

BenefitBridge Enrollment Instructions

How you use BenefitBridge depends on your enrollment path:

PATH 1 (Keeping current coverage, no changes): Use Quick Upload

PATH 2 (New enrollee or making changes): Use Full Enrollment Process

QUICK UPLOAD (Keeping Current Coverage)

If you're keeping your current coverage with no changes:

Step 1: Access BenefitBridge

Go to: www.benefitbridge.com/peralta

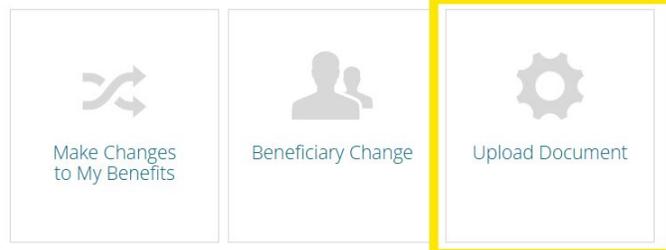
- **First-time users:** Create account with your Peralta email
- **Returning users:** Log in with existing credentials
- **Forgot password?** Click 'Forgot username/Password?'

Step 2: Click “Upload a Document”



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Step 3: Upload your completed Eligibility Affidavit/Enrollment Form

When you click the Upload Document button, the description will automatically populate.

Note: Once you click on Add a Document, the top options will reset because the system registers the document as ready for the next step: Submit.

UPLOAD DOCUMENTS

Please select the document to upload ?

2026 Spring PT Faculty - Eligibility Affidavit_Enrollment Form.pdf.

Please provide the description of the document

2026 Spring PT Faculty - Eligibility Affidavit_Enrollment Form.pdf

Please select the document type

OTHER

APPLIES TO	RELATION	SELECT
	EMPLOYEE	<input checked="" type="radio"/>

*Note: Please add document to employee record if a dependent is not shown on the list.

Cancel

Screen after clicking on "Add Document":

Add Document Cancel

FILE NAME	DESCRIPTION	ACTION
2026 Spring PT Faculty - Eligibility Affidavit_Enrollment Form.pdf	2026 Spring PT Faculty - Eligibility Affidavit_Enrollment Form.pdf	DELETE

Submit

FULL ENROLLMENT PROCESS

(New Enrollees or Making Changes) If you are enrolling for the first time OR changing coverage/ adding or removing dependents, follow these steps:

Before You Begin - Have These Ready:

- Eligibility Affidavit/Enrollment Form
- Other Benefits Acknowledgement Form
- Campus Solutions Workload Screenshot (Spring 2026, Term 1262)
- Dependent Documentation

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 Make Changes to My Benefits	 Beneficiary Change	 Upload Document
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Step 2: Specify Your Life Event

Click 'Make Changes to My Benefits' and enter the following:

Life Event Type:	Select 'Other'
Life Event Date:	Enter: February 8, 2026
Description:	Type: PT Faculty Spring 2026 OE

SPECIFY YOUR LIFE EVENT

** Indicates required fields*

*1. Which Life Event applies to your situation?

- Administrative Correction
- Birth / Adoption
- Death
- Deceased
- Dependent Gain / Loss of Coverage due to Employment Change
- Dependent Loss of Coverage
- Dependent Permanently Disabled
- Divorce / Dissolution / Annulment / Separation
- Domestic Partnership
- Employee Position Change
- Flexible Spending Account
- Gain / Loss of Eligibility for Medicaid or MinnesotaCare
- Ineligible Dependent
- IRS Dependent Status
- Legal Separation or Divorce
- Life Insurance upgrade only
- Loss of Dependent Child Status
- Loss of Eligibility for Employer-Sponsored Coverage
- Marriage
- Other
- Medicare Eligible Life Event
- New Hire
- Promotion
- Retiree - District Pay Ends
- Spouse Gains/Loses Coverage

*2. What was the date of your Life Event?

*3. Please describe your Life Event

4. Please provide documentation of your Life Event. 

[Instructions to Add Documents](#)

Note: 2/8/26 is the standard life event date for the Spring 2026 Part-time Faculty Open Enrollment.

Step 3: Upload Required Documents

Click 'Upload Document' and upload each of the following:

- 1. Eligibility Affidavit/Enrollment Form
- 2. Other Benefits Acknowledgement Form
- 3. Campus Solutions Workload Screenshot
- 4. Dependent Documentation (if applicable)

How to Get Your Campus Solutions Workload Screenshot:

- 1. Log in to Campus Solutions
- 2. Navigate to: Term Workload
- 3. Select: Spring 2026 (Term 1262)
- 4. Save or screenshot the page showing your 'Total Term FTE%'
- 5. Upload this screenshot to BenefitBridge

Step 4: Make Your Benefit Selections

Review plan options and select your coverage:

- **Medical:** Choose Kaiser, Anthem PPO 100-A, or Anthem PPO 80-E
- **Coverage Tier:** Employee Only, Employee + 1, or Employee + 2 or More
- **Dental (Optional):** Choose Delta Dental PPO or UHC DHMO
- **Vision:** Included automatically with your medical plan

Step 5: Review and Submit

Before submitting, verify the following:

- All required documents uploaded
- Plan selections are correct
- Coverage tier matches your needs
- Dependents are correctly listed (if applicable)
- Click 'Submit' to complete enrollment