

How to Enroll in Your 2023 Health Benefits

Welcome

First time here?
Register to create your user name and password.

User Name *

Register

case sensitive

Password *

case sensitive

Login >


[Forgot your user name or password?](#)

RETURNING USERS: Click on the **Forgot your username or password?** link to reset your login details.

 **Annual Enrollment is Here!**
Annual Enrollment Ends Nov. 22, 2022

[Start Here >](#)


Hi, I'm Sofia, your trusted benefits advisor!



Consider me your trusted benefits guide as you make your way through your benefits elections. If at any point you have a question, simply click on the **"Ask Sofia"** link in the upper right hand corner of the page.

As an automated answer your questions and get you connected. Let's get started.

About You


Your Information


First Name:

Middle Initial:

Last Name:

Social Security Number:

Your Family



Do you have any dependents?

Yes No

▶ REGISTER AND LOG IN

Visit www.88Sears.com to access the Transformco 2023 Annual Enrollment portal and begin your account registration.

If you are logged into the Network, visit www.88Sears.com and click the Transformco 2023 Annual Enrollment button under Quick Links to access the Transformco 2023 Annual Enrollment portal.

▶ EXPLORE YOUR OPTIONS

Explore the site to learn about your 2023 health benefits. You'll find lots of helpful information in the Reference Center.

The calendar at the top of the Home page lets you know how many days you have to enroll.

▶ REVIEW YOUR INFORMATION

Click the **Start Here** button to review your personal information and add dependents you wish to cover.

You will need to provide each dependent's legal name, Social Security Number, and birth date to add them to your coverage.*


Sofia, your personal benefits assistant, can answer questions and guide you as you enroll.

*You may be required to provide documentation to prove your relationship to each dependent.

How would you like to enroll



I'd Like Help Choosing Plans
Help me find plans that best match my needs



I Know What I Want
I know which plans I'd like to enroll in

Not sure which benefits to elect? MyChoice is a great place to start! Just answer a few questions and see which coverages are recommended for your unique needs.

Coverage Recommendations



Based on the information you provided in the MyChoice questionnaire, we can recommend the following coverages to best meet your needs.

My Health

[Why are these plans recommended](#)

Benefits that help pay the cost of medical care or support other costs due to a medical event.

Medical No Thanks Selected

Medical Plan \$48.51
Monthly

Covered Members:

[Plan Details](#)

[Why Recommended](#) [View Other Available Options](#)

2 WAYS TO ENROLL IN COVERAGE

- **MyChoice Recommendation Engine**
Answer a few simple questions to receive a personalized benefits recommendation. Your answers are never shared.
- **Explore on your own**
Use the **Next** and **Back** buttons to review and elect options available to you. Choose or decline coverage for each option and select which family members you want to cover.

REVIEW AND FINALIZE YOUR ELECTIONS

Make sure your personal information, elections, dependents, and beneficiaries are accurate, then approve your elections.

To finish, click **I Agree**. When your enrollment is complete, you will receive a confirmation number and can print your Benefit Summary for your records.

benefitsolver

1. About You 2. MyChoice 3. Election Information 4. Review [Ask Sofia](#) Total Employee Cost: \$587.34 Monthly

Please review the following information. After you have verified that all your information is correct, click on the "Approve" button. If you would like to make changes or new selections, simply click on the "Edit" link to the right of the area in which you would like to make the changes.

Review Enrollment

You're almost done! Please review your enrollment below.

You must click the **Approve** button before you will be enrolled in any plans.

- About You
- Dependents
- Beneficiary Information

Your Elections

My Health

Your Employer's Cost
\$375.33 Monthly
This is the total amount your employer will be paying for these benefits to lower your overall cost.

Your Cost	
Total Premium	\$365.12 Monthly
Total cost of all plan premiums	Monthly
Total Savings Contributions	\$222.22 Monthly
Total amount contributed to savings plans	Monthly
Total Cost	\$587.34 Monthly

*Total employee cost represents the total approved cost of benefits included on the summary. Other benefits not displayed are not included.

