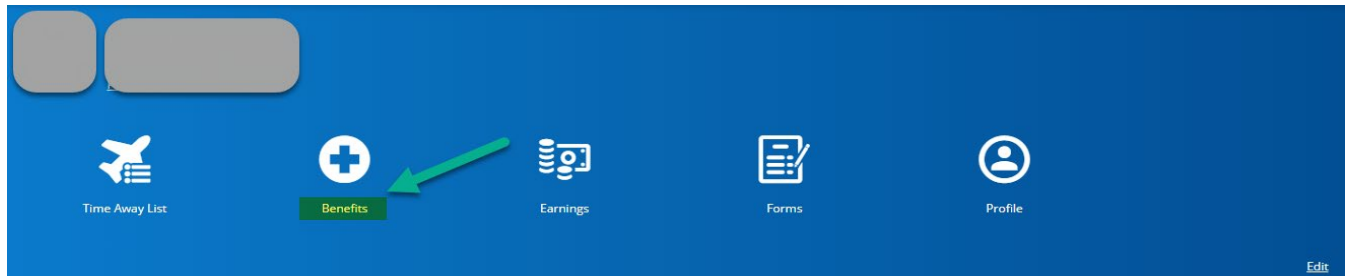


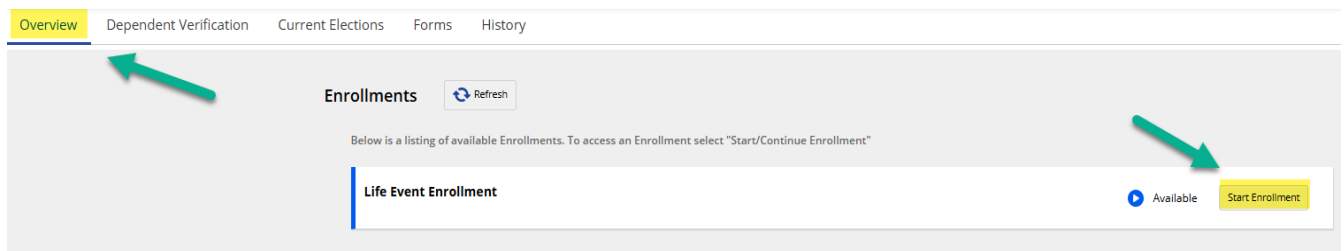


## New Life Event Enrollment Process

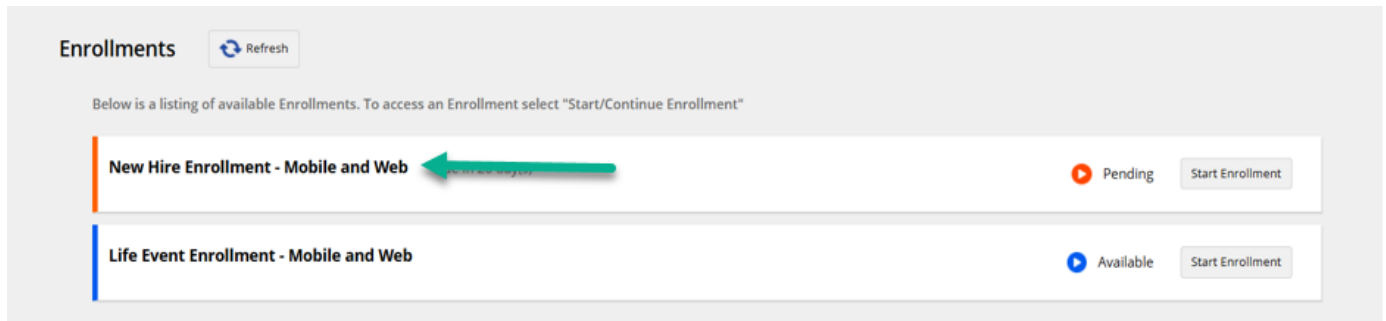
Choose the 'Benefits' icon on your home screen:



Under 'Overview,' choose 'Start Enrollment':



**Note: If you still have a new hire enrollment in your inbox, you will need to process that one first:**



**Start:**



## Life Event Enrollment

### Welcome to the Life Event Enrollment!

If you are adding/dropping dependents to your Medical, Dental, and/or Vision coverage, you must provide the dependent verification documents during this process. To see the list of acceptable dependent verification documents, click [here](#).

