



Employer Online System Tutorial CANCELING AN EMPLOYEE (multiple or single entry)





IMPORTANT!

To ensure a successful experience on this tutorial, please read the following before proceeding.

"Canceling an Employee" can be done at any time of the year and can be done with future termination dates.





Employer Login Process Go to NMPSIA.com Select Employer Login...









Sign In

Sign In...

Employer Login You are an Employer.

Enter your credentials

Employer Sign in Please log in with your district id and password	
District ID:	
Representative Name: 🗸	
Password:	
Forgot Your Password Log In Home	







On the Home Page Select "Cancel EE"

Home	Inquiry	Review	New Hire	Employer Information	Cancel EE	Report LOA	Feedback	Logout		
Employer SANTA FE PUBLIC SCHOOLS BENEFITS1 ALICIA HUERTA										
SANTA FE PUBLIC SCHOOLS Policy (dist id: 71)										
	Medical					Yes	Yes			
			Dental		Yes					
			Vision		Yes					
			Basic Life In	surance	Yes					
			Additional(\	oluntary) Life Insuran	Yes					
			Spouse Life	Insurance	Yes					
			Dependent I	ife Insurance	Yes					
			Long Term Disability				Yes			
			Domestic Partner			Yes				
			Part Time Resolution			No				
			125K Plan		01/01/2014 - 12/31/2999					
			Open/Switch Enrollment Date				01/01/2025			





4 Enter the employees social security number (SSN)

(the employee's name will auto populate).

Enter the Last Date of Coverage, the Received Date and select the Note Type.

(Last Date of coverage must be the last day of current month or a future date, you cannot cancel an employee retroactively)

HIPAA ID	SSN	EE Name	Last Date of Coverage Receive	ed Date Note Type		
	555-55-5555	Daisy Duck	04/30/2024			
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				· · · · · · · · · · · · · · · · · · ·		
				· · · · · · · · · · · · · · · · · · ·		
AddRow						
Submit			Reset	Print		







Select the appropriate reason for the cancellation and click "Submit".







Once submitted, the screen will show Successful. Print the transaction for your records.

A Cancellation of Enrollment notice will be created and sent to the employee.

Last Date of Coverage		f Coverage	Post Date	Search				
	HIPAA	SSN	EE Name	Last Date of Coverage	Received Date	Post Date	Note Type	
		5 <u>55-55-55</u> 55	Daisy <u>Duck</u>	04/30/2024	03/19/2024		RSGN Successful	
				Print				





Thank you for utilizing this valuable tool. We hope you found it helpful and user friendly.

If you need assistance or have any questions, please contact your Erisa Administrative Representative at 1-800-233-3164.