

HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND EMPLOYER PORTAL TRAINING



ADD PARTICIPANT

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2 - Add a participant

Add participant is used to add a new employee into the system. This is not to be used to add new dependents.

2.1. Add a Participant

The **Add** functionality in Ariel EAS - Employer Portal is displayed in the **Add Participant** menu from the left menu or from the home page shortcut.

Add Participant will add a new employee into the system and generate the HB number for this new employee. The new employee will then be mailed an Invite to Enroll letter (generated from the system) that will prompt them to enroll in plans via the member portal.

Please note, you cannot use the Add Participant feature if the individual was previously employed within the same employer. You will receive error message "**SSN: member already belongs to the organization that you are trying to add to**". If you receive this error message, you must submit an EC-1 enrollment form to the EUTF.

ADD PARTICIPANT

- 1 - Click **Add Participant** on the left menu.
- 2 - The **Add Participant - Member Identifier** screen displays.

Note: You must fill in all required fields indicated with a red asterisk *.

Use only CAPITAL LETTERS when entering information in each field.

- 3 - The calendar is already displayed. Enter the New Hire/Newly Eligible effective date in the **Transaction Date** field.

The screenshot displays the 'Add Participant' interface. On the left is a blue navigation menu with options: Home, Participant Search, My Organization, Billing, Data Collection, and Add Participant. The main area is titled 'Add Participant' and contains two steps: '1 Member Identifier' (highlighted with a red circle) and '2 Member Data'. Under step 1, there is an 'Employee Identifier' section with three fields: 'Transaction Date*' (with a calendar dropdown), 'Organization Id*', and 'SSN*'. The calendar is open, showing June 2022, with the 20th selected. There are 'Cancel' and 'Next' buttons at the bottom, and a 'Done' button on the calendar.

4 - Click the drop-down arrow in the **Organization Id** field and select the employee's employer.

The screenshot shows the 'Add Participant' form in the EUTF system. The form is divided into two steps: '1 Member Identifier' and '2 Member Data'. The 'Member Identifier' step is active. It contains the following fields:

- Transaction Date***: 01/04/2022
- Member Organization***: A dropdown menu with 'City and County of Honolulu' selected. A blue arrow points to the dropdown arrow.
- SSN***: An empty text input field.

At the bottom of the form, there are two buttons: a grey '< Cancel' button and a red 'Next >' button.

5 - Type the member Social Security Number in the **SSN** field. **Do not include a dash (-) between numbers when entering the SSN, or you will receive an error message.**

This screenshot shows the same 'Add Participant' form as the previous one, but now the 'SSN*' field is populated with the number '145678545'. A blue arrow points to the SSN field. The 'Next >' button is now highlighted in red, indicating it is ready to be clicked.

Important Note: Entering incorrect SSNs in Ariel will result in the creation of a duplicate record that cannot be deleted. Please contact the EUTF immediately if you become aware this error has occurred and we will correct the existing record with the accurate SSN

6 - Click the **Next** button.

7 - The **Add Participant - Member Data** screen displays.

1 Member Identifier
2 Member Data

Print

Basic Employee Demographics Data

HB Number 1007274
First Name* MICKEY
Middle Name
Last Name* MOUSE
Gender* Male
SSN* 871551512
Birth Date* 01/01/1990 (MM/DD/YYYY)
Date Of Death MM/DD/YYYY (MM/DD/YYYY)
Suffix

Employee Address Information

Address Type	Mailing Indicator	Address 1	Address 2	Address 3	City	Country	State	ZIP Code
Physical	<input checked="" type="radio"/>	201 MERCHANT S			HONOLULU	UNITED STATES	Hawaii	96813
Mailing	<input type="radio"/>							

Organization Employment Information

Organization Id* City and County of Honolulu
Department Id* CCHON Payroll office - Active
Bargaining Unit* 00
Action Code* New Hire
Employment Status* Active
Agreement* Active-Non-PCP Plan
Leave Reason
Leave Return Date MM/DD/YYYY (MM/DD/YYYY)
Termination Reason
ERS Membership Date MM/DD/YYYY (MM/DD/YYYY)
Years of Service
Security Level 3* City and County of Honolulu
Security Level 4* CCHON Payroll office - Active
Security Level 5* N/A

Complete all required fields noted with the red asterisk *:

Use only CAPITAL LETTERS when entering information in each field.

- First name
- Last name
- Gender
- SSN (pre-populated with information from previous screen)
- Birth date
- Address
 - If the employee has both a physical and mailing address, the addresses CANNOT be the same. Enter both addresses and the mailing indicator under the mailing address must be selected.
 - If the employee only has a physical address, enter address and the mailing indicator on the physical address must be selected.
 - If the employee only has a mailing address, enter address under the **physical address** field and the mailing indicator on the physical address must be selected.
- Organization ID
- Department ID
 - Select the employee's department name
- Bargaining Unit
- Action code **{Always use New Hire}**
- Employment status **{Always use Active}**
- Agreement **{For State – Always use Active PCP (even if employee is not enrolled in PCP) – All others use Active Non-PCP – Never use Active VEBA GF PCP}**
- Security Level 3
 - Select the value indicated in the drop-down menu. There will be only one value to select.
- Security Level 4
 - Select the value indicated in the drop-down menu. There will be only one value to select.
- Security Level 5
 - Select the value indicated in the dropdown menu. There will be only one value to select.

