

MyCIGNAforHealth.com

First Time Users: When logging into the website click the **Register Now!** link on the right side of the screen. You will then see a registration form like the one displayed below.

The image shows a browser window displaying the registration page for MyGreatWest.com. The browser's address bar shows the URL. The page has a navigation menu on the left with categories like 'Employees & Members', 'Plan Administrators', 'Compare Plan Costs', 'Flexible Spending Account Tools', and 'Help'. The main content area is titled 'Register for MyGreatWest.com' and contains instructions and a form. A yellow callout box on the right explains that registration is easy and lists the 'RxBIN' number (600428) to be entered. A red callout box on the left lists the next steps: populating the Member ID field, first and last name fields, date of birth field, and email address field. The form itself has several fields: 'Group plan or policy number', 'Member ID for primary member', 'Your FIRST name', 'Your LAST name', 'Your date of birth' (with dropdowns for month and day, and a text box for year), and 'Email address'. Each field has a blue arrow icon to its right. The form also includes explanatory text for the plan/policy number and name fields.

Registration Is Easy

Use your membership ID card and locate:

- The "RxBIN" number, 600428. Input that number into the Policy Plan or Group Number field

Next Steps

- Populate the Member ID field
- Populate First name and Last name fields
- Populate Date of birth field
- Populate Email address field

Register for MyGreatWest.com

To complete the registration form, you will need your confirmation materials listing your group plan or policy number and an e-mail address.

If the member name is incorrect on your ID card, please contact your employer at the front of the card to update your record before you register.

All fields are required.

Member Information

Group plan or policy number:

Your plan / policy number is located on your member ID card or enrollment materials. Please include leading 0s (e.g. 000123).

Member ID for primary member:

The primary member is the member whose employer provides this health coverage.

Your FIRST name:

Enter your first name exactly as it appears on your ID card or enrollment materials, including capital letters, spaces or hyphens.

Your LAST name:

Enter your last name exactly as it appears on your ID card or enrollment materials, including capital letters, spaces or hyphens.

Your date of birth:

Select the month and day and enter the 4-digit year (for example, 1965).

Email address:

To access MyGreatWest.com, you must provide an e-mail address. Your E-mail is not shared with other parties and is only used for important communications about this site.