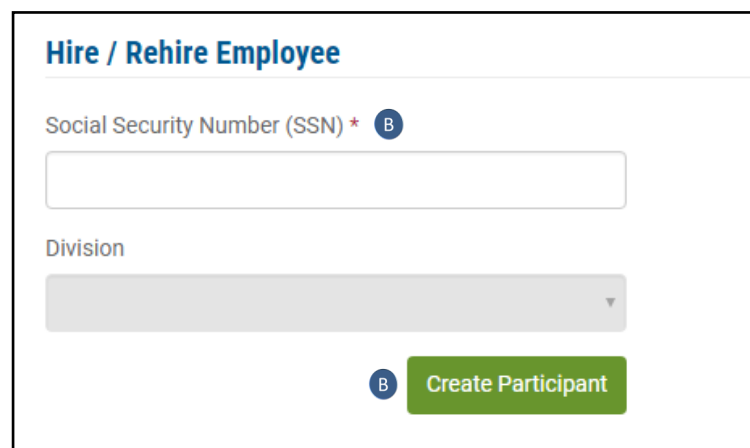


Creating a New Employee and New Hire Enrollment

EmployerFocus allows you to create and manage employee and enrollment information. An employee can easily be added by selecting the New/Rehire Employee page.

- From the **Employee** drop down menu, select **New/Rehire Employee**.
- Enter the employee's nine-digit social security number (SSN), select the **Division** from the drop down menu, and click the **Create Participant** to begin entering employee demographic information.



The screenshot shows the 'Hire / Rehire Employee' form. It contains a text input field for 'Social Security Number (SSN) *' labeled with a circled 'B', a dropdown menu for 'Division', and a green 'Create Participant' button labeled with a circled 'B'.

New/ReHire Employee - Employee Information

- A. **Employee Demographics** - Enter fields such as the employee's name, date of birth, and gender. Enter all four digits for the birth year. **Note: Required fields are marked with asterisk.**
- B. The top navigation bar is your guide to assist you during your enrollment process.

New/ReHire Employee - Employee Information Help Guide

Please complete the required (*) information

1 Employee — **2 Dependents** — **3 Coverages** — **4 Docs & Forms** — **5 Review & Submit**

Employee Demographics

First Name * Middle Last Name *

Name Prefix Name Suffix Social Security Number (SSN) *

Date Of Birth * Age *

Gender * ☐ Male ☐ Female Marital / Partner Status * Date Of Marriage / Partnership

Citizenship Language Race

☐ Is Disabled Tobacco Usage

New/ReHire Employee - Employee Information (cont.)

- C. **Street Address** section - Enter the street address and zip code. Click the arrows in the **City** field to select the correct area for multiple county zip codes.
- D. **Employment Information** section - Date of hire cannot be more than 30 days in the future.
- E. **1099 or Seasonal Employee** - Check this box if the employee is a 1099 or seasonal employee. For more information on 1099 employees, visit the IRS website: <https://www.irs.gov/businesses/small-businesses-self-employed/independent-contractor-self-employed-or-employee>
- F. **Benefit Information** section - Enter all required information, including **Benefit Salary** if ancillary coverages are available.
- G. Click **Save & Continue** to save changes made and proceed to the next step.

Contact Information C

Street Address 1 *

Street Address 2

Zip Code *

City *

State

County

Country

Home Phone

Business Phone

Business Extension

Mobile Phone

Fax

Work Email

Personal Email

☐ Consent to Personal Email ⓘ

Preferred Method of Contact
Business Phone

Employment Information D

Date of Hire *

Occupation

Work Status *

Date of Retirement

Employment Status *

Hours per Week

☐ 1099 Employee ⓘ

☐ Seasonal Employee ⓘ

Benefit Information F

Class *

Benefit Salary

Ancillary Class *

Payroll Cycle *

Custom Field 1 ⓘ

Custom Field 2 ⓘ

Enrollment Application Received Date

Previous

Save

Save and Continue G

New Hire Enrollment - Manage Dependent(s)

- A. The **New Hire Enrollment - Manage Dependent(s)** page displays to add a spouse, a domestic partner, or a child. The dependent types may vary based on the Carrier guidelines and/or your Group's contract.
- B. To add a dependent, click the appropriate **Add Spouse** or **Add Child** button.
- C. Complete the dependent's information and click **Save**.
- D. Added dependents are displayed in the **Dependent Information** section with an option to make changes by clicking **Edit**.
- E. If there are no dependents to add, simply click the **Next** button to continue with Enrollment.

