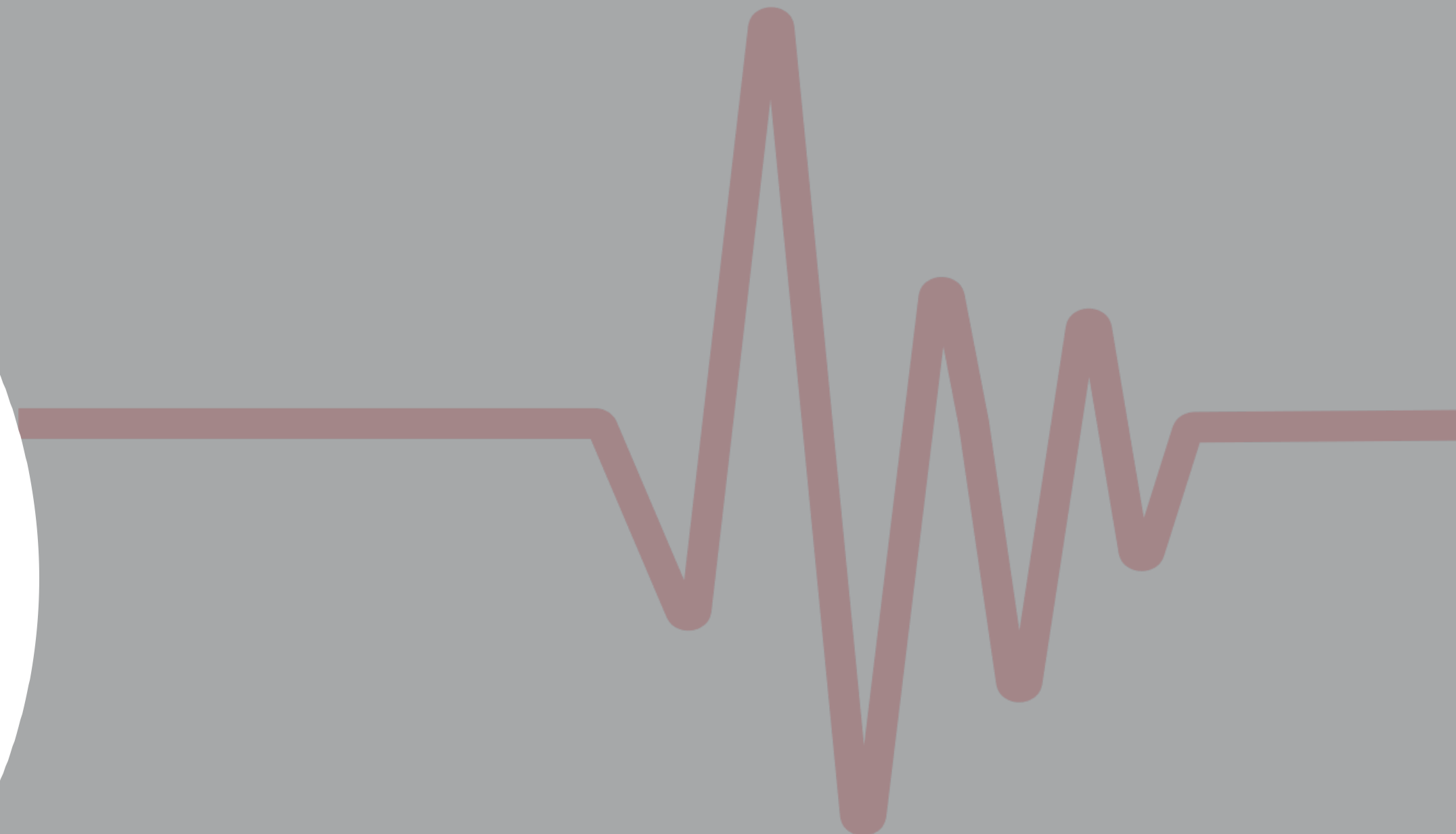
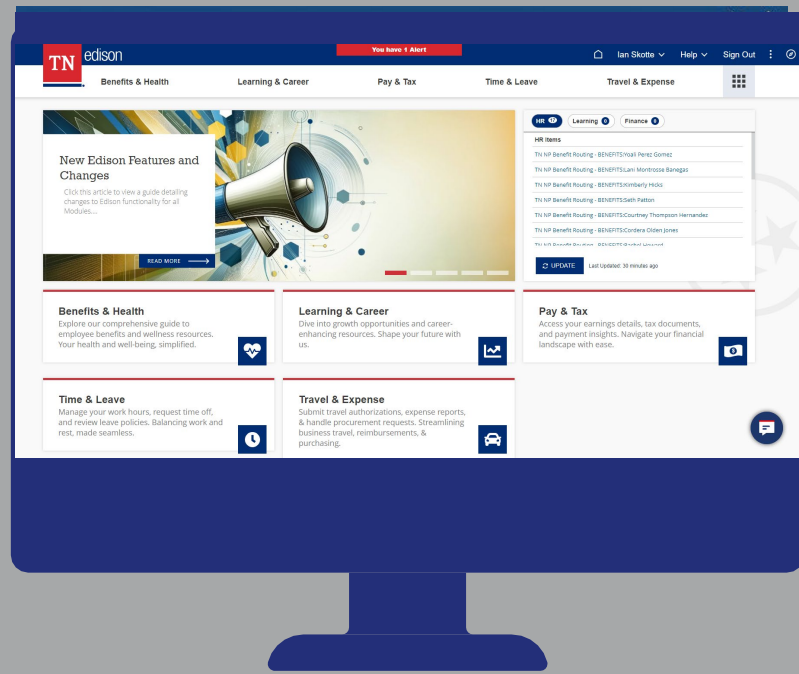


