

# **New Hire Online Benefits Enrollment Instructions**

1. Sign into FlashLine.
2. Select the My HR tab.
3. Select **Enroll in Benefits** (under the Job Flash – New Hire Requirements section).

**My Campus** | **My Account** | **Student Career Path** | **My HR** | **My Action Items** | **Alumni** | **My Tab**

**Employment Details**

- Benefits
- Benefits
- Deductions History
- Direct Deposit
- Earnings History
- Employee Menu
- Leave Balances
- Pay Stub
- Personal Information
- Tax Forms
- United Way E-give
- Need additional help from Human Resources? Access a contact list.

**Forms Library**

- All Forms in Forms Library
- Absence
- Benefits
- Employment
- Faculty Personnel Forms
- Payroll
- Performance Evaluation - Classified & Unclassified Staff
- Miscellaneous (includes label requests)

**Time Reporting**

**Time Reporting in Kronos: (Employee) Clock in/out**  
Please note: Kronos time keeping should be

**Job Flash**

**New Hire Requirements**  
As you begin your career at Kent State, please remember to complete these tasks **within your first month of employment**:

1. Enter Emergency Contact Information
2. Enter **W4** Withholding Allowances
3. Enter **State** Withholding Allowances
4. Enroll in Direct Deposit
5. Find Orientation Dates; Register
6. **Enroll in Benefits**  
Additionally, please **download**, review and, if necessary, complete, and return these forms:
1. Declaration of Prior State Service
2. Declaration Regarding Material Assistance/Non-Assistance to Terrorist Organizations (DMA)
3. DMA Terrorist Exclusion List (DMAT)
4. I-9 Employment Eligibility Verification
5. Ohio Ethics - Chapter 1020E
6. Ohio Ethics - Section 2921.42OE
7. Ohio Ethics Law - New Hire Compliance Form - Classified
8. Statement Concerning Your Employment in a Job Not Covered by Social Security

You will continue to use this **My HR tab** for access to employment details, pay stub information, leave accruals, time reporting and more.

Access the **My Action Items** tab for time approval, Banner INB, tuition waiver forms and more.

**View Hot Job Opportunities**  
Share these job opportunities with your colleagues and acquaintances. See [www.kent.edu/hr](http://www.kent.edu/hr) for access to a full listing of job opportunities at Kent State.

**Training & Development**

TRAINING & DEVELOPMENT

The Division of Human Resources understands that learning can take many different forms. As a result, a variety of experiences that will contribute to your personal and professional development has been developed.

- Course Catalog of Training Workshops (pdf)
- Course Catalog of Training Workshops By Function
- Register for Training Opportunities

**Total Compensation**  
What is total compensation?  
**University Benefits**  
Medical, vision, dental, prescription, group life, tuition waiver, long-term disability and more.

**Earned Income** - view salary ranges for staff employees

**Other Compensation Information**

- Job Descriptions
- Reclassification Procedures

**Your Total Compensation Statement**

**Collective Bargaining Agreements**

- 2011 Collective Bargaining Information
- Collective Bargaining Agreement, Tenure-track Faculty (pdf file)
- Collective Bargaining Agreement, Full-time Non-Tenure-Track Faculty (pdf file)
- AFSCME Collective Bargaining Agreement (pdf file)

**Extra Resources**

FT / Dean, College of Technology / Kent Campus

## Welcome to the New Hire Online Enrollment Site

4. Read the instructions carefully.
5. Click on New Hire Enrollment to begin the benefits selection process.

**Benefits Enrollment - Windows Internet Explorer**

https://keys-test.kent.edu:45420/eMOCK/bwpl.dsta.P\_ShowEnrollmentMenu

File Edit View Favorites Tools Help

Google Search Share More

Sign In

TeamDynamix Version... Benefits Enrollment

**Personal Information** | **Student and Financial Aid** | **Employee**

RETURN TO MENU SITE MAP HELP EXIT

**Benefits Enrollment**

Welcome to the New Hire Benefits Online Enrollment Site. On the following pages, you will have an opportunity to elect employer-provided benefits as well as voluntary benefits for you and your family. Please be prepared to provide pertinent information regarding your spouse, domestic partner and other eligible dependent(s). As you progress through the site, review your elections carefully. Once you've completed the benefits election process, click **Finish Enrollment** and print a copy of your benefits elections for your records. **Remember, you have 30 days from your date of hire to make your benefits elections AND submit all dependent verification documents.**

To begin, click **New Hire Enrollment**. For an overview of the benefits offered, go to our Benefits web page.