New Hire Enrollment - Manage Dependent(s) A Help Guide

You must provide information for all the individuals applying for coverage. Mary Customer View

1 Employee

2 Dependents

3 Coverages

4 Docs & Forms

5 Review & Submit

Instructions
To add a new dependent, click the appropriate Add button. To edit existing dependent information, click Edit.
If there are no changes to dependent information, click Next.
Note A Social Security Number (SSN) is required for all dependents over the age of one when enrolling in medical coverage.

Dependent Information D

NAME	RELATIONSHIP	AGE	DATE OF BIRTH	ACTION
No dependents on file.				

Add Spouse

Add Domestic Partner

Add Child

B

Previous


E
Next

New Hire Enrollment - Select Your Coverage(s)

Notice the top navigation bar, it is tracking where you are in the enrollment process. E.g. **Coverages**

- A. Icons allow you to add or update information. Select one of the actions for the available plans. **Note:** You can only perform one action at a time.

+Select - Select dependents and coverages to enroll into

 Edit - Edit dependents and coverage selections

 Waive - Waive coverage selections

- B. The **Current Status** field displays the enrollment status of the listed coverages.

- C. To enroll into a coverage, click **Select**.

- D. To waive a coverage, select **Waive**.

New Hire Enrollment - Select Your Coverage(s)

Please make benefit selections for you and your dependents.

1 Employee ————— **2** Dependents ————— **3** Coverages ————— **4** Docs & Forms ————— **5** Review & Submit

Coverage Selections

Show costs by: Bi-Weekly

VIEW MORE ▼	PLAN INFORMATION	COVERAGE LEVEL/ BENEFIT AMOUNT	EFFECTIVE DATE	EMPLOYEE COST	EMPLOYER COST	TOTAL PLAN COST	B CURRENT STATUS	A ACTION
▼	MEDICAL – Aetna - SG Health Network Only	Employee Only	11/01/2017	\$4.62	\$0.00	\$4.62	Enrolled	Edit ✕ Waive D
▼	DENTAL – This coverage is Waived						Waived	Edit
▼	VISION – This coverage is Waived						Waived	Edit
▼	LIFE – Pending Enrollment...						Pending	+ Select C
▼	AD&D – UnitedHealthcare Insurance Company AD&DGroup	\$25,000.00	11/01/2017	\$0.00	\$0.23	\$0.23	Enrolled	Edit
▼	FSA - Medical – This coverage is Waived						Waived	Edit
		Total Cost Bi-Weekly:		\$4.62	\$0.23	\$4.85		

[Return to Dependent Management](#) [Next](#)

New Hire Enrollment - Select Your Coverage(s) (cont.)

- A. The **Select the participants who will be enrolled in Coverage Benefits** section gives you the option to select the dependents that will be covered under a plan or to waive coverage for all dependents. Waiving medical and/or dental coverage will require a waiver reason to be entered for the employee and any applicable dependents.
- B. **Select a benefit plan** allows for a plan to be selected. This section displays all plans available for that line of coverage with details on benefits and rates by coverage level.
- C. You can review plan benefit and rate information in this section. For a given plan, the blue arrow allows you to review the **Carrier Plan Summary** document. Clicking the listing icon provides a view of the plan details.
- D. You can compare multiple plan details by selecting the **Add to Compare** on each of the plans and then clicking **Compare Plans**. Once you have decided on the plan to enroll into, click **Enroll**.
- E. The **Enter Additional Participant Information** page displays information that is optional for entry, unless marked with a required icon, for **Primary Care Physician**, **Other Coverage**, and **Prior Coverage**.

