BEST CLife

1 Go to **www.bestlife.com**

Member Online Access and Print Temporary ID Card



3 Click top right "Member Login"



Select "No account yet click here to create an account"

| Please Login |
|----------------------------------|
| Username |
| Username |
| Password |
| Password |
| Log in |
| Forgot your Usemame or Password? |
| |

5 Fill out the New Account form and click **"Verify Membership"**

| BEST Life Web Access Portal Your Connection to your health benefits administrator |
|--|
| Create New Account |
| First Name |
| First Name |
| Last Name |
| Last Name |
| Date of Birth |
| Date of Birth |
| Member Id |
| Member Id |
| E-mail address |
| E-mail address |

- 6 Enter Username and Passwords
 - In Setup New Username And Password

 In Employee Plan DENI/US
 Rec Employee Plan DENI/US
 Rec passeoid
 Contine new passeoid
 Energy
 Energy
- 7 You can verify benefits, print ID cards, etc.

| Dental Insurance Member Identification | 1 | | | |
|--|-------------------------------|-----------------|--------------------------------|---|
| Member Name: | Member Portal | Health Timeline | • | Coverage Summary |
| Member D. Effective Date: 01/01/2016 | Overview | 03/03/2017 | Visit to Dental Corp (proding) | ✓ Dental: Best Life Employee Plan DEN/VIS |
| To find a deniat Go online at http://www.bestlife.com/Provider.html | Eligibility Summary Claims | 03/03/2017 | Visit to Dental Corp (sensing) | ✓ Dental: Division 9 |
| NOTE TO THE DENTIST: | Preauthorizations | 08/03/2016 | Visit to Dental Corp | Vision: Best Life Employee Plan |
| Pre-determination: Any course of treatment estimated to reported to the company for review prior to the treatment dental claim form listing the procedure contemplated an Insurance Company for neview before any work commen | Find a Dentist | 08/03/2016 | Visit to Dental Corp | DEN/VIS |
| Mail all claims to: REST Life and Health Insurance Company | Report Dise Summer | 08/03/2016 | Visit to Dental Corp | Vision: Division 9 |
| P.O. Box 890 Meridian, ID R3280-0800 1-800-433-0088 | FAQ | | | Member ID Card |
| ELECTRONIC CLAIMS PAYER ID 95604 | | | | |
| | WEB ACCESS | | | Mey ID Card |

BEST Life

Member Online Access and Print Temporary ID Card

8 To print ID card.

Select "View ID Card"

| ST Life and Health Insurance Company | | | | | | |
|--------------------------------------|-----------------|--------------------------------------|--|--|--|--|
| Member Portal | Health Timeline | | | Coverage Summary | | |
| Overview | 12/05/2017 | Visit to 20/20 Vision Optometry, Inc | | Dental: Best Life Employee Plan DEN/VIS | | |
| Eligibility Summary | | View Dental Policy | | | | |
| Claims Preauthorizations | 10/202017 | | | Vision: Best Life Employee Plan DEMA(S) | | |
| | 04/12/2017 | Visit to Joseph L O'connor Dds | | View Vision Policy | | |
| The a Densi | 09/28/2016 | Visit to Joseph L O'connor Dds | | | | |
| Benefit Plan Summary | 06/16/2016 | Visit to Brittany To, Od, Apc | | Member ID Card | | |
| FAQ | | | | | | |
| WEB ACCESS | | | | View ID Card | | |
| POWERED BY DATAGENER | | | | N | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

9 Click **"Print"** to print your temporary ID card.



If you have questions please contact our Customer Service Department at cs@bestlife.com or call 800.433.0088.