agency Name: _____

Agency Training Contact: _____ **Phone No:** _____

Agency Payroll No.: _____ **Date:** _____

PARTICIPANT'S NAME AND EMPL NUM (*Please* Print *or* Type)	In order to ensure a good match between participant and course, please answer the following questions.	
	1. Is the employee currently a PMS User?	**2.** If Yes to #1, how long has employee worked on PMS?
1. Name: Empl Num:		
2. Name: Empl Num:		
3. Name: Empl Num:		
4 Name: Empl Num:		
5. Name: Empl Num:		

Submitted by:_____Tel. No./Email: _____

Approved by:_____Tel. No./Email: _____

Non-NYCAPS Agencies: Please submit the completed Request for Training form via a Remedy ticket.

We look forward to seeing your employees at P*i* Training.