# SQE Benefits eForm Training



# Create an SQE eForm

## From the Edison Homepage

The screenshot shows the TN Edison homepage. At the top, there is a navigation bar with the TN Edison logo, a red alert banner saying "You have 1 Alert", and user information including a home icon, the name "Ian Skotte", a dropdown arrow, "Help", another dropdown arrow, "Sign Out", and a profile icon. Below the navigation bar are five main menu items: "Benefits & Health", "Learning & Career", "Pay & Tax", "Time & Leave", and "Travel & Expense".

The main content area features a large banner with a megaphone graphic and the text "New Edison Features and Changes". Below this is a "READ MORE" button with a right-pointing arrow. To the right of the banner is a "matrix" icon (a 3x3 grid) with a hand cursor pointing to it. A callout box with a white background and blue border contains the text: "Click the 'matrix' at the top, right-hand side of the page".

Below the banner, there are three columns of content. The first column is titled "Benefits & Health" and contains the text "Explore our comprehensive guide to employee benefits and wellness resources. Your health and well-being simplified". The second column is titled "Learning & Career" and contains the text "Dive into growth opportunities and career-enhancing resources. Shape your future with us". The third column is titled "Pay & Tax" and contains the text "Access your earnings details, tax documents, and payment insights. Navigate your financial landscape with ease".

On the right side of the page, there is a sidebar with a "HR 17" and "Learning 0" indicator. Below this is a section titled "HR Items" with a list of items: "TN NP Benefit Routing - BENEFITS:", "TN NP Benefit Routing - BENEFITS:", "TN NP Benefit Routing - BENEFITS:", "TN NP Benefit Routing - BENEFITS:Seth Patton", "TN NP Benefit Routing - BENEFITS:Courtney Thompson Hernandez", "TN NP Benefit Routing - BENEFITS:Cordera Olden Jones", and "TN NP Benefit Routing - BENEFITS:Rachel Howard". At the bottom of this section is an "UPDATE" button and the text "Last Updated: 30 minutes ago".

# Create an SQE eForm

The screenshot shows the TN Edison user interface. At the top, there is a dark blue header with the TN Edison logo on the left, a red alert bar in the center stating "You have 1 Alert", and user navigation options on the right including a home icon, the name "Ian Skotte" with a dropdown arrow, "Help" with a dropdown arrow, "Sign Out", and a profile icon.

Below the header is a white navigation bar with five main tabs: "Benefits & Health", "Learning & Career", "Pay & Tax", "Time & Leave", and "Travel & Expense". A grid icon is visible on the right side of this bar.

