

# eService Election Form

## Standard-Accounting

Once a customer of Principal Life, you have access to our premier **online Principal Employee Benefits Service Center<sup>SM</sup>** where you can manage your group insurance\* benefits **24/7** at no extra cost to you.

### OUR eSERVICE OFFERING INCLUDES:

- Access to **temporary ID cards** and the ability to **order new ones online**
- Access to a comprehensive library of **forms** including claims forms, enrollment forms & statements of health
- Ability to **add new members** and **make member changes**
- Ability to order a **preliminary bill** to see how changes made to your account will impact premium due
- Access to detailed **billing statements**
- Access to **online booklets and policies**
- Plus more!

### WOULD YOU LIKE TO MAKE YOUR MEMBER ADDS, CHANGES AND TERMINATIONS ONLINE?

#### YES

- No more paper forms to send into Principal Life
- Manage your benefits at the time most convenient to you
- Track all changes made in the Activity Ledger (transaction history is kept indefinitely)

#### NO

### WOULD YOU LIKE TO ACCESS YOUR BOOKLETS/POLICIES ONLINE?

#### YES

- Online booklets are available to employees up to three weeks faster than printed copies
- Online booklets are updated more frequently than paper
- Options for distributing booklets to employees include:
  - E-mail booklets directly to them
  - Employees can access at the personal login at [www.principal.com](http://www.principal.com)
  - Post to your company intranet site
  - Store a paper copy in human resources for employees to review
  - Print black/white copies

#### NO

YOU CAN ACCESS ALL OTHER eSERVICE OPTIONS AT [WWW.PRINCIPAL.COM](http://WWW.PRINCIPAL.COM) WITH JUST A PIN.

**NOTE: A Principal Life representative will call you** when your group's records are available online. At that time you will get your PIN to access the Web site. You will be prompted to accept a legal agreement(s) upon your first login to the online Principal Employee Benefits Service Center. This form does not represent a signed legal agreement.

Name of Company: \_\_\_\_\_ Account number: \_\_\_\_\_

Plan Administrator's Name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

\*Not available for Group Universal Life Insurance.

WE'LL GIVE YOU AN EDGE<sup>SM</sup>