#### Your enrollment deadline:

You must complete this Life Event change **within 31 days of the Life Event Date**.

#### How to navigate while you are enrolling:

As you make your benefit elections, please use the arrows on the screen to view the lower portions of the election pages for checking the dependents and selecting your insurance election amounts. Please take your time and read all of the details on each page while determining your proper elections. If you are removing dependents from your coverage, please make sure to uncheck the box by their name.

To move forward and back to the various pages during the election process, please use the buttons at the bottom right-hand corner of each page.

Cancel

Start

**Choose the respective Type of Event > Enter the Date of the Event (remember, the life event must have taken place within 31 days of the life event date) > Add Documents to upload your supporting documents > Continue:**

**Life Event Enrollment**  
**Event Details**

To declare a life event, please specify the type of event and select the date of the event. Both fields are required. If necessary, please attach supporting documentation. Please note, that we will not approve your life event until you provide supporting documentation.

**Event Details** ←

Type of Event\*  
Birth or Adoption of child

**Date of Event\*** ←  
1 / 6 /2025

Date of event should be within the past 31 days or any future date based on the type of event you have chosen.

**Supporting Documents**

Supporting documentation is required for the selected event type. Please add the documents before continuing.

No Documents Added

+ Add Documents ←

Finish Later Back **Continue** →

**Choose 'Continue' on the next page:**

**Life Event Enrollment**  
**Personal Information**

Please review your personal information. Contact your administrator if you need to update this information before continuing with the enrollment.

Full Name  
Birth Date  
Address

Finish Later Back **Continue** →

In order to see the correct benefit plans, you must add the dependents from the screen below:

Life Event Enrollment (Mobile)

**Dependent Information**

A dependent is a person who is eligible for coverage under the benefits you elect. Please add all dependents that should be covered under any of your benefit plans for the year.

**Dependents**

No Dependents Added

+ Add Dependent

Finish Later

Back

Continue

Choose the dependent you are adding to the plans. If you are removing dependents, make sure the highlighted box is NOT checked > Continue:

Life Event Enrollment

**Impacted Dependents**

Select the newly eligible dependents due to the event: [Birth or Adoption of child]. If the effected dependents aren't displayed below please ensure they have been added in previous step.

**Newly eligible dependents**

Child Test (Child, 1/6/2025)

Finish Later

Back

Continue

Again, in order to see the correct benefit plans for you to choose, you must choose the 'Change' button > choose the child you are adding > Confirm:

**Life Event Enrollment (Mobile)**  
**Medical Plans**

The Ben E Keith Medical plan

Protect yourself and your family by choosing health coverage.

... [Show More](#)

**0 Covered Dependents** [Change](#)

**Life Event Enrollment**  
**Medical Plans**

The Ben E Keith Medical plan

Protect yourself and your family by choosing health coverage.

... [Show More](#)

**Covered Dependents**  
Select the dependents who you would like to cover. You will then be able to select a plan option.

Child Test (Child, 1/6/2025)


[Confirm](#) ←

*Note: before a dependent was added, the only benefit option available to choose from was for 'Employee Only.' Adding and selecting the new dependent changed the plan option.*

## Select your plan and Continue:

### Select a Plan

Employee & 1 Child

<input checked="" type="radio"/> BC FAM 	<input type="radio"/> Waive Medical
Your Estimated Bundle Cost <b>\$140.08</b>	Select this option to waive the coverage
Frequency <b>Every Pay</b>	
<b>Blue Cross Blue Shield Medical - Employee + Family</b>	<b>Waive Medical</b>
Effective from 1/6/2025	Effective from 1/6/2025
Your Cost <b>\$140.08</b>	
Frequency <b>Every Pay</b>	
<i>Currently Enrolled</i>	
<input checked="" type="checkbox"/> Selected	<input type="button" value="Select"/>

[Finish Later](#)

[Back](#)



Once you have gone through the entire process and enrolled/un-enrolled your dependents, you will come to the 'Review' page. The review page will reflect the changes you made. **Please look over this and make sure these are the plans you are wanting to make changes to.** Scroll to the bottom and hit 'Submit.'