**New Hire Enrollment**

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6. You have now begun your benefits selection process.

7. Click on Start Enrollment to begin.

**New Hire Enrollment - Windows Internet Explorer**

https://keys-test.kent.edu:45420/eMOCK/bwpkdsta.P\_ShowNewHireEnrollment

File Edit View Favorites Tools Help

Google Search Share More Sign In

TeamDynamix Versio... New Hire Enrollme...

Personal Information Student and Financial Aid **Employee**

SITE MAP HELP EXIT

### New Hire Enrollment

To begin your benefit election, select the **"Start Enrollment"** button. You will have the opportunity to add your dependent(s) once you have made a benefit election. When you are satisfied with all of your enrollment elections, click **FINISH ENROLLMENT**, to view or print the details of your elections. To cancel your elections, select **CANCEL ENROLLMENT**, if displayed, and the changes you have made during this session WILL NOT be saved. NOTE: If you choose to opt out or refuse benefits, you must click the Medical button below to begin that process.

Dependent eligibility documents must be submitted to University Benefits **within 30 days from the date of hire**. **YOUR BENEFIT ELECTIONS WILL NOT BECOME EFFECTIVE UNTIL YOU SUBMIT ALL DEPENDENT ELIGIBILITY DOCUMENTS.** You may submit your dependent eligibility documents in person to the University Benefits office located in Heer Hall - Kent Campus in person or via fax (330-672-5447) or campus email (benefits@kent.edu). All documents MUST be legible and if foreign, translated to English.

Coverage Begin Date: Jul 08, 2013  
Enrollment Deadline: Aug 07, 2013

Group	Benefits Status	% Complete
Medical	No choices made in this group.	
Dental	No choices made in this group.	
Basic Life Insurance	No choices made in this group.	
Supplemental Life - Employee	No choices made in this group.	
Supplemental Life - Spouse	No choices made in this group.	
Supplemental Life - Child	No choices made in this group.	
Accidental Death/Dismemberment	No choices made in this group.	
Long-Term Disability Insurance	No choices made in this group.	
Flexible Spending Health	No choices made in this group.	
Flexible Spending Dependents	No choices made in this group.	
Dependents	0 Added	
Summary	Includes Cost	

**Start Enrollment**

Return to Benefits Enrollment Menu

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8. You will be directed to select your **medical** coverage first. Once you've started, the system will prompt you to continue through the entire process of your benefit elections.

Enrollment Group - Windows Internet Explorer

https://keys-test.kent.edu:45420/eMOCK/bwplkdsta.P\_EnrollmentFunctions

Personal Information Student and Financial Aid **Employee**

SITE MAP HELP EXIT

### Enrollment Group

Please begin your benefit elections by selecting one of the options below. Once you have completed your elections for each benefit group, click "Go To Next Benefit Group" button to continue your elections for the rest of the benefit groups. Select CANCEL, if available, should you want to reset the benefit elections to their original values. If the elected benefit permits, you will be able to add dependent coverage.

Your monthly premiums for your medical coverage **include** prescription and vision benefits provided by CVS Caremark and EyeMed respectively. **NOTE:** Should you elect to OPT-OUT, **you will be opting out of medical, prescription, vision and dental benefits**, which would give you the opportunity to receive the \$100 per month opt-out incentive. Should you elect to REFUSE medical, **you will not** receive vision and prescription coverage; however, you may still enroll in the dental benefits. If you REFUSE you are not eligible to receive the opt-out incentive. See our Benefits web page for more information.

