eMPWR-va

Updated: 04/26/2021

Transaction 06ZB: Trace Unidentified Beneficiary Payment

The purpose of the Trace Unidentified Beneficiary Payment (06ZB) transaction is to trace payments for beneficiaries who are not found in the corporate database, because beneficiary records have not yet migrated from the Benefits Delivery Network (BDN). After a **File Number** search is conducted and the beneficiary is not found, eMPWR-VA will present the option to process an 06ZB. This transaction enables you to trace payments that originated outside of FAS/eMPWR-VA. This transaction is used to collect the information needed to generate a trace on a single payment transaction.

Step 1

Login to eMPWR-VA and then search for a participant.

Step 2

After unsuccessfully searching for a participant (who has yet to exist in eMPWR-VA), select 06ZB - Trace Unidentified Beneficiary Payment from the Participant Search screen.

eM[®]PWR-va	All 🔻	Q Search
eMPWR-VA Home	~	
Stations Station 317		
Participant Search		
* File Number/SSN/TIN		
20020020		Search
No record found for File Number/SSN/TIN. You may choose to Re-Ent <u>er File Number/SSN/TIN or pro</u>	ocess an A	21 - Unidentified Return payment or an 06ZU - Trace Unidentified
Beneficiary Payment or an 06ZB - Trace Unidentified Bene	eficiary Pa	yment .

From the Trace Unidentified Beneficiary Payment screen, fill out the Beneficiary First Name and Last Name.

tential Fraud
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n Packet Address
· · · · · · · · · · · · · · · · · · ·
ent Method
ent #
n

Note: Users cannot generate trace transactions for themselves, those of relatives, or those of participants with protected records higher than the access level of the employee attempting to process the transaction.

Select **Special Address** to enter the **Claim Packet Address**. This is where the **Trace Payment Claim** packet will be mailed to. The **Claim Packet Address** will require manual processing for 06ZB transactions.

Trace Unidentified Benef	ìciary Payment
Transaction Details	
* File Number 20020020 Payee code	Potential Fraud Claim Packet Address
* Beneficiary First Name Jane Beneficiary Middle Name	+ Special Address Refresh * Payment Method Select an Option ▼
*Beneficiary Last Name Smith *Step Code	* Payment #

Note:

- Select the **Potential Fraud** check box <u>only if</u> you want Treasury to know that there is potential fraud associated with the claim. This indicator will be included in the output tracer file to Treasury.
- The **Special Address** functionality is available for a **One-time Address** for extraordinary circumstances. It is a physical address for mailing a claim packet.
- The **Payee Code** is not a required field; however, it's preferred to be entered if available.
 - **Payee Code 30** should be entered when tracing Vendor payments, such as Chapter 33 School payments.

Select the appropriate **Stop Code** by using the drop-down list.

Stop Code description:

- **D** = entitlement recertified after status
- **F** = non-entitlement
- **G** = entitlement lost stolen after endorsement
- **K** = photocopy
- **L** = certified photocopy
- **M** = status no photocopy

Jane	123 Main Street
Beneficiary Middle Name	Happy Valley, PA 16801 USA
* Beneficiary Last Name	+ Special Address Refresh
Smith	* Payment Method
* Stop Code	Select an Option 🔹
Select Stop Code	* Payment #
* Payment Amount	
* Payment Date	
	☆
* Trace Benefit Type	
Select an Option	•
Payment Type	
Select an Option	▼

Note: EFT payments can only be traced by using **Stop Code D**.

Enter the **Payment Amount**.

	123 Main Street	
Beneficiary Middle Name	Happy Valley, PA 16801 USA	
* Beneficiary Last Name	+ Special Address Refresh	
Smith	* Payment Method	
* Stop Code	Select an Option	•
L - Certified Photocopy	Payment #	
* Payment Amount		
* Payment Date		
	曲	
* Trace Benefit Type		
* Trace Benefit Type Select an Option	▼	
* Trace Benefit Type Select an Option Payment Type	▼	

Enter the **Payment Date**. The payment date cannot be in the future.

