

Contact Benefit Team within 31 days of Loss of other coverage

- ✓ Email information to benefits@slco.org
 - Provide your name and Employee ID Number (EIN)
 - Indicate reason to add coverage
 - Indicate date to add coverage
 - Attach document showing proof of loss of other coverage
 - If you are adding dependents to your coverage due to dependent losing coverage, provide their name, DOB and SSN. If you are not comfortable providing SSN in email, feel free to call us with that.
 - Let us know what plan(s) to add them to. IE: medical and dental or medical only.

- ✓ Documentation **must** be received within 31 days, OR your next opportunity to enroll is during Open Enrollment in November for a January 1st start date of the following year.
 - Upload through document upload in PeopleSoft OR email to benefits@slco.org

- ✓ Your benefits team is here to **help. Please reach out.**

Benefits Phone: 385-468-0580
Benefits email: benefits@slco.org
Benefits website: benefits.slco.org