### Life Event Enrollment

**Review** 

Please review the summary of your elections. You are not enrolled until you click Submit and your enrollment is processed.

Event Details	
Event Type	Birth or Adoption of child
Event Date	1/6/2025
Impacted Dependents	Child Test (Child, 1/6/2025)
Supporting Documents	Test.pdf (1/23/2025, 2:34 PM)

[Finish Later](#)

[Back](#)



Your life event is not fully submitted and routed to the benefits department until you see the below page. We highly recommend printing or saving for your records.

Life Event Enrollment (Mobile)

Next Steps



**Submitted!**

Congratulations! Your enrollment has been submitted.

 Print

**Remember, the dependent verification process is different from the life event process. You will still need to upload the documentation via the dependent verification process.**

**On the same page, if a dependent verification is needed, you will see the below:**

After leaving this page, you will no longer be able to see these next steps. Please print if you would like to retain a copy.

 **Dependent Verification Required**

You must submit documents in the Dependent Verification application to verify your covered dependents.

- Child Test (Child, 1/6/2025)

[View details](#)

**To upload dependent verification documents, you will work the following steps:**

**Choose 'View details' > OK > Upload documents > Add Documents > OK > Upload Documents > Add Documents > OK:**

 **Dependent Verification Required**

You must submit documents in the Dependent Verification application to verify your covered dependents.

- Child Test (Child, 1/6/2025)

[View details](#)



## Important



Following this link will navigate you away from this page. If you need to review the information on your completed enrollment, click "Cancel". Otherwise, click "Ok" to continue.



## In Progress

You have requested to cover one or more of your dependents within a benefit option.

Please submit the required supporting documentation for those dependents on or before the Due Date.

Name	Relationship	Status	Due Date	Documentation	Comments
Child Test	Child	Pending	1/24/2025	<a href="#">Upload Documents</a>	

## Upload Supporting Documentation



To upload supporting documentation, click the "Add Documents" button below. After uploading all required documents, you may enter any comments if desired. When finished, click OK.

No Documents Uploaded

Comments

[Add Documents](#)

Cancel

OK

## Upload Files



Drag and Drop File

We allow only: .jpg, .png, .doc, .docx, .pdf, .html, .htm, .txt, .zip, .bmp, .gif, .tif, .jpeg

Or

[Browse for file\(s\)](#)

File Name	File Size	Document Type	Action
Test.pdf	24.9 KB	Dependent Verification	<a href="#">X</a>

[Upload](#)

[Clear List](#)

## Upload Supporting Documentation



To upload supporting documentation, click the "Add Documents" button below. After uploading all required documents, you may enter any comments if desired. When finished, click OK.

Test.pdf

Comments

Add Documents

Cancel

OK

When you get to this page, **you have to choose the 'Save' button or the process is not complete. If you do not see 'Under Review' under the 'Status' column, the process is not complete.**

Save Refresh

### In Progress

You have requested to cover one or more of your dependents within a benefit option.

Please submit the required supporting documentation for those dependents on or before the Due Date.

Name	Relationship	Status	Due Date	Documentation	Comments
Child Test	Child	Under Review	1/24/2025	Test.pdf	

Once you have saved the process, your event will re-route to the benefits department for approval or denial. If the life event gets denied, we will reach out to you directly to let you know next steps.

To check on the status of your life event, you can choose 'Forms' from the 'Benefit' button on your home page. The 'View Details' allows you to see the changes you made:

Overview Dependent Verification Current Elections **Forms** History

Nothing Found

My Form Submissions

**Life Event Enrollment** Accepted  
Submitted 1/23/2025 3:21 PM

View Details