The information submitted may be subject to further review and/or approval. The deduction amounts are based on rates and calculations stored in the Benefitsolver system at the time of elections. To verify actual elections and/or deduction amounts, please contact your benefits administrator.

Employer remains responsible for any and all loss or damages, and in no event shall Businessolver be liable for any amount, including, but not limited to, insurance premiums, stop-loss deductibles, reinsurance fees, health plan or other claims, cancellations or reinstatement fees, or penalties, for a failure to pay a carrier/vendor or for failure to provide appropriate billing information in a timely manner, unless such delay is caused by the negligent acts of Businessolver.

Every effort has been made to report information accurately, but the possibility of error exists. In case of any conflict between your benefits election confirmation and an official plan document, the plan document will be the final authority. Please note, some insurance coverage elections only become effective upon approval of your evidence of insurability (EOI) by the carrier.

[Back](#) [Approve](#)

Confirmation

Thank you for enrolling in your new hire benefits. To view your benefit elections at anytime throughout the year you can access your **Benefits Summary** under your name in the upper right hand corner. If you have any questions, please chat with your personal benefits assistant, Sofia via the **Live Chat** feature in the navigation bar at the top of your browser.

*Total employee cost represents the total approved cost of benefits included on the summary. Other benefits not displayed are not included.

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[I Disagree](#) Total Employee Cost: \$587.34 Monthly [I Agree](#)



New Hire Enrollment - Pending Dependent Verification

[Upload Documents](#)

[Benefit Summary](#)

Thank You!

Transaction Complete

Your information has been submitted. Select Home to return to your benefits home page or Log Out to end this session.

Thank You.

Confirmation Number

You Completed Your Enrollment!

Now manage your benefits year-round by downloading the MyChoice Mobile App to your mobile device. Apple | Android

Once you have downloaded the App, activate your access code below to get access!

MyChoice Mobile App

- Quick access to benefit details
- Show your ID Card

[Download App](#)

[Home](#) [Logout](#)

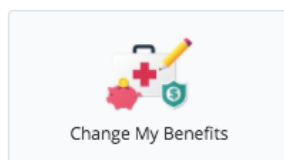
AFTER YOU ENROLL

To Do: Check for additional tasks needed to complete your enrollment.

Benefit Summary: View or print your current elections at any time.

Visit this site anytime you want to learn more about your benefits or make a change to your coverage (if you experience a Qualifying Change in Status).

How to Change Your Coverage



► LIFE EVENT
Examples:
Marriage/Divorce
Birth/Death

Marriage X

What date was the marriage?
02/28/2020
MM/DD/YYYY

Based on the date entered
• Any add or change in coverage will be effective on: 02/28/2020
• Any coverage dropped or no longer continued will be terminated on: 02/27/2020
• Show Plan Exceptions

Cancel Continue

Dependent Information X

Dependent Acknowledgement

Only qualified dependent(s) are eligible for coverage under our benefit plans. Enrolling someone who is not qualified as a dependent is considered insurance fraud. Eligible dependents are defined as:

- My spouse or domestic partner
- My children (biological, stepchildren, legally adopted children, children placed for adoption, children of enrolled domestic partners and children who you are legally appointed as guardian, regardless of their marital or student status) up until the end of the month in which they turn age 26

Who is NOT a qualified dependent?

- Parents
- Grandparents/relatives (aunts, uncles, or cousins)
- Brothers or sisters

Relationship *
Please Select One

First Name *

Suffix

Jr., Sr., III, etc.

Middle Initial

► WHEN CAN I MAKE CHANGES?

In 2023, you can make changes to certain benefits within **31 days** of a Qualifying Change in Status, such as a birth or marriage. Find detailed information in the Reference Center.

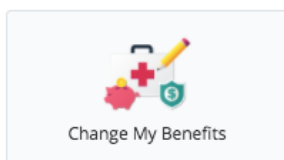
► MAKE BENEFIT CHANGES

Log in using your username and password.

Click the **Change My Benefits** button and choose the life event type that matches your situation.

Then, make the coverage change for that life event and approve your elections. If you are adding dependents to your coverage, you will need to provide each dependent's legal name, Social Security Number, and birth date.*

*You may be required to provide documentation to prove your relationship to each dependent.



