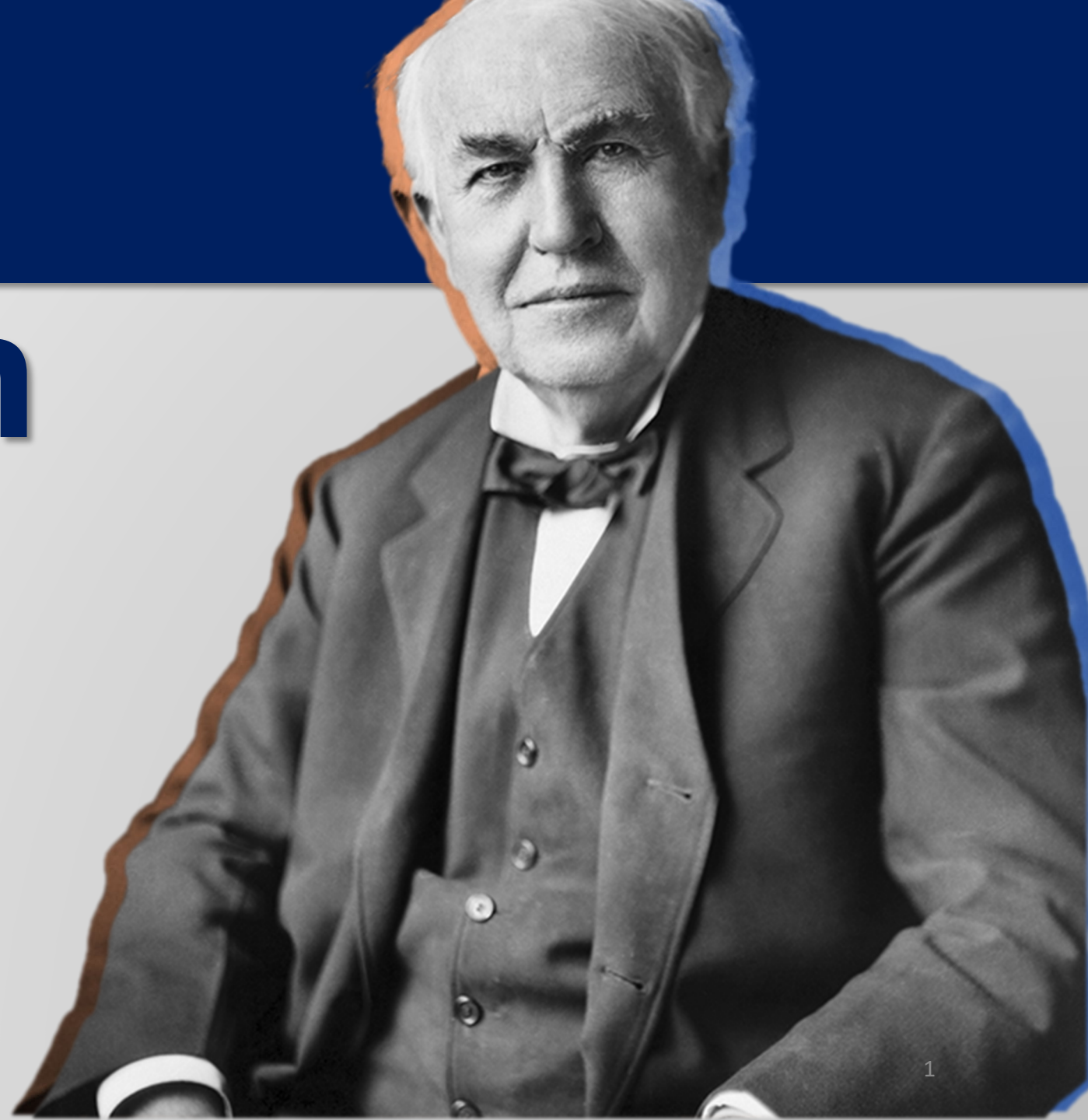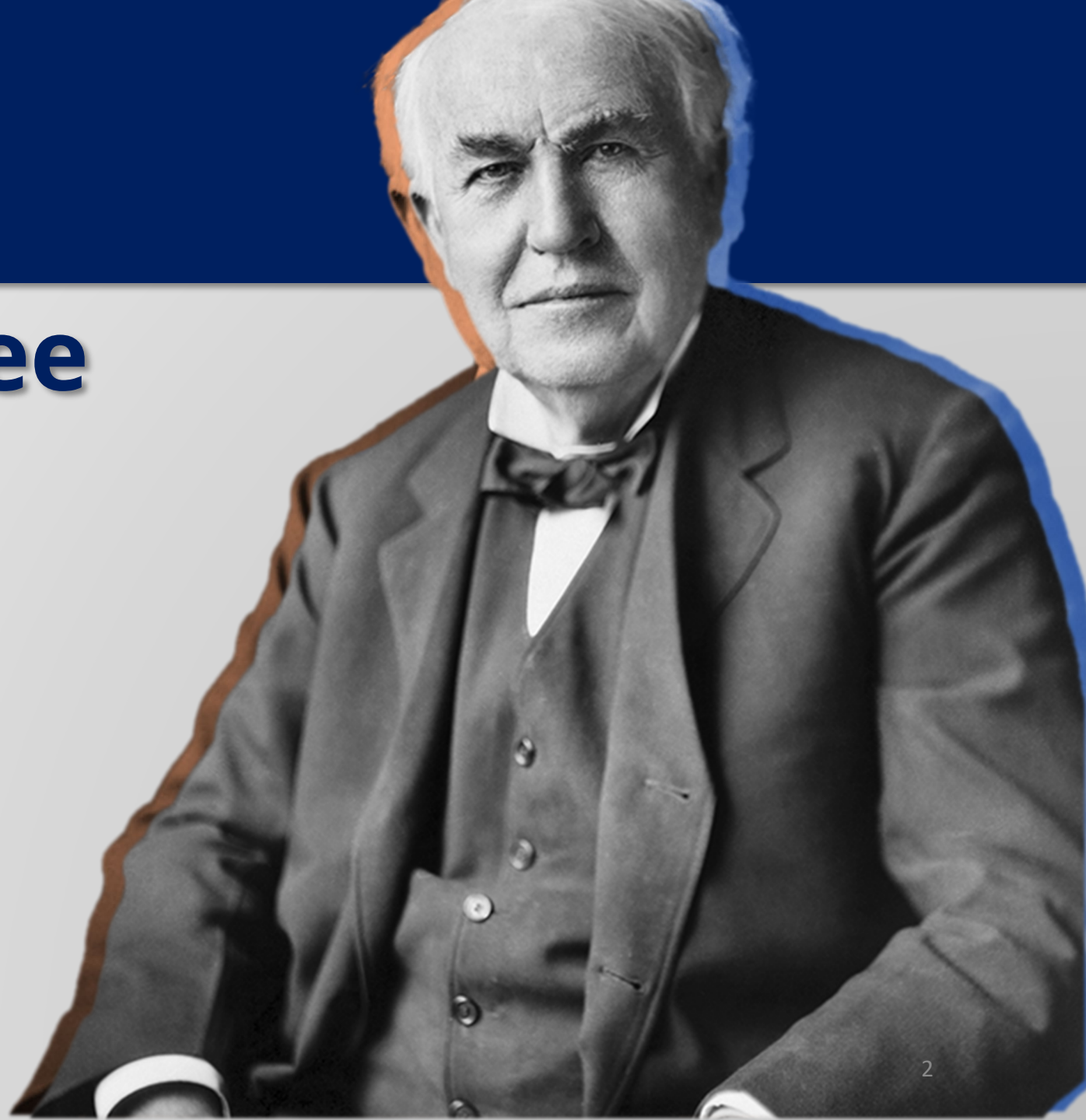# 'How to' in Edison