VISION Benefits

1. Select the participants who will be enrolled in VISION Benefits A

☐ Waive VISION Coverage for all participant(s)

Participant	Covered
Mighty Man (Self)	<input checked="" type="checkbox"/>

2. Select a VISION Plan B

Show costs by: Bi-Weekly

Vision Service Plan Insurance Company Signature Plan C

Annual Eye Exam	Information Not Available	Employee Only	\$0.00
Contact Lenses	Information Not Available	Employee & Spouse	\$4.34
Frames	Information Not Available	Employee & Child	\$4.56
Service Interval	Information Not Available	Employee & Children	\$4.56
		Employee & Family	\$11.23

D
☒ **Enroll**
☐ **Add to Compare**
Compare Plans

3. Enter Additional Participant Information E

The information requested below is optional, unless marked with a Required Information (i) icon

NAME	RELATIONSHIP	AGE	GENDER	PRIMARY CARE PHYSICIAN	OTHER COVERAGE	PRIOR COVERAGE
Mighty Man	Self	27	Male	+ Add Details	+ Add Details	+ Add Details

Legend: [+ Add](#)

[View/Edit](#)

[Delete](#)

Required Information

[Back to Coverage Selection](#)

Save

New Hire Enrollment - Review Your Documents & Forms

- A. You can review documents and forms before completing the enrollment.
- B. You can also add any supporting documents for enrollment, i.e. **Citizenship document**, by clicking the **Add Document** link. Simply browse to add a document and input a title and description.

New Hire Enrollment - Review Documents & Forms A

Please review, download and/or acknowledge receipt of documents and forms to complete your enrollment. First Haussee [View](#)
Tip: You can upload bmp, doc, docx, gif, jpeg, jpg, pdf, png, tif, tiff documents with a max size of 20 mb.

1 Employee — 2 Dependents — 3 Coverages — **4 Docs & Forms** — 5 Review & Submit

Documents & Forms					
TITLE / DESCRIPTION	TYPE	FILE	STATUS	ACTION	
Citizenship Documents to confirm your U.S. citizenship.	Form Requiring Upload	Download File Citizenship.docx View	Upload Complete	Upload File Delete	
Tobacco Surcharge A tobacco surcharge is a variation in insurance premiums based on a policyholder (or dependent's) tobacco use.	Form Requiring Upload	Download File TobaccoSurcharge.docx View	Upload Complete	Upload File Delete	

[* Add Document](#) B

[Return to Coverages](#) Next

Add Document ×

Add Document *

[Browse](#) B

Title *

Description

Close Save changes

New Hire Enrollment - Review & Submit Your Selections

- The **New Hire Enrollment - Review & Submit Your Selections** page displays allowing you to review all plan selections prior to completing the submission.
- This page provides a listing of all the plans selected in the Coverages step. Also noted here are the **Coverage Level/Benefit amount**, **Employer Cost**, **Employee Cost**, **Total Plan Cost**, **Effective Date**, and **Renewal Date**.
- The **VIEW MORE** drop down arrow allows you to view detail information of the plan, such as a listing of the dependent enrolled.
- By checking the **Electronic Signature** checkbox and clicking **Submit Elections**, you consent the employee's enrollment elections are correct.

New Hire Enrollment - Review & Submit Your Selections A

Please review your selections to make sure they are correct before submitting. Mighty Man

1 Employee
 2 Dependents
 3 Coverages
 4 Docs & Forms
 5 Review & Submit

Benefit Enrollment Selections B
Show costs by: Bi-Weekly

VIEW MORE	PLAN INFORMATION	COVERAGE LEVEL/BENEFIT AMOUNT	EMPLOYEE COST	EMPLOYER COST	TOTAL PLAN COST	EFFECTIVE DATE	RENEWAL DATE
C	MEDICAL - Aetna Innovation Health Plan Inc AFA IHFA Open POS II 2000 HSA 100/80 VP	Employee Only	\$0.00	\$149.13	\$149.13	10/01/2017	02/01/2018
	DENTAL - Not Enrolled						
	VISION - Vision Service Plan Insurance Company Signature Plan	Employee Only	\$0.00	\$6.34	\$6.34	10/01/2017	12/01/2017
	STD - Principal Life Insurance Company STDGrp	\$854.00	\$0.00	\$8.28	\$8.28	11/01/2017	12/01/2017
	LTD - Principal Life Insurance Company LTD Group	\$3,700.00	\$0.00	\$9.11	\$9.11	11/01/2017	12/01/2017
	LIFE - Principal Life Insurance Company Life Grp	\$74,000.00	\$0.00	\$3.96	\$3.96	11/01/2017	12/01/2017
	AD&D - Principal Life Insurance Company AD&DGroup	\$74,000.00	\$0.00	\$0.72	\$0.72	11/01/2017	12/01/2017
	Total Cost Bi-Weekly:		\$0.00	\$177.54	\$177.54		