Smith		* Payment Method
* Stop Code		Select an Option 🔹
L - Certified Photocopy	•	* Payment #
* Payment Amount		
\$1,566.00		
* Payment Date		
	曲	
* Trace Benefit Type		
Select an Option	•	
Select an Option Payment Type	•	

Step 8

Select the appropriate **Trace Benefit Type**.

*Beneficiary Last Name		+ Special Address	Refresh	
Smith		* Payment Method		
* Stop Code		Select an Option		•
L - Certified Photocopy	•	* Payment #		
* Payment Amount				
\$1,566.00				
* Payment Date				
4/5/2021	ä			
* Trace Benefit Type				
Select an Option	-			
Payment Type				
Select an Option	-			

Refer to the Field Derivation for Submission to Treasury document available under the Job Aid tab on this dashboard for a list of Trace Benefit Types and when each type should be selected.

Select the **Payment Method**. It's either a **Check** or an **Electronic Fund Transfer**.

* Beneficiary Last Name		+ Special Address	Refresh	
Smith		* Payment Method)
* Stop Code				•
L - Certified Photocopy	•	* Payment #		
* Payment Amount				
\$1,566.00				
* Payment Date				
4/5/2021	t			
* Trace Benefit Type				
CH30	•			
Payment Type				
Select an Option	•			

Note: If you selected **Electronic Fund Transfer** as the **Payment Method**, the following fields are automatically generated and are required for you to fill out: **Routing Number, Account Number**, and **Account Type**.

* Payment Date		* Routing Number
4/5/2021		
* Trace Benefit Type		* Account Number
CH30	-	
* Payment Method		* Account Type
Electronic Fund Transfer	•	•
*Notes		
type here		

Enter the **Payment #**.

* Beneficiary Last Name		+ Special Address	Refresh	
Smith		* Payment Method		
* Stop Code		Check		-
L - Certified Photocopy	•	* Payment #		
* Payment Amount				
\$1,566.00				
* Payment Date				
4/5/2021	苗			
* Trace Benefit Type				
CH30	•			
Payment Type				
Select an Option	•			

Note:

- If the **Payment Method** is **Check**, an 8-digit numeric check number is required for the **Payment #**. In our example, we selected **Check**.
- If the **Payment Method** is **Electronic Fund Transfer**, a 7-digit numeric electronic funds transfer (Treasury Trace) number is required for the **Payment #**.

Select the **Payment Type**. This is NOT a required field. However, it becomes required when **CH31**, **Compensation Live**, **Compensation Death**, **Pension Live**, **Pension Death**, or **REPS** is the selected **Trace Benefit Type**.

L - Certified Photocopy	* Payment #
* Payment Amount	54323690
\$1,566.00	
* Payment Date	
4/5/2021	ì
* Trace Benefit Type	
СН30	7
Payment Type	
Select an Option	r
Recurring	
Retro	
EDU Advance Pay	<u> </u>
Treasury Courtesy Disbursement	ncel Back Save Submit

Enter notes in the **Notes** field. In our example, **Notes** are not a required field.

* Payment Date	
4/5/2021	曲
* Trace Benefit Type	
CH30	▼
Payment Type	
Select an Option	•
Notes type here	1
	Cancel Back Save Submit

Step 13

Select the **Submit** button to continue.

* Trace Benefit Type	
CH30	•
Payment Type	
Select an Option	•
Notes	
Notes go here.	
	12
	Cancel Back Save Submit

Note:

- The **Save** button saves the transaction to your **Work Queue** so you can complete it at a later time.
- The **Back** button discontinues processing the transaction and takes you back to the **Available Transactions** screen.
- The **Cancel** button discontinues processing the transaction and takes you back to the **Participant Page**.

A green **Success** message will appear briefly at the top of the eMPWR-VA **Home** page letting you know that the transaction has been submitted. No authorization is required for this transaction.

Success	
Transaction submitted	
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Note:

- **Fiscal Print:** Fiscal Print will generate after successful submission.
- Vendor Applicability: This transaction is available to trace Vendor Payments, which is based on the Program Type and Payee Code entered.