Note: Do not enter information under the section Employee Additional Information (EUTF Internal Use Only)

Pre-Validations

Each field has Pre and Post validations. The Pre-Validations validate the data entered in each field. In addition, some additional messages are examples are indicated in Section 2.2. Examples of pre-validation messages where {0} is the field name:

Field {0} is required

The length of the field {0} is invalid.

All characters for field {0} must be numeric.

All characters for field {0} must be Alphanumeric.

All characters for field {0} must be uppercase.

All characters for field {0} must be lower case.

Text with white space is not allowed for field {0}.

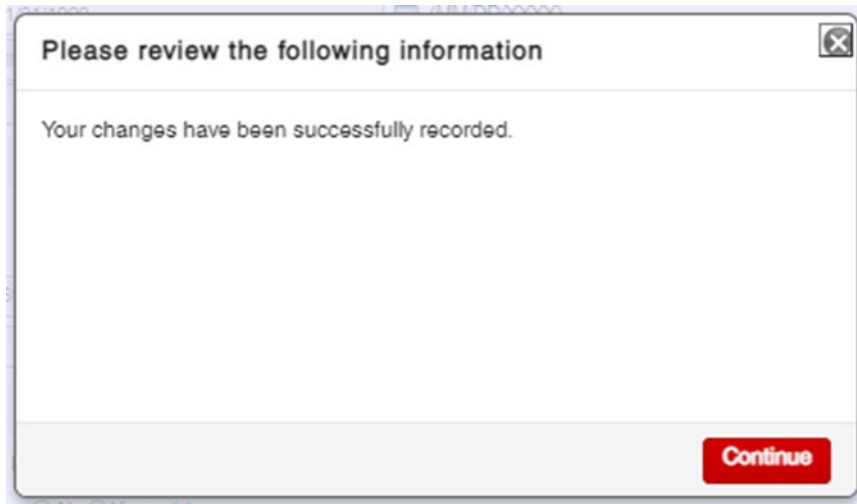
Text must be in proper case for field {0}.

Field {0} is Invalid.

Date is invalid for field {0}.
Number is Invalid for field {0}.

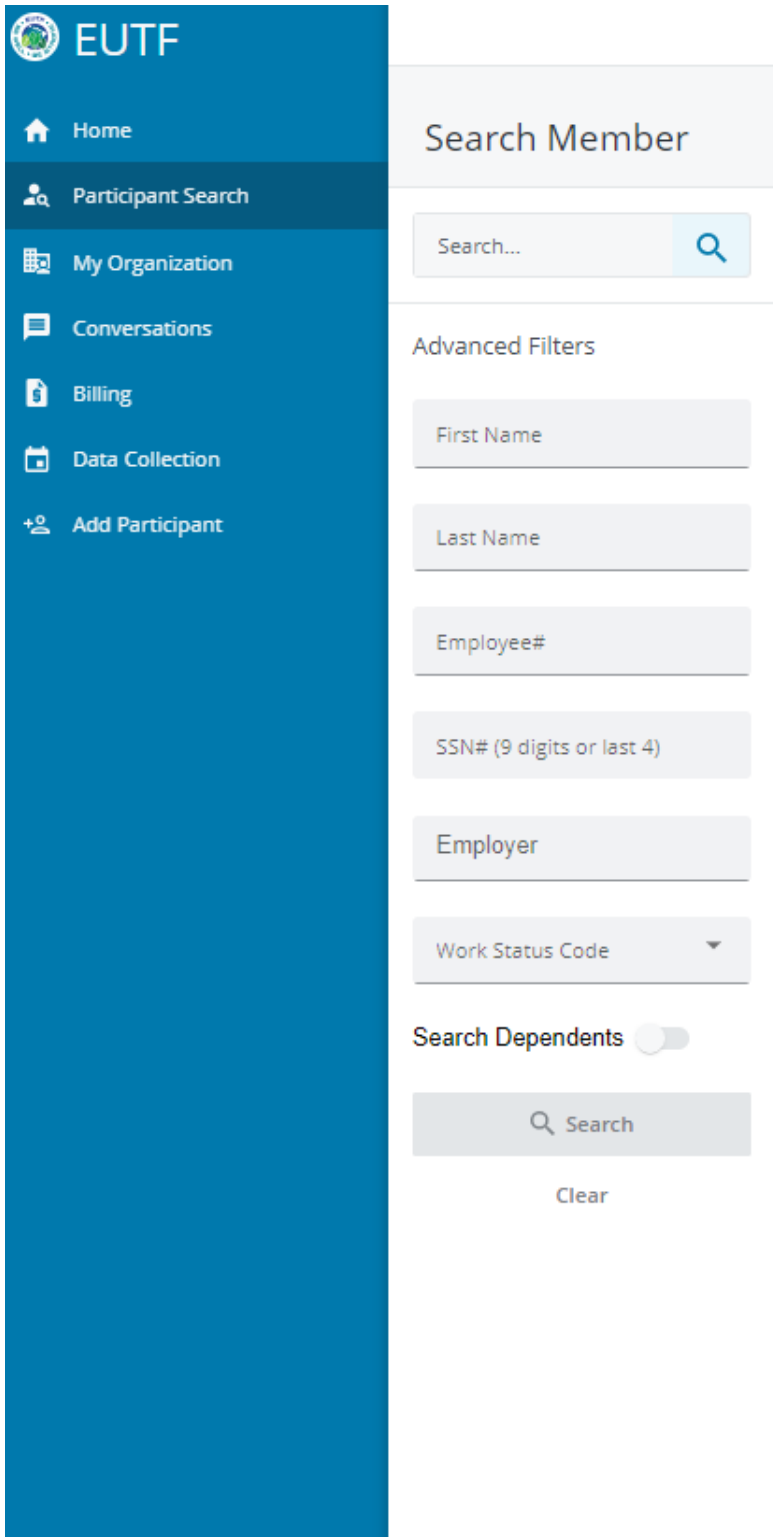
When you are done entering information, click next.