Electronic Signature

☐ By checking this box, you are consenting to the electronic delivery of this Employee's group insurance selections. Furthermore, you are submitting the request as if the employee physically signed and forwarded a paper authorization to BenefitMall for the proposed changes.

Previous
D Submit Elections

Your Enrollment Submission is Complete

- A. The **Extras** section allows you to print available enrollment documents. Click the links to access these forms.
- B. The **Need Additional Benefits** section is for available supplemental benefits that are offered at a discounted rate. Click **Shop Now** to take a look.

Note: **Additional Benefits** are individual plans offered independent of Employer Sponsored plans. Enrollment and Premiums are handled directly by the selected carrier and/or vendor. To disable this feature, select **Company Settings** from the Company menu. Navigate to the **Supplemental Benefits** tab and uncheck the **Provide Employees with Information on Voluntary Coverage offering**.

Your Enrollment Submission is Complete

Extras **A**

Print an Evidence of Insurability form to make an approval request with the carrier

Print your Submitted Enrollment for your records

Print an enrollment application form

Tip: Did you know you could manage your beneficiaries at any time? [Click here](#) to go manage beneficiaries

Need Additional Benefits? **B**

We are now offering BenefitMall EmployerFocus Supplemental Benefits, a new, state-of-the-art, online shopping platform that allows you to shop for personal insurance and financial-based products from multiple providers, enhancing your benefits coverage.

[Shop Now](#)

ASPCA Pet Health Insurance

Underwritten by United States Fire Insurance Company

Valuable Protection for Your Pet!

You can get help protecting your pet's health with ASPCA Pet Health Insurance. Don't wait until an unexpected accident or illness happens. Enroll today!

[Learn More And Get Pricing >](#)

freshbenies

Save TIME MONEY and FRUSTRATION

Save hundreds to thousands on healthcare! freshbenies takes the headache out of healthcare (and more)...all in one easy-to-use card!

Offset skyrocketing out-of-pocket costs with non-insurance services that help you save hundreds to thousands on your family's healthcare!

[Learn More And Get Pricing >](#)

Dental Insurance

Nationwide Multiflex Dental

Thinking about Dental Insurance? MultiflexSM Dental Insurance gives you a reason to smile!

Nationwide MultiflexSM Dental offers low-cost, comprehensive dental coverage to individuals of all ages.

6 Month Basic Services Waiting Period WAIVED with annual premium option.

[Learn More And Get Pricing >](#)

Legal Services

Hyatt LegalPlans

Finding an affordably priced lawyer to assist you can be a challenge.

Now, there's an easy affordable solution: LawPlan[®]. It's like having your own lawyer on retainer!

The plan covers you, your spouse and dependent. Convenient and affordable, with Hyatt LawPlan[®] you can receive advice and fully covered legal services.

[Learn More And Get Pricing >](#)

ID Theft Protection

CyberScout

CYBERScout Identity theft hits a new victim every two seconds. Don't be next.

CyberScout[™] is the premier provider of identity management services, providing proactive education and tips to mitigate your risk of identity theft, along with credit and fraud monitoring. Access a fraud specialist 24/7 to help you navigate through an identity theft incident.

[Learn More And Get Pricing >](#)

Vision Insurance

Nationwide Vision Plans

With insurance to help cover expenses associated with visiting the eye doctor, you can avoid serious vision problems and see more clearly.

Nationwide has partnered with VSP[®] Vision Care to offer the largest network of doctors and a variety of valuable benefits including coverage for an annual exam!

[Learn More And Get Pricing >](#)

GAP Plans

GAP Plus/ GAP CI Plans

Do you have a high deductible health plan?

Help bridge the gap of your out-of-pocket costs with an affordable Gap Plan. Choose a plan to fit your needs.

[Learn More And Get Pricing >](#)