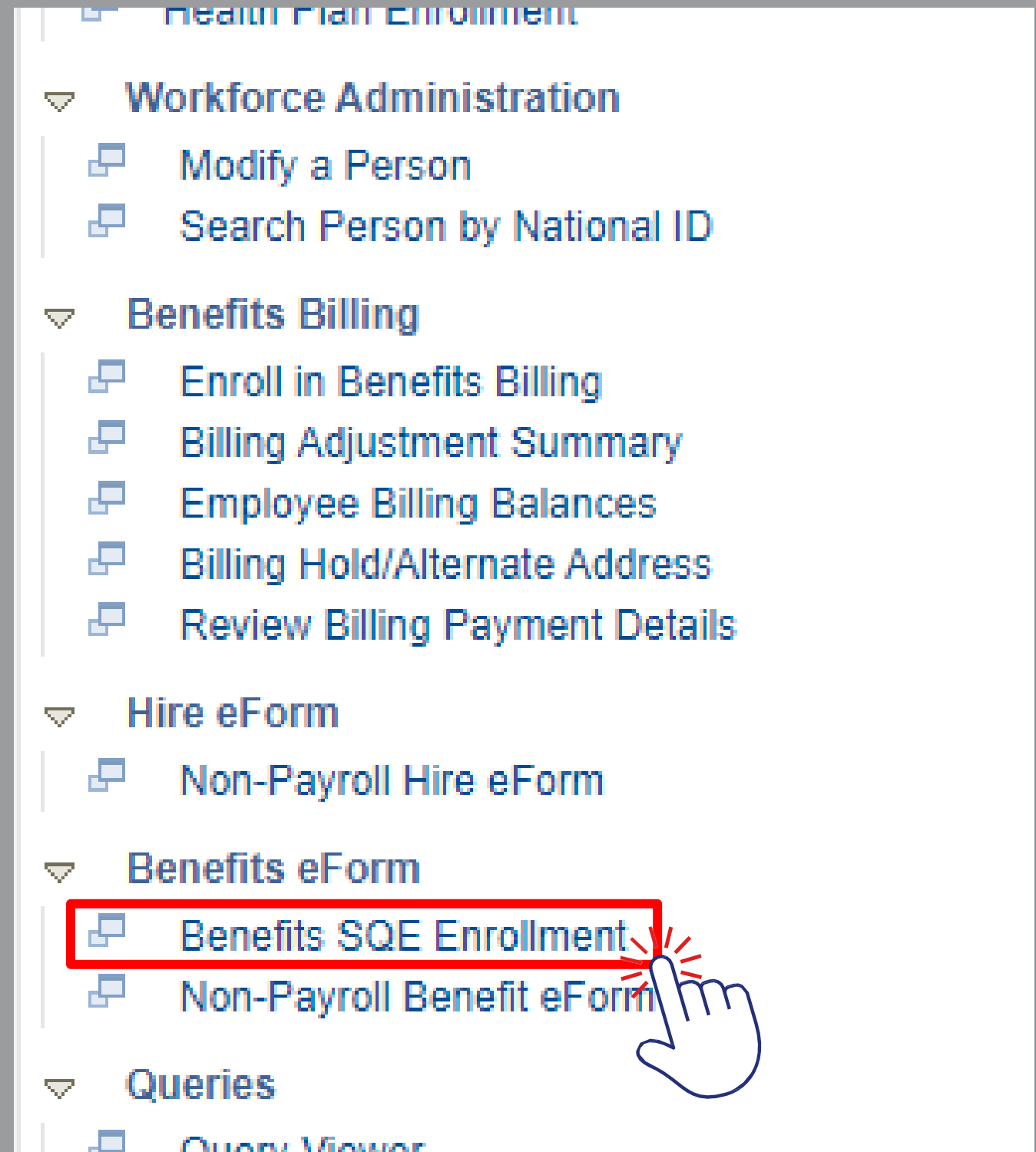
The "Learning & Career" tab is selected and highlighted in light gray. It contains several sections of links:

- WorkCenters:** A list of links including "Benefits WorkCenter" (highlighted with a red box and a hand cursor), "Expenses WorkCenter", "HR WorkCenter", and "Learning Home WorkCenter".
- General Information:** A list of links including "ADA Information", "Benefits News", "ELM News", "Edison Metrics and Standards", "Finance News", "HR News", "Payroll Calendars", "Payroll News", "Procurement News", "Security Information", and "Time & Labor News".
- Other Applications:** A single link "Report Manager".
- User Guides & Support:** A list of links including "Benefits Support Info", "ELM Support Info", "Finance Support Info", "HR Support Info", "Payroll Support Info", "Procurement Support Info", "Time & Labor Support Info", "User Guides: 3rd Party", "User Guides: FSCM", "User Guides: HCM", and "User Guides: Self Service".

