ENROLLING IS EASY

Welcome		
User Name	First time here?	
a	Register to create your user name and password.	
case sensitive Password	Register	
•		
case sensitive		

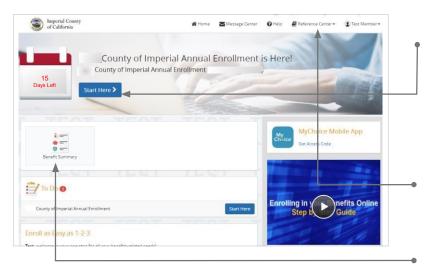
Get started

Visit **www.benefitsolver.com** and login by entering your user name and password.

If you are a first-time user, click on 'Register' to set up your user name, password and security questions. Our 'Company Key' is **COI** (note: it's case sensitive).

Forgot your user name or password

- 1. Visit **www.benefitsolver.com** and click on the 'Forgot your user name or password?' link.
- 2. Enter your social security number, company key and date of birth.
- 3. Answer your Security Phrase.
- 4. Enter and confirm your new password, then click 'Continue' to return to this page and login.



Begin enrollment

Click 'Start Here' and follow the instructions to enroll in your benefits or waive coverage.

You must make your elections by the deadline on the calendar. If you miss the deadline you will waive any electable benefit coverage, and have to wait until the next annual enrollment period to enroll.

Looking for more information

View plan details, carrier specifics and benefit guides by clicking 'Reference Center' in the main navigation.

Want to review your current benefits

You have year-round access to your benefit summary and specific benefit elections at <u>www.benefitsolver.com</u>



SCAN & ENROLL

Enroll in your benefits from your mobile device. Visit **www.benefitsolver.com** or simply scan this QR code and tap your way through your elections. If you don't already have a QR code reader on your smart phone or tablet, download one from your device's app store.





Company Key: COI

	A	-		
County of Imperial Annual Enrollment	(I) 1. About You	2. Election Information		3. Review
About You	Medical			TES
C Election Information	Please make your medical election.			
Medical	STIEST			103
Dental	Select your plan			
Vision	Select Medical PPO Plan	1		
Basic Life				
Supplemental Employee Life	Plan Pricing			
Supplemental Spouse Life	Tier		Your Cost (Monthly)	
Supplemental Child Life				

🖨 Home

Total Em

County of Imperial Annual Enrollment

2 Elect

Please review the following information. After you have verified that all your information is correct, click on the "Approve" butto would like to make changes or new selections, simply click on the "Effit" link to the right of the area in which you would like to a changes. You are NOT Done You must also click" Agrees in the new twindow in order to complete your open enrollment.

loyee Cost: \$70.45

(D) About You

1 45

Review Enrollment

Message Center 🛛 Help 🖉 Reference Center 🕶 💽 Test Member 🕶

4

Approve >

3 84

Make your elections

Review your options as you walk through the enrollment process. Click 'Select' on the plan(s) you would like to choose. Track your choices along the left side which updates with your total cost.

If you have any questions as you go through enrollment, contact your local HR.

Use the 'Reference Center' to help you make the right elections.

Review your elections

Review, edit and approve your personal information, elections, dependents and beneficiaries.

Approve

Once you have reviewed your elections and they are accurate, click 'Approve' to continue.

Confirm your choices

Your enrollment isn't complete until you confirm your benefit elections and cost.

⊘ Transaction Complete - Pending Approval	🖨 Print Benefit Summary
Your information has been submitted. Select Home to return to your benefits home page or Log Out to end this session.	Confirmation Number
Thank You.	631-54-71-556

Print

Print your election information and confirmation number for future reference or save it to your Message Center.



Imperial County of California

Annual Enrollment

Election Information

(1) About You

Medica

Denta
 Vision

Basic Life

× Supplemental Employee Life

× Supplemental Spouse Life

County of Imperial

>

Confirmation

× | Disagree

Company Key: COI