

Welcome to your new On-line Enrollment System!

New Hire Directions:

The District is excited to debut our new Online System through the Employee Access Center. Through this system, you will be able to enroll for Medical, Dental, Vision, Life and Flex all in a few easy steps.

Step One: Once you receive your user ID and password from HR or IT then click on the **KPS Employee Center** under **Quick Links** on the right-hand side of the page.

Quick Links

- Superintendent's Message
- 2019-2020 Calendar
- Online Enrollment
- District Directory
- Employment
- Substitute Opportunities
- KPS Employee Center**
- Food Service Parent Portal
- District Events
- District Forms
- Staff Intranet
- School Board Meeting Agenda/Packets
- Power School

Then select Employee Access Center in the box:

KPS Employee Center

Click on the links below to access the different KPS Employee Portals

Employee Access Center	eFinance Plus	KPS Employee Portal
Absence Entry Benefits Enrollment Employee Data Earning Statements and W2's Substitute Opportunities Time Sheet Entry Login is employee ID# (copier #) and PW is last 4 of SS #) * Please do not change login credentials for Access Center	Requisitions (see video below) Reports (Power Users can also get to Time Sheet Entry and the Employee Access Center through eFinance) <ul style="list-style-type: none">Coding 101 PDFCreating a Requisition in eFinance Video link	(Data previous to July 1, 2019) Earning Statements W2's (District Network login credentials)

That will take you to the **Login Page** for the **Employee Access Center**. Your user ID is your Employee ID# and your password is the last 4 digits of your Social Security number.

Step 2: Click on the New Hire Benefits Enrollment Button

You are now in the Employee Access Center! To start the New Hire Enrollment process, click on the **New Hire Benefits Enrollment Button**. Everyone working 20 hours or more per week are required to Enroll or Waive Coverage. If you work 20 hours or more, you cannot skip this step.

Step 3: Enter/Review your Dependent information. *If you don't have Dependents, then select the **Continue** button at the bottom of this screen.*

If you would like to add a dependent, please click on the **Add a New Dependent** button. Once you have completed step 3. Click on **Continue to Annual Benefits Enrollment** button to move to the next screen.

	First Name	Last Name	Social Security Number
Edit	SAMMIE	MCTESTERSON	XXX-XX-6789
Edit	TANDA	MCTESTERSON	XXX-XX-4321

Step 4: Enroll for Medical Benefits:

IMPORTANT: Please make sure to ALWAYS choose the 12-month rate.

WAIVING COVERAGE: If you are waiving coverage just click **WAIVING.....** On each page for the different coverage and hit **Next** for each Benefit and skip to **step 8:**

The screenshot shows the 'Enrollment Election' form. At the top, there is a header 'Enrollment Election' and a dropdown menu 'Select a Category:' set to 'All'. Below this is a list of radio button options for vision coverage. The 'Options:' section includes:

- DO NOT USE THIS BUTTON-Please select another option here
- VISION 10 MONTH RATE ----- VISION 10 MO F F
- VISION 10 MONTH RATE ----- VISION 10 MO E/D F
- VISION 10 MONTH RATE ----- VISION 10 MO E F
- VISION 10 MONTH RATE ----- VISION 10 MO E/S F
- VISION 12 MONTH RATE ----- VISION 12 MO F F
- VISION 12 MONTH RATE ----- VISION 12 MO E F
- VISION 12 MONTH RATE ----- VISION 12 MO E/D F
- VISION 12 MONTH RATE ----- VISION 12 MO E/S F
- WAIVING ----- VISION WAIVED F

Below the options is a summary table:

Employee Cost	\$0.00
Deductions Per Year:	10
Employer Cost	\$0.00

A 'Next' button is located at the bottom center. A red arrow points to the 'WAIVING' option.

1. The first thing you will need to do, is click on the drop down under Enrollment Election and pick who you are electing coverage for. After you select an option from the drop down, the options change to the selections you are eligible for. **MAKE SURE YOU SELECT NEW HIRE IN THE DROP-DOWN BOX. ALL NEW HIRES ARE ON A 12 MONTH RATE.**

The screenshot shows two forms. The top form is 'Current Information' with the following data:

Name:	
Employee Cost:	\$0.00
Deductions Per Year:	0
Employer Cost	\$0.00

The bottom form is 'Enrollment Election' with a dropdown menu 'Select a Category:' set to 'All'. Below this is a list of radio button options for dental coverage. The 'Options:' section includes:

