aleraedge.aleragroup.com

Questions? Call Customer Support **1-800-836-0026**, x7400, 8-4:30pm

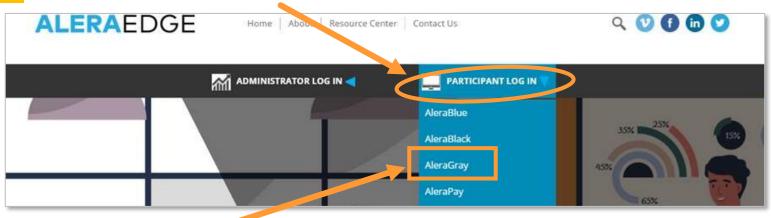
1 -Click the PARTICIPANT LOG IN tab

Login >

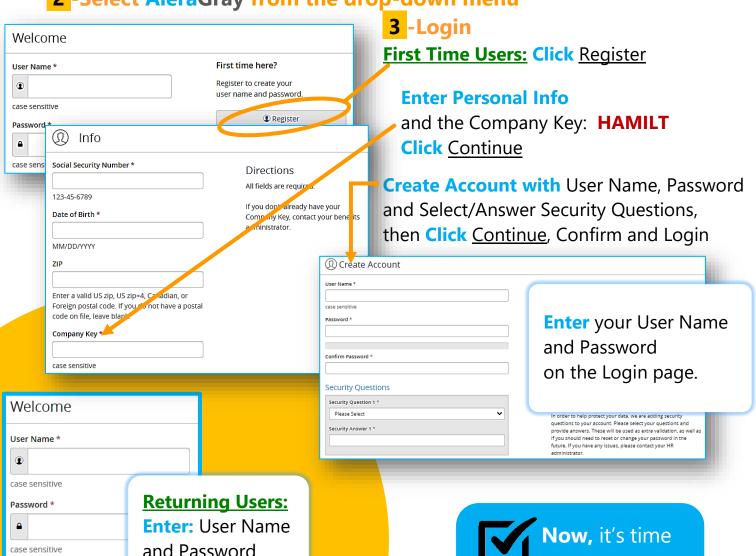
Forgot your user name or

Forgot

your password?
See next page



2 -Select AleraGray from the drop-down menu





Make Your Elections

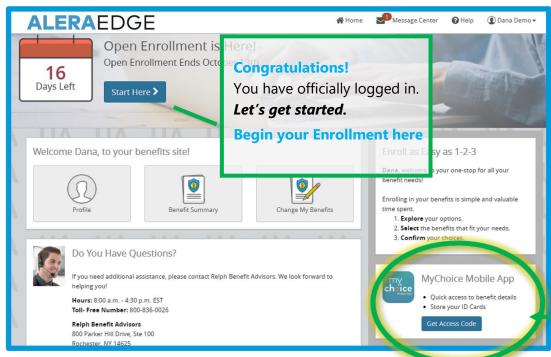
Review your options as you walk through the enrollment process.

Click 'Select' to choose plans. Track your choices and total cost, on the enrollment bar.

Review Your Elections Review and edit your elections—then Approve.

Confirm Your Choices Your enrollment is not complete until you **CONFIRM** your benefit elections.

Print your election information and confirmation number for future reference.



Review Your Current Plan Anytime—in the Benefits tab, Click Benefits Summary

Forgot Your Password?

- 1- Click the link 'Forgot Your Password?'
- 2- Enter your social Security Number, Date of Birth, Zip Code and Company Key (HAMILT).
- 3- Answer your security phrase.
- 4-Enter and confirm a new password, then click 'Continue' to return to the login page.

Life-Changing Event?

30-days—Documentation must be submitted for: Marriage / Divorce Change in job status for you or an enrolled dependent Birth or adoption of a child

"MyChoice Mobile" App

Available at the app Store:

- —Android: Google Play
- —iPhone: Apple

You can:

- -Access current plans
- -Complete Open Enrollment
- -Get alerts and much more!

CONSENT TO RECEIVE ELECTRONIC NOTICES:

The following documents and notices are provided to you electronically containing important information regarding eligibility, coverage, benefits and rights.

Once you login to AleraGray, these documents are available in the Reference Center.

- Summary Plan Descriptions
- Summary of Material Modifications
- Summary Annual Reports
- Forms 1095-B/1095-C
- Summary of Benefits & Coverage + Uniform Glossary of Terms
- · Michelle's Law Notice
- Women's Health & Cancer Rights Act Notices
- Newborns & Mothers Health Protection Act Notice
- Medical Loss Ratio Rule Notice
- Notice of HIPAA Privacy Practices
- Notice of HIPAA Special Enrollment Rights
- Important Notice about Your Prescription Drug Coverage & Medicare
- · Premium Assistance under Medicare & Children's Health Insurance Program (CHIP)

- Model General Notice of COBRA Continuation Coverage Rights
- Your Rights & Protections Against Surprise Medical Bills

You are entitled to request and obtain a paper copy of any electronically furnished document free of charge or to revoke your consent at any time by calling Human Resources.

In order to access information provided electronically, you must have:

- A computer/electronic device with internet access
- An email account that allows you to send and receive emails
- Microsoft Word 95 (or higher)
- Adobe Acrobat Reader 5.0 (or higher)



(?) Use the Website **Reference Center** | (a) Call the Customer Support 1-800-836-0026, x7400