The add has been completed.



8 - Click the Continue button.

9 - To check that a new participant was added, search for the participant on the search participant feature on the home screen.



2.2. User Interface Validations and Post Submit Validations

The **Add** functionality requires some data validations in the **Add Participant - Member Data and Member Identifier** screens when you enter the employee's information.

The following critical warning messages will appear as soon as you click on the **Next** button in the **Add Participant - Member Data** and **Member Identifier** screens if data is entered incorrectly.

Additional User Interface Validations – Pre-submit validations

SSN	An SSN must be unique for a participant.	Error: SSN Already in Use
	The mailing indicator must be checked.	
Mailing Address	You must enter the entire mailing address. <ul style="list-style-type: none"> Minimum for US/ Canada: Address 1 field + City field + Country field + State field + ZIP Code field Minimum for International: Address 1 field + Address 3 field + City field + Country field + State field 	Error: Must Provide Complete Mailing Address

Here some Critical warning examples.

Example 1 - Incorrect Birth Date provided with an incomplete Mailing address.

✘ Critical warning >>>WarningCodes_errorParticipantYoungerThan16Aut>>>
✘ Critical warning Employee Address: A complete mailing address is required.

U.S./Canada: Address1, City, State, Country, and Zip
 International: Address1, Address3, City, State, and Country.

Basic Employee Demographics Data

HB Number 1006501
 First Name* ELODIE
 Middle Name KIM
 Last Name* COOPER
 Gender* Female
 SSN* 568452159
 Birth Date* 04/02/2010 (MM/DD/YYYY)
 Date Of Death MM/DD/YYYY (MM/DD/YYYY)
 Suffix

Employee Address Information

Address Type	Mailing Indicator	Address 1	Address 2	Address 3	City	Country	State	ZIP Code
Physical	<input type="radio"/>							
Mailing	<input checked="" type="radio"/>					UNITED STATES	Hawaii	96813

Post Submit Validations

Field	Requirement	
City Address	You must enter alphabetic characters Alpha [a-z A-Z]	
Zip Address	You must enter numeric characters	96813 or Num {5} or Num (5) with/without a "-"+ Num (4)
Email Address	An email address that conforms to: name@comany.com	CHR + "@" + CHR + "."+ CHR
First Name Employee	You must enter alphabetic characters Alpha [a-z A-Z]	First Name: Invalid value
Last Name Employee	You must enter alphabetic characters Alpha [a-z A-Z]	Last Name: Invalid value
Middle Name Employee	You must enter alphabetic characters Alpha [a-z A-Z]	Middle Name: Invalid value
SSN Employee Number	Must be a valid SSN There are many rules about a valid SSN May not be 123456789 May not start with x078051120 May not start with x219099999 May not contain 000, 666 Must use 0-9	SSN: Invalid value

Example 1 - Invalid Email address entered

Employee Email Information

✖ Critical warning Invalid value.

Email Type	Email Address	Primary Indicator
Work	<input type="text"/>	<input type="radio"/> No <input type="radio"/> Yes ✖
Personal	<input type="text" value="elodie-cooper-gmail.com"/>	<input type="radio"/> No <input type="radio"/> Yes ✖

Example 2 - Invalid SSN entered

1 Member Identifier
2 Member Data

Employee Identifier

✖ Critical warning SSN: Invalid value.

Transaction Date*	<input type="text" value="04/01/2022"/>	(MM/DD/YYYY)
Organization Id*	<input type="text" value="State of Hawaii"/>	
SSN*	<input type="text" value="2500006281"/>	

← Cancel
Next >