- DO NOT SELECT-Please select another option here
- OPTION 1 10 MONTH RATE ----- OPT 1 10 MO E/D F
- OPTION 1 10 MONTH RATE ----- OPT 1 10 MO F F
- OPTION 1 10 MONTH RATE ----- OPT 1 10 MO E F
- OPTION 1 10 MONTH RATE ----- OPT 1 10 MO E/S F
- OPTION 1 12 MONTH RATE ----- OPT 1 12 MO E/S F
- OPTION 1 12 MONTH RATE ----- OPT 1 12 MO E/D F
- OPTION 1 12 MONTH RATE ----- OPT 1 12 MO F F

A red arrow points to the 'All' dropdown menu.

2. Next, click on Option 1 **12-month rate**, then click next and it will automatically take you to the enrollment screen for Dental. Make sure to select the dependents who will be covered before you click next.

Enrollment Election	
Select a Category:	NEW HIRE EMPLOYEE/SPOUSE/CHILD ▾
Options:	<input type="radio"/> OPTION 1 12 MONTH RATE ----- OPT 1 12 MO F F <input checked="" type="radio"/> OPTION 2 12 MONTH RATE ----- OPT 2 12 MO F F
Choice Instructions:	Option 1 is the REVISED MEDICAL or PPO PLAN. Option 2 is the HIGH DEDUCTIBLE PLAN.
Employee Cost	\$485.48
Deductions Per Year:	10
Employer Cost	\$616.05
Include Dependents	
Select the dependents which are covered under this enrollment option.	
<input checked="" type="checkbox"/> SAMMIE MCTESTERSON	
<input checked="" type="checkbox"/> TANDA MCTESTERSON	
Update Dependents	
<input type="button" value="Next"/>	

Step 5: Enroll for Dental Benefits:

You will follow the same process as outlined in Step 4 Above

Step 6: Enroll for Vision Benefits:

You will follow the same process as outlined in Step 4 Above

Step 7: Enroll for Flex Benefits:

IMPORTANT: Anyone that is electing Flex or Dependent Care Flex will also have to select the flex fee. Keep in mind there are three different screens for electing Flex; FLEX, DEPENDENT CARE FLEX, and FLEX FEE.

Current Information	
Name:	
Employee Cost:	\$0.00
Deductions Per Year:	0
Employer Cost	\$0.00
Enrollment Election	
Select a Category:	All ▾
Options:	<input checked="" type="radio"/> DO NOT SELECT-Please select another option here <input type="radio"/> FLEX 10 MONTH RATE ----- FLEX F <input type="radio"/> FLEX LIMITED 10 MONTH RATE ----- FLEX - LIMITED F <input type="radio"/> WAIVING ----- FLEX WAIVED F
Employee Cost [Annual]	0.00
Deductions Per Year:	
Employer Cost	
<input type="button" value="Next"/>	

Step 8: Confirm All Selections:

Once you have elected all your options, you can select any of the **Benefit Types** to make changes to your selection. **DO NOT SELECT the Confirm button** until you know this is what you want. You cannot make changes after you have submitted.

Annual Benefits Enrollment Summary

[Update Dependents](#)

New Year Selections						
Benefit Type	Choice	Times Taken	Deduction Amount	Annual Deduction	Benefit Amount	Annual Benefit
MEDICAL OCT-JUNE X2	OPTION 1 10 MONTH RATE	10	\$592.72	\$5,927.20	\$739.26	\$7,392.60
VISION OCT-JUNE X2	WAIVING	10	\$0.00	\$0.00	\$0.00	\$0.00
FLEX OCT-JUNE X2	WAIVING	10	\$0.00	\$0.00	\$0.00	\$0.00
FLEX DEP CARE SEPT-JUNE X2	WAIVING	10	\$0.00	\$0.00	\$0.00	\$0.00
DENTAL SEPT-JUNE X2	DENTAL 10 MONTH RATE	10	\$96.00	\$960.00	\$37.80	\$378.00
FLEX FEE OCT-JUNE X2	WAIVING	10	\$0.00	\$0.00	\$0.00	\$0.00
TOTALS				\$6,887.20		\$7,770.60

By clicking the button to submit, you are declaring that you selected all options as shown, and these will be your benefits and deductions moving forward. YOU CANNOT MAKE ANY CHANGES AFTER YOU HAVE SUBMITTED.



Once you have confirmed your selections It will say **Your Final Selections Were Submitted on MM/DD/YYYY at 0:00 AM/PM.**