PARTNERS FOR HEALTH
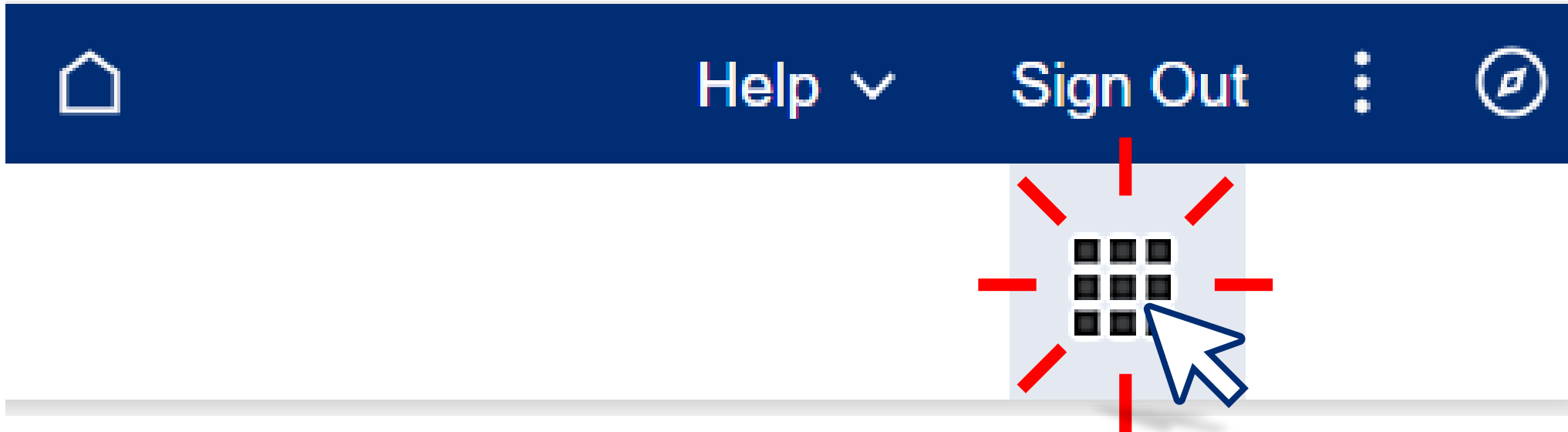
'How to'