**Medical**

- Anthem PPO 12 Month....**  
You have not selected this benefit deduction.
- Medical Mutual PPO 12 Month....**  
You have not selected this benefit deduction.
- Anthem Domestic Partner PPO 12 Month....**  
You have not selected this benefit deduction.
- Medical Mutual Domestic Partner PPO 12 month....**  
You have not selected this benefit deduction.
- Refused/ Opt-out Medical Coverage....**  
You have not selected this benefit deduction.

[Go To Next Benefit Group](#)

[Return to Benefits Enrollment Menu](#) New Hire Enrollment

9. You may add your eligible dependents after making your medical selection. All **starred areas (\*)** must be completed. You **must check the box** to apply your dependent to each appropriate benefit selection.

Covered Dependents - Windows Internet Explorer

https://keys-test.kent.edu:45420/eMOCK/bwplkdsta.P\_NamesAndBenefits?returned\_locations

Personal Information Student and Financial Aid **Employee**

SITE MAP HELP EXIT

### Covered Dependents

If you are adding a spouse/domestic partner or eligible dependent(s), dependent eligibility documents must be submitted to University Benefits within the 30 days from the date of hire. **YOUR BENEFIT ELECTIONS WILL NOT BECOME EFFECTIVE UNTIL YOU SUBMIT ALL DEPENDENT ELIGIBILITY DOCUMENTS.** You may submit your dependent eligibility documents in person to the University Benefits office located in Heer Hall - Kent Campus in person or via fax (330-672-5447) or campus email (benefits@kent.edu). **All documents MUST be legible and if foreign, translated to English.** Under Ohio legislation, adult dependents (ages 26 to 28) who meet the State eligibility requirements may also be covered under the employee's medical plan only (medical vision and prescription drug). For a list of eligibility requirements see the Health Care Reform document.

**Please enter your first Covered Dependent**

First Name: \*

Middle Name or Initial:

Last Name: \*

SSN: (no dashes) \*

Relationship: \*

Birth Date: MM/DD/YYYY \*

Gender: \*

Spouse Employment: \*

Marital Status:

Disabled Indicator:

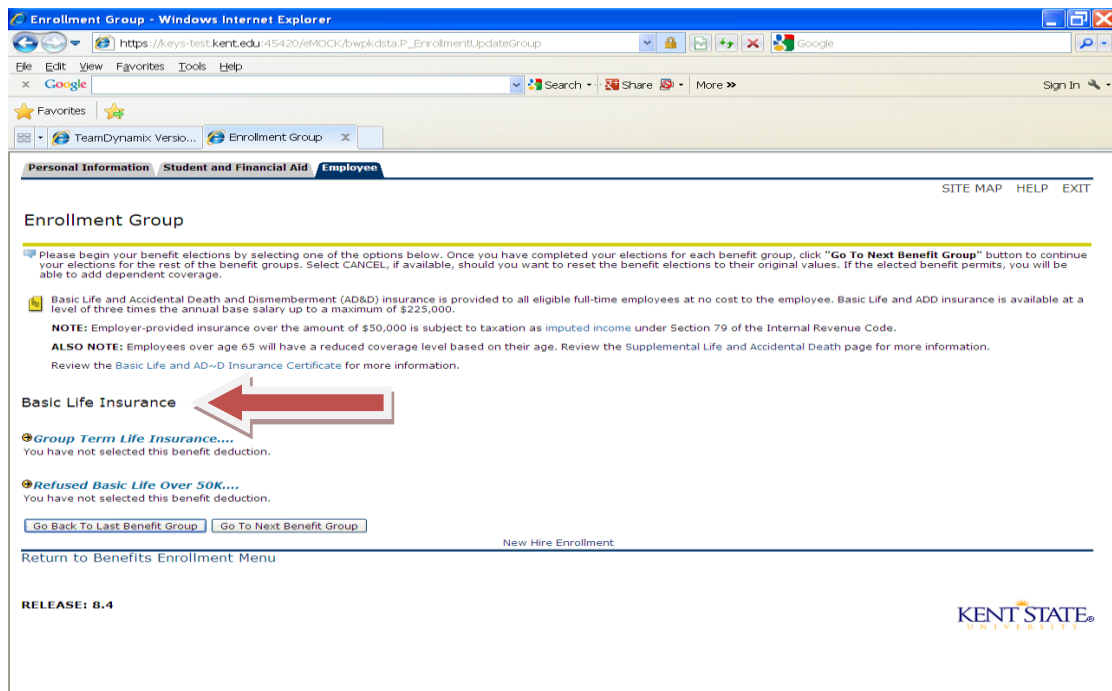
[Add Dependent](#)

