



# Employer Online System Tutorial Reporting A Leave of Absence







#### **IMPORTANT!**

### To ensure a successful experience on this tutorial, please read the following in it's entirety before proceeding.

- A "Leave of Absence" (LOA) can be done at any time of the year.
- Any employee that is on an Employer approved LOA should be reported immediately.
- If the initial LOA reported has a change to start or end date or the employee has returned to work, report these events immediately.
- Enter all data in the required format i.e., DOB: *MMDDYYYY*.



1



### Employer Login Process Go to <u>NMPSIA.com</u> Select User Login and Employer Login...

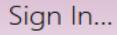
New Mexico Public Schools Authority NMPSIA + EMPLOYERS + EMPLOYEES A User Login	About Contact D Board Login Transparency Rule - MRF ENHANCED BY Goog Q Risk Division Behavioral Health NMPSIA Procurements IPRA Request
Welcome to the New Mez Insurance Authority     Happening Now   2023 Program Guide     Compare Medical Plans     Anonymous Reporting System (STOPHI)	A Mobile Appl
New Mexico Public Schools In	surance Authority
Employee Login Employ	er Login Manager Login You are a Manager.





#### 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





#### From your home page Select "Report LOA"

Home	Inquiry	Review	New Hire	Employer Information	Cancel EE	(Report LOA)	Training Material	Feedbac
r i				l				
		_						_
		•	4edical				Yes	
		C	Dental				Yes	
			/ision				Yes	
		E	Basic Life In	surance			Yes	
		1	Additional(V	oluntary) Life Insuranc	e		Yes	
		5	Spouse Life I	Insurance			Yes	
		C C	Dependent L	ife Insurance			Yes	-
		L	.ong Term D	isability			Yes	-
			Domestic Pa				No	-1
		F	Part Time Re	solution			Yes	-

Step 5 After selecting Report LOA there will be 3 options,

Report LOA
Change LOA Date
Report LOA Return









## To report an LOA, enter the employee's information and "Click Submit

SSN	EE Name	Date Leave Started Date Expected to Return		Type of Leave	Remove
	Dan H Lee	03/04/2024	07/16/2024	FMLA - EE Health Condition	* Remov
Comment		Statistics (MMA)			Remove
	Gilbert R Baker	12/19/2023	10/16/2024	Disability	*
Comment					Remove
2 D	Olivia G Anderson	03/18/2024	04/23/2024	Unknown	Y Domous
Comment					Remove
					Remove
Comment					(remove
					Remove
Comment					





If an employee has already been entered as an LOA and you need to change the Start Date or Return Date. Go to your Home Screen, Report LOA and select Change LOA Date from the drop-down menu.

Home	Inquiry	Review	New Hire	Employer Information	Cancel EE	Report LOA	Training Material	Feedback	L
mployer	BERNALILLO	PUBLIC SC	HOOLS BENEF	TITS1 CRISTINA THOMSON					
			BE	RNALILLO PUBLIC	school	Report LOA	Feedb		
		E E	1edical			Report LOA		]	
			Dental					_	
			ision/			Change LO	A Data	_	
			Basic Life In			Change LO	A Date		
		4	Additional(V	oluntary) Life Insurance	e				
		5	Spouse Life 1	Insurance		Report LOA	Return		
			Dependent L	ife Insurance					
		ī	ong Term D	isability					
		0	omestic Pa	rtner			No		
		F	ort Time Re	solution			Yes		
		1	25K Plan				No		
		S	witch Date				01/01/2021		







#### Employee's information will auto populate after entering the Social Security Number (SSN). "Click on Change Date"

SSN	v	Search Index	611768296	Search	(SSN/LastName	/LastName,FirstName/A	Address/Phone/HIPAA ID
SSN	Last Name	First Name	Middle Name	Start Date	Return Date	Leave Type	Change
555-55-5555	Duck	Daisy		02/01/2024	04/30/2024		Change Date

#### Change the date, add a comment and "Click Submit"

		Change LOA Date
SSN	555-55-5555	
Name	Duck, Daisy	
Start Date	03/04/2024	
Return Date	07/16/2024	
Leave Type		
Comment	Extended	
		Submit





When an employee returns from LOA, you need to report their Return Date. Go to your Home Screen, Report LOA and select "Report LOA Return" from the drop-down menu.

Home	Inquiry	Review	New Hire	Employer Information	Cancel EE	Report LOA	Feedb <sup>ial</sup>	Feedback	L
mployer	BERNALILLO	PUBLIC SO	CHOOLS BENER	TITS1 CRISTINA THOMSON			11 A.		
			BE	RNALILLO PUBLIC	SCHOOLS	Report LOA	n:		
		H	Medical Dental			Change LOA	Date e	-	
		1	/ision					-	
		E	Basic Life In	surance	(	Report LOA R	Return		
				oluntary) Life Insuranc	e				
		5	Spouse Life 1	Insurance					
			Dependent L	ife Insurance		Yes			
		I	ong Term D	isability		Yes			
			Domestic Pa	rtner		No			
			Part Time Re	solution		Yes			
		I	L25K Plan			No		7	
			Switch Date			01/	01/2021		







## The employee's information will auto populate, enter the Return Date and "Click Submit".

(Please make sure to indicate the type of employment they are returning to.)

SSN	EE Name	Return Date	Туре	Remove
1768296	Dan H Lee	05/15/2024	Full Time EE 🔻	Remove
			( v)	Remove
			v)	Remove
			v )	Remove
			v )	Remove
				Add





#### 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.