

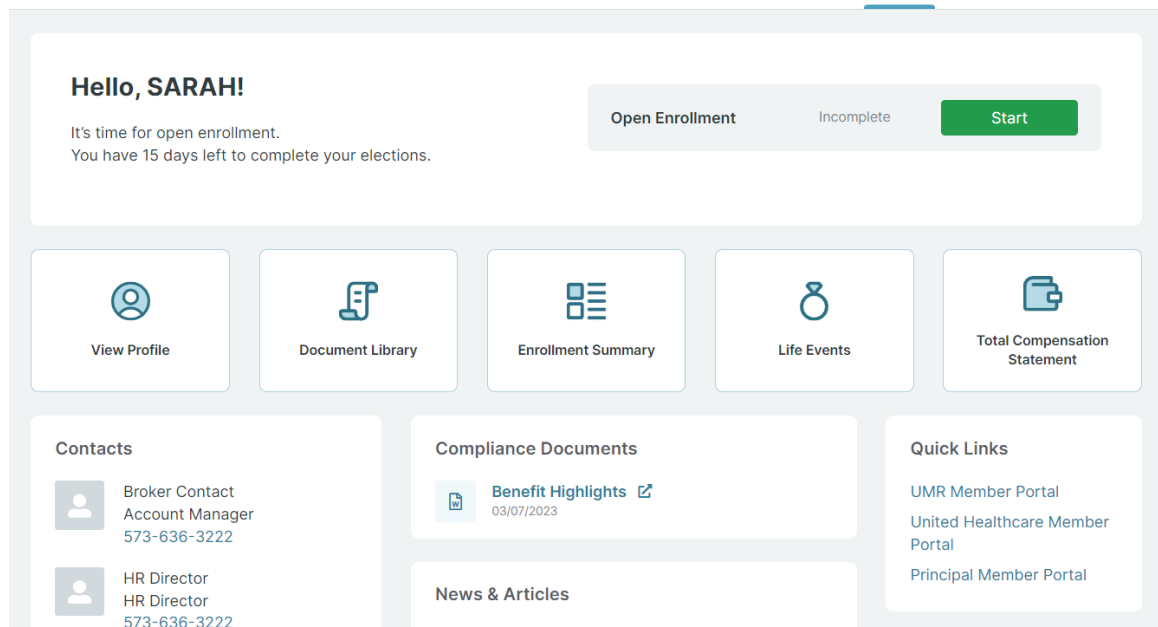
Registering/Enrolling on Employee Navigator

Kivi Bros Trucking has implemented a new benefit administration system called Employee Navigator. This system allows for employees to elect their new hire benefits as well as complete their annual open enrollment.

To access your employee portal go to www.employeenavigator.com Click login in the upper right-hand corner of the screen and then click Register as A New User. From there, you will be required to enter the following information.

- First Name
- Last Name
- Company Identifier: **KiviBros**
- PIN (Last 4 digits of you SSN)
- Birth Date

Once you have successfully registered and logged into your account, you will land on your homepage which will look similar to this:



At the top of your screen, you will see green start buttons for any tasks that you need to complete.

Once you click the links, the system will guide you through the enrollment process. The first several steps in the process, you will be asked to verify personal information. If any information needs updated, now is the time to do that.

The remaining steps will show the benefits offered to you by your employer. You will need to review each benefit and either enroll or decline the benefit.

Personal Information

First Name: SARAH

Middle Name:

Last Name: DEMO

Suffix: --Select--

Preferred Name:

Sex: Male Female

Gender Identity: Male Female Non-Binary

Date of Birth: 01/01/1970 Age: 54

SSN: ***-**-4123

Tobacco User: Yes No

Phone Number:

Work Email Address: jenny@wallstreetins.com

Personal Email Address:

Primary Email Type: Work

Progress: 0 of 10

View steps

- 1. Personal Information
- 2. Address
- 3. Dependent Information
- 4. Medical
- 5. Dental
- 6. Vision
- 7. Group Life
- 8. Group Long-Term Disability
- 9. Voluntary Life
- 10. Enrollment Summary

Save & Continue

The last step in the process will be the enrollment summary where you will review the benefits you've elected. Once you've reviewed your benefits you must click the Click to Sign button to submit your enrollment and receive benefits.

Enrollment Summary Print

Below is a summary of your elections and cost for the upcoming plan year. If you have any questions about your enrollment or would like to make changes, please contact HR.




Signature required
You've elected all your benefits, but we still require a signature before advancing.

Please review the acknowledgment below.

As an eligible employee, I acknowledge that I understand the benefits, rights, and obligations available to me under the plan. I certify the facts contained in this summary are true and complete to the best of my knowledge. I understand that deductions can be made on a pre-tax or post-tax basis. Furthermore, I understand that elections for plans that are deducted on a pre-tax basis cannot be changed during the plan year unless I experience a Qualified Life Event.

Sign to complete enrollment Click to Sign

Enrolled Plans

Medical		Collapse
	<p>2024 Medical</p> <p>Coverage: Employee Effective: 06/01/2024</p> <p>Cost Per Pay: \$75</p>	
<hr/>		
Dental		Collapse
	<p>2024 Dental</p> <p>Coverage: Employee Effective: 06/01/2024</p> <p>Cost Per Pay: \$0</p>	
<hr/>		
Group Life		Collapse
	<p>2024 Basic Life</p> <p>Coverage: Employee Effective: 06/01/2024</p> <p>Cost Per Pay: \$0 Benefit: \$25,000</p>	
<hr/>		
Group Long-Term Disability		Collapse

Progress: 10 of 11

View steps