On the left side of the "Learning & Career" tab, there is a "Quick Links" section with the text: "The links provided here are a curated list of popular links, and various external links. Power users can access workcenters and other systems." Below this text is a white callout box with the text "Click **Benefits Workcenter**".

# Create an SQE eForm

Click **Benefits SQE Enrollment**



# Create an SQE eForm

Benefits WorkCenter

## Special Qualifying Event

Search by:

Empl ID Begins With

Empl Record is Equal To

Name Begins With

Social Security # Begins With

Job Title Begins With

Department

Department Description Begins With

Search Clear Save Search

1 Select *Special Qualifying Event eform*

2 Enter in the employee's *Edison ID, Name or SSN*

3 Click **Search**

### To update an SQE eForm

- Select *Update a SQE eForm*.
  - Here you can make changes to a form that has been recycled and add additional documentation if requested

### To view an SQE eForm

- Select *View a SQE eForm* option.

# Verify/Update Employee Information

You can verify the employee and update biographical information such as **name, address or email.**

**Personal Information**

*First Name	<input type="text" value="Jane"/>	Middle Name	<input type="text" value="J"/>
*Last Name	<input type="text" value="Doe"/>	*Date of Birth	<input type="text" value="01-02-1959"/>
*Gender	<input type="text" value="Female"/> ▼	*Marital Status	<input type="text" value="Single"/> ▼
*Social Security #	<input type="text" value="123-44-5678"/>		

**Home Address and Phone**

*Address Line 1	<input type="text" value="123 Shady Ln."/>	Address Line 2	<input type="text"/>
*City	<input type="text" value="Knoxville"/>	*State	<input type="text" value="TN"/>
*Postal Code	<input type="text" value="37933-0000"/>	*County	<input type="text" value="Knox"/>
*Email Address	<input type="text" value="Jane.doe@knoxcountyschools.com"/>	*Telephone	<input type="text" value="865-123-4567"/>

**Comments**



To move forward, select **Next**

# Select SQE Type

Create Special Qualifying Event : Qualifying Event Form ID 461374 (NEW)

**Employee Information**

Name: Jane Doe  
Company: NP  
Empl ID: 00123456  
Benefit Program: HED

**Special Qualifying Event**

**30 Day Eligibility**

- Birth, Adoption, or Placement for Adoption (BIR)
- Marriage (MAR)
- Enrollment due to custody, placement, or conservatorship (SND)

**60 Day Eligibility**

- Enrollment due to a total loss of insurance contributions (SDC)
- Enrollment due to death of a spouse (SDS)
- Enrollment due to divorce (SDV)
- Enrollment due to loss of eligibility for other coverage (SLE)
- Enrollment due to legal separation (SLS)
- Enrollment due to reduction in hours resulting in loss of eligibility for group coverage (Part-time/Seasonal) (SLR)
- Enrollment due to loss of employment (STR)

\*Special Qualifying Event

Effective Date Info

\*Effective Date 10/26/2023

★ The employee information carried over from the previous page, along with the Form ID.

★ The Benefit Program is provided which should match the entity of the employee.

★ Provided is a list of qualifying events along with the number of days for each event that a member has to enroll.

1 Select the appropriate event from the 'Special Qualifying Event' drop down box

2 Add the date of the event in the 'Effective Date Info box'

- Birth/Acquire event > enter the actual date of birth
- Divorce > enter the actual date of divorce
- Loss of Coverage > enter the date coverage was lost due to SQE

# Uploading Documents

• Enrollment due to loss of employment (STR)

\*Special Qualifying Event Birth, Adoption or Place

Effective Date Info Enter the date of birth, adoption, or placement for the event

\*Effective Date 10/26/2023

\*SQE Form Date 11/20/2023

Coverage Begin Date 10/26/2023

The form will calculate using the actual event date and the form creation date to populate the coverage begin date.

**File Attachments** 1 row

Attachment Required	Upload	Description	File Name	Delete
1		Birth Certificate / Adoption Court Paperwork		Delete

Add

Comments

Search Previous Next



# Uploading Documents

Once required documents are uploaded, you can see all the files listed on this page.