add an employee using eForm

PAR TN ERS FOR HEALTH

From the Edison homepage click on the 'matrix' at the top, right-hand side of the page.

Select "Benefits WorkCenter" located under the WorkCenters header.

Select "Non-Payroll Hire eForm."

Select "Add a Hire Form."

Enter the employee's social security number and click "Search."

If your search receives a result

It means this person has already been hired into our system.
If that is the case, simply **click on their name to continue**.

If your search returned no results

Select "Add Person for Hire."

Social Security # 123555555

Clear   Search

Your search returned no results.

Would you like to: Add Person for Hire

PARTNERS FOR HEALTH

Enter the rest of the employee's biographical information and select "Start Hire."

Enter all fields with an asterisk then select "Save & Next."

You can now see the employee ID.

Local Gov Only: If your agency does not have a probationary period, use the actual hire date as the effective date. If your agency has a probationary period, use the day after the probationary period has ended as the effective date.

Name   Fake Name   Empl ID 00599047   eForm ID 2583735

Job Data

PAR**TN**ERS
FOR HEALTH

Enter the effective date – this will be the hire date.

Select the reason dropdown box.

Select the magnifying glass next to the Position Number box.

Select the position number that has been assigned to your agency for active employees.

NOTE: the business unit department and location code will automatically populate.

Enter the "Comp Rate." This is the employee's annual salary.

Enter your agency's "Empl Class" (employee class).

Higher Education agencies only have one option for employee class – **select that option. All Higher Education agencies:** Select "**Yes**" for vision.

Local Education agencies choose **TEA/TEO** if your agency offers the state dental plan, or **TEN/TON** if your agency does **not** offer the state dental plan.

Local Government agencies choose either **GA1** if your agency offers the state dental plan, or **ND1** if your agency does **not** offer the state dental plan.

Select **yes** or **no** for your vision option.

*Position Number 99002207

Business Unit: LGGA3 Loc

Department: 9262500000 Wo

Location Code: NP063 Mo

*Empl Class

*Vision Offered ● Yes ○ No

After completing those steps, select "Submit."

Select "Yes" to confirm your submission.
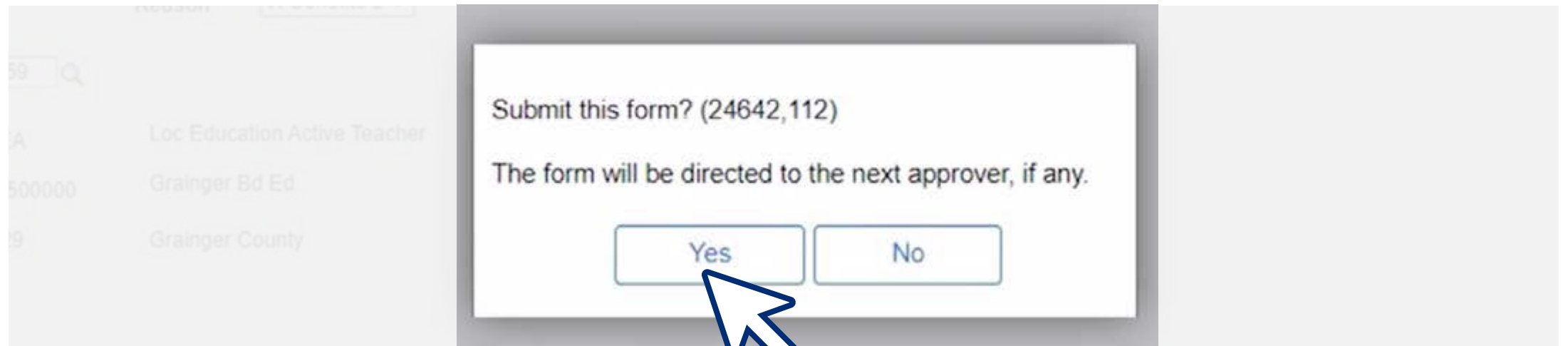
This screen will then appear showing you've completed the eForm process.

Create a Hire eForm

Step 3 of 3: Form Finalized

Congratulations, you've done it!

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