[Return to New Hire Enrollment Menu](#)

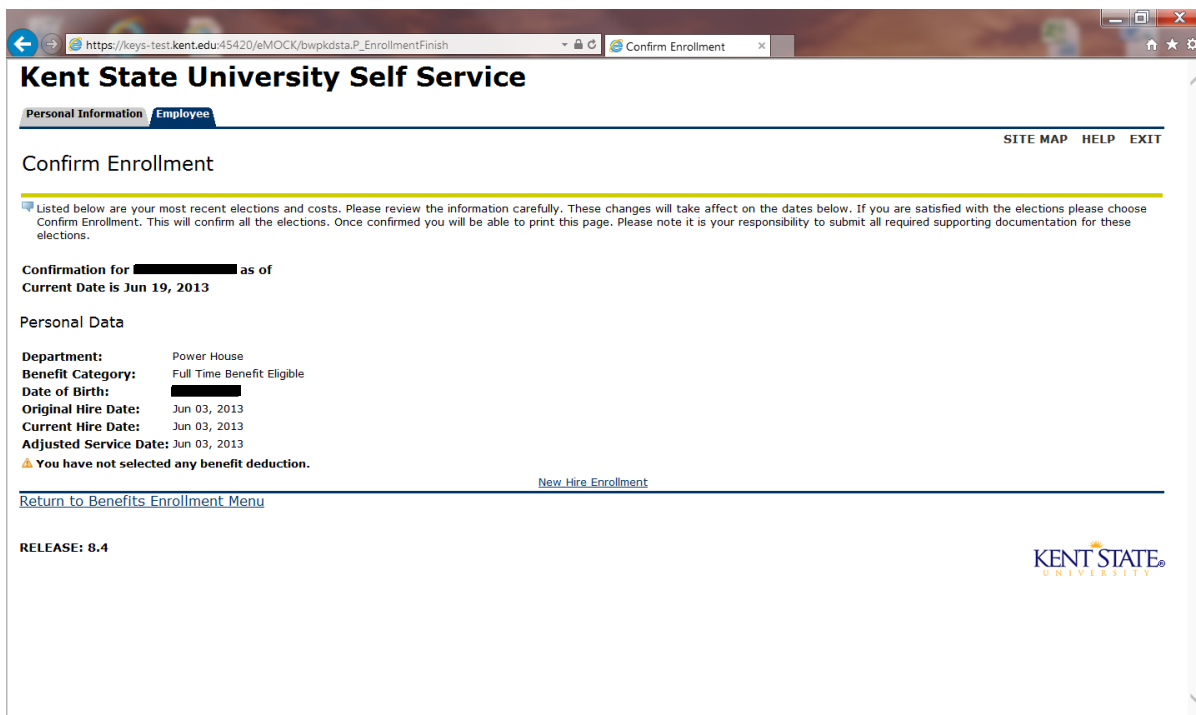
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10. **NOTE:** The University provides employee Basic/AD&D life insurance at no cost to you. The coverage is at three times your annual salary up to \$225,000.



11. Once you have completed your benefits enrollment, please review your selection and print your Benefit Summary page.
12. **Click on the CONFIRM ENROLLMENT tab to finalize your benefit election. NOTE: Once you have confirmed your enrollment, you will not be able access the system to make any changes.**



### 13. Your final page of submitting your benefit enrollment.

Personal Information

Employee

SITE MAPHELPEXIT

Final Confirmation

Congratulations! You have completed the New Hire Enrollment process.

Benefits Summary

[Return to Employee Menu](#)