

# TELEPHONIC ENROLLMENT

CENTURY HEALTHCARE (CHC)

YOU WILL NEED THE FOLLOWING INFORMATION TO ENROLL INTO THE CENTURY HEALTHCARE GROUP LIMITED INDEMNITY BENEFIT PLANS:

- Employee:
  - ✓ Name
  - ✓ Date of Birth
  - ✓ Social Security Number
  - ✓ Address
  - ✓ Contact Phone Number
  - ✓ Date of Hire
  - ✓ Gender
  - ✓ Marital Status
- Beneficiary Designation:
  - ✓ Full Name (Primary & Contingent)
  - ✓ Social Security Number
  - ✓ Establish Percent of Benefit
  - ✓ Relationship of Beneficiary
- Dependent Spouse & Child(ren) up to age 26 are eligible to enroll:
  - ✓ Full Name
  - ✓ Date of Birth
  - ✓ Social Security Number
  - ✓ Gender

*Note: If you are enrolling a spouse or dependent child(ren) please be sure to include the information above. Enrollment may be delayed or coverage declined without it.*



## **Telephonic Enrollment Center**

Phone: (888) 232-9431

Hours: Monday - Friday

7 AM - 7 PM CST

Password: JOHNSON

## **Claims & Customer Service**

Phone: (877) 685-2432