- Enrollment due to loss of eligibility for other coverage (**SLE**)
- Enrollment due to legal separation (**SLS**)
- Enrollment due to reduction in hours resulting in loss of eligibility for group coverage (Part-time/Seasonal) (**SLR**)
- Enrollment due to loss of employment (**STR**)

## File Attachment

Done

Choose From



My Device

Jane Doe ; Ins. enroll form 11 19 2023 (1).pdf  
File Size: 1249KB

Upload Complete



Click **Done**

# Dependent Information

• Enrollment due to loss of employment (STR)

\*Special Qualifying Event Birth, Adoption or Place ▾


Effective Date Info  
Enter the date of birth, the date the adoption was finalized, or the date of the placement order for adoption. Coverage will begin on the date of birth, adoption, or placement for adoption.

\*Effective Date 10/26/2023  \*SQE Form Date 11/20/2023 

Coverage Begin Date 10/26/2023

**File Attachments**

1 row

Attachment Required	Upload	Description	File Name	Delete
1 	<input type="button" value="Upload"/>	Birth Certificate / Adoption Court Paperwork		<input type="button" value="Delete"/>

Comments

Click **Next**

Once you've completed uploading dependent documents and are satisfied with dependent information you may then move forward.

# Dependent Information

Benefits WorkCenter | Special Qualifying Event | Home | Notifications | Settings | Refresh

Special Qualifying Event : Add/Update Dependent Information | Form ID 461374 (NEW)

Member Name: Jane Doe | Member ID: NP

If the member has existing dependents, the dependent biographical information will be shown.

Middle Name	Last Name	Social Security #	Date of Birth	Gender	Relationship	Change Address / Phone
	Doe	111-23-4567	01/03/1959	Male	Spouse	Change Address / Phone +
	Doe	222-23-7654	02/03/2004	Male	Natural Child	Change Address / Phone +

2 rows

ext

All fields are required

Add a new dependent by selecting the plus button to the right.

# Dependent Information

Benefits WorkCenter Special Qualifying Event

Special Qualifying Event: Add/Update Dependent Information Form ID 461014 (REV)

nation

Name Jane Doe Empl ID 00123456  
Company NP

Warning  
Please make sure the information you provided is correct. Once you proceed you will not be able to update the Special Qualifying Event or Effective Date information without withdrawing the form and starting a new form. Do you wish to proceed?

Yes No

Scotty	Stults	40-83-4336	09/10/1997	Male	Spouse	Change Address / P
Jude			04/02/20		Child	Change Address / P
			10/26/2023	Male	Natural Child	Change Address / P

Previous Next

★ You will be asked to verify the information for accuracy.

Select **Yes**, if you wish to proceed.

Select **No**, if you wish to make additional corrections.

★ Once you select yes, the SQE event is created on the employee's profile.

# Eligible Benefits

## Employee Information

Name Jane Doe

Empl ID 00123456

Company NP


Benefit Program HED

## Benefit Election Instructions

You are eligible to change the following benefits. To begin making elections you can click the Next button at the the bottom of the page.

If you do not wish to complete your elections you must click the Save button at the bottom of the page.

## Benefits Eligibility

	Benefit 	
1	Medical Benefit	
2	Dental Benefit	
3	Vision Benefit	
4	Basic Term Life / ADD Insurance	

5 rows

Listed are all the eligible benefits that can be added due to a loss or acquisition of a new dependent. This will vary depending on your agency. You will only see the actual benefits for which your agency subscribes. There is no action needed for this step.

# Current Benefits

Benefits WorkCenter | Special Qualifying Event | Home | Notifications | Settings

**Create Special Qualifying Event : Medical Benefit** | Form ID 461374 (NEW)

---

**Employee Information**

Name: Jane Doe | Empl ID: 00123456  
Company: NP | Benefit Program: HED

---

**Current Medical Benefit Election**

Current Election: 206 Premier BCBS P :: Family

---

**Current Medical Dependent Elections**

2 rows

	Enrolled In Medical	Name
1	Y	Janet Doe
2	Y	John Doe

---

**Medical Benefit Enrollment**

★ This screen shows the current coverage of the member and all currently enrolled dependents

# Medical Benefits Election

## Medical Benefit Enrollment

Waive Coverage  No

\*Coverage Requested Premier BCBS P :: Fam ▾

## Dependent(s) Enrollment

3 rows

	Enroll Medical ▾	Name ▾	Relationship ▾
1	<input checked="" type="checkbox"/> Yes	John Doe	Spouse
2	<input checked="" type="checkbox"/> Yes	Janet Doe	Natural Child
3	<input type="checkbox"/> No	Joey Doe	Natural Child

## ▶ Comments

Search

Previous

Next

Save



- To select a new plan, use the drop down and all medical options for the corresponding tier will be shown.
- To enroll the new dependent in medical benefits, slide the dial from No to Yes next to each dependent that you intend to enroll.