► BASIC INFO
Examples:
Change of Address
Change of Beneficiary

Beneficiary Information X

Beneficiary Error Test
Please enter or update the following information.

Beneficiary Type
 Person Non-Person (Trust)

Relationship *
Please Select One

First Name *

Middle Name:

Last Name *

Social Security Number:
123-45-6789

Date of Birth:
MM/DD/YYYY

Address 1:

Address 2:

City:

State:
Please Select One

ZIP:

Home Phone:

Basic Life

Basic Life Beneficiaries

Please select the beneficiaries for the plans below. Click 'Add' to apply. Please make sure both primary and contingent beneficiaries equal 100%.

Name	Designation	Primary	Allocation
Jane Doe Wife	Primary	100 %	100%

Allocation Totals
Each allocation type must sum to 100%

← Add New Beneficiary

← Back Next →

► CHANGE YOUR BENEFICIARY

You can change your beneficiary (or beneficiaries) at any time.

Click the **Change My Benefits** button and choose **Change of Beneficiary** from the Basic Info menu.

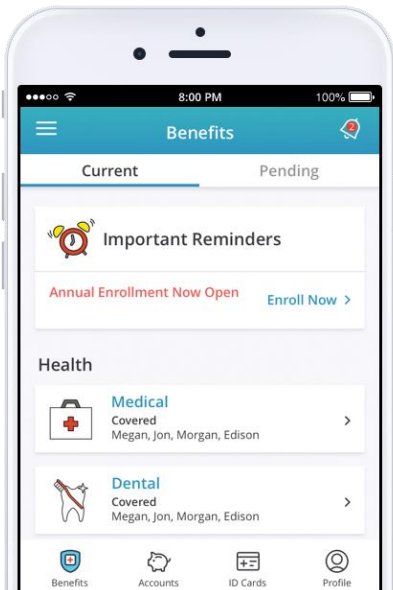
► OTHER CHANGES

In 2023, you can change a Health Savings Account contribution amount any time, as well as voluntary benefits coverage, and 401(k) contributions, if applicable.

Get the Mobile App

WHAT CAN I DO ON THE BUSINESSOLVER MYCHOICE® MOBILE APP?

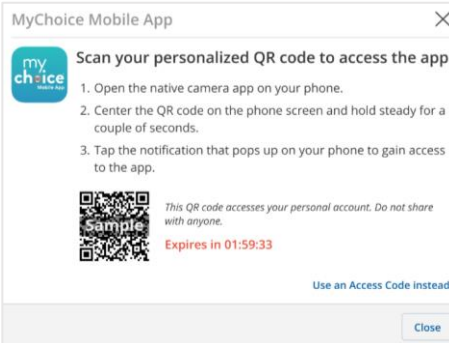
- Upload photos of your ID cards
- Check 2023 deductibles, co-pays, and access other important plan information
- Enroll or change your 2023 benefits and beneficiary (or beneficiaries)
- Chat with Sofia – she's available 24/7 to help answer your questions
- Contact a live member advocate on the phone, email, or live chat
- View your 2023 MyChoice Accounts activity and file claims



MyChoice Mobile App

Access your benefit details, store ID cards, and more! All at your fingertips.

[Access the App](#)



INSTALL THE APP

1. Log in to your benefits new Transformco 2023 Annual Enrollment portal via www.88Sears.com and find the **Businessolver MyChoice Mobile App** box.
2. Click the **Access the App** button. This will bring up a QR code.
3. Scan the QR code to download the app to your device.

If you have registered a username and password, you can also use those to sign into the app.

QUESTIONS ABOUT YOUR 2023 HEALTH BENEFITS?

Starting November 8, ask Sofia, your new virtual health benefits assistant, available 24/7 from the Transformco 2023 Annual Enrollment portal and Businessolver MyChoice Mobile App. You can also call the Transformco Benefits Center at 888-887-3277, select your language preference, and then select Opt. 1. Call hours are 7:00 a.m. – 7:00 p.m. Central time, Monday – Friday.

TRANSFORMCO