# Voluntary Benefits Election



If your agency subscribes to dental/vision benefits offered by the state, the next screen will be dental options followed by vision, if applicable. You will only see the actual benefits for which your agency subscribes.

- To select a new plan, use the drop down and dental options for the corresponding tier will be shown.
- To enroll the new dependent in dental benefits, **slide the dial** from **No** to **Yes** next to each dependent that you intend to enroll.

**Dental Benefit Enrollment**

Waive Coverage  No

\*Coverage Requested

**Dependent(s) Enrollment**

3 rows

	Enroll Dental	Name	Relationship
1	<input checked="" type="checkbox"/> Yes	John Doe	Spouse
2	<input checked="" type="checkbox"/> Yes	Janet Doe	Natural Child
3	<input type="checkbox"/> No	Joey Doe	Natural Child

▶ Comments



# Evaluation Screen

Benefits WorkCenter | Special Qualifying Event

Name Jane Doe | Empl ID 00123456  
Company NP | Benefit Program HED

**Benefit Processor**

Assigned To

Event Classification Birth, Adoption or Placement for Adoption | Coverage Begin Date 10/26/2023  
Benefit Program HED | Benefit Record Number 0  
Empl Record 0 | Self Service Form No  
Retiree No

**Employee Profile Page Notes**

Comment

Comments

Search Previous Save Submit

This is the evaluation screen for the benefits coordinator and the benefit approver. In the middle of the page, it shows the actual qualifying event. The coverage begin date and the entity. The approver will be able to approve, recycle the form and add notes.

Click **Save**

Click **Submit**

If you wish to save the form and come back to it later.

# Approved Form

Special Qualifying Event : Confirmation Form ID 461374 (Executed)

[View Approval Route](#)

**Transaction / Signature Log** 3 rows

	Current Date Time	Step Title	User ID	Description	Form Action	Time Elapsed
1	11/20/2023 10:22:11AM	Saved	PAULS0513002	Paula Vetter	Save	
2	11/20/2023 10:24:15AM	Initiated	PAULS0513002	Paula Vetter	Authorize	2 minutes
3	11/20/2023 10:24:24AM	System	System		Execute	< 1 minute

[Refresh Log](#)

[Search](#) [Previous](#)

- Once approved, you will be notified by Edison.
- You can go back to the Benefit Workcenter and navigate to the Employee profile to check the record for the approved eForm.

# Service Center Comments

Benefits WorkCenter Special Qualifying Event

**Personal Information**

First Name	Jane	Middle Name	J
Last Name	Doe	Date of Birth	01-02-1959
Gender	Female	Marital Status	Widowed
Social Security #	123-44-5678		

**Home Address and Phone**

Address Line 1	123 Shady Ln.	Address Line 2	
City	Knoxville	State	TN
Postal Code	37933	County	Knox
Email Address	Jane.doe@knoxcountyschools.com	Telephone	865-123-3456

**Comments**

\*\* Amanda Hart  
\*\* Wed, Nov 29 23, 03:15:45 PM  
SQE eForm ID: 462356- Approved.

\*\* Kristin Blanton  
\*\* Wed, Nov 29 23, 01:48:17 PM  
Resubmitted with revised letter and birth certificates.

\*\* Amanda Hart  
\*\* Wed, Nov 29 23, 12:51:01 PM  
462356 Recycled back to ABC for adding documents.

\*\* Kristin Blanton  
\*\* Wed, Nov 29 23, 08:35:09 AM  
I'm not sure what I need to correct. I saw where it says to enter date of death but it won't let me edit that field. Please help!

Search Next

★

If the SQE benefit eForm is recycled back to you, meaning it is not approved, you must either submit additional information or the employee is not eligible to add coverage at that time.

In order to view the comments from the service center regarding the form, you must view the form and go to the last page of the form to view the comments.