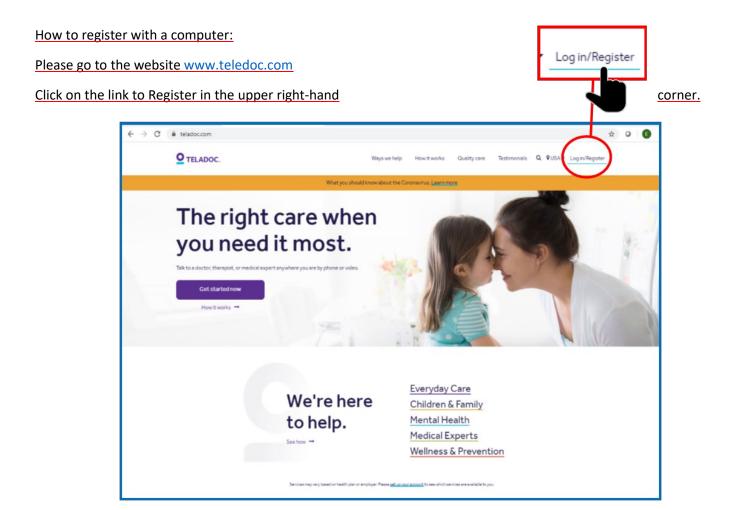
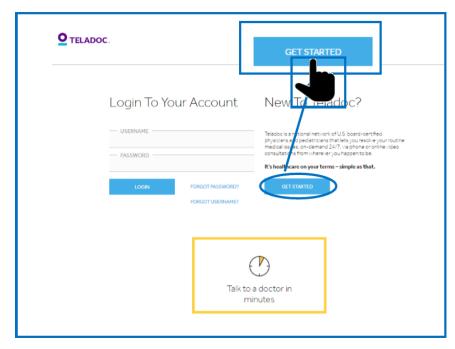
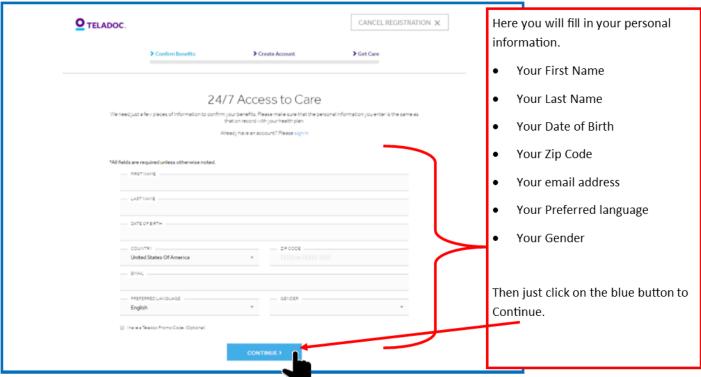
Welcome to Teladoc! Access your health benefits from the privacy and comfort of your own home!

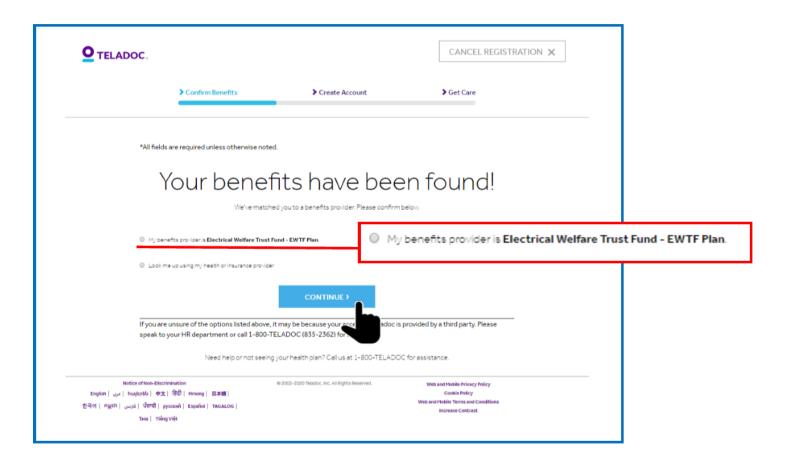


Since you are New to Teledoc please click on Get Started on the right side.





Select Your Benefit Provider: Electrical Welfare Trust Find – EWTF Plan. Then just click the blue button to Continue.



Confirm Benefits	> Create Account	Get Care
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Finish creating your account

nter Your Home Address		You are almost done!	
STREET ADDRESS		Here Most of your information has pre-populated.	
12345 ANYWHERE ST.			
STREET ADDRESS 2 (OPTIONAL)			
CITY		You can make changes to the	
LANHAM		information if needed.	
COUNTRY			
United States Of America		*	
STATE	ZIPCODE	You will then need to create a	
Maryland #	20706	username and password.	
PREFERRED PHONE NUMBER	☐ Hearing Impared (Relay Required)	If red boxes appear click on the	
(301) 731-1050	III Pleasing Impared (new y nequired)		
EMAIL ADDRESS		field again. If red boxes are still	
info@ewtf.org		there after clicking into the field	
GENDER	PREFERRED LANGUAGE	you will need to follow the	
Male *	English	prompts to pick another	
reate Your Username & Password USERNAME		username or password.	
		Last choose and answer 3	
PASSWORD			
USERNAME		Last choose and answer 3 security questions.	
USERNAME PASSWORD		Last choose and answer 3	
USERNAME PASSWORD CONFIRM PASSWORD ur password must follow the guidelines below 10-20 characters long Contain at least one number and at least one letter		Last choose and answer 3 security questions. Then just click on the blue button to Complete	
PASSWORD CONFIRM PASSWORD ur password must follow the guidelines below 10-20 crarectors ong		Last choose and answer 3 security questions. Then just click on the blue	
USERNAME PASSWORD CONFIRM PASSWORD ur password must follow the guidelines below 10-20 characters long Contain at least one number and at least one letter Use only numbers, letters, and standard symbols are limited to 1 (8)	SECURITY ANSWER 1	Last choose and answer 3 security questions. Then just click on the blue button to Complete	
USERNAME PASSWORD CONFIRM PASSWORD ur password must follow the guidelines below 10-20 cnarecters long Contain at least one number and at least one letter Use only numbers, letters, and standard symbols (standard symbols are limited to 1 @) Cannot contain the words "password", "Teladoc" or your username SECURITY QUESTION 1	SECURITY ANSWER 1 SECURITY ANSWER 2	Last choose and answer 3 security questions. Then just click on the blue button to Complete	
USERNAME PASSWORD CONFIRM PASSWORD ur password must follow the guidelines below 10-20 characters long Contain at least one number and at least one letter Use only numbers letters and standard symbols standard symbols are limited to 1@ Cannot contain the words "password". "Peladoc" or your username SECURITY QUESTION 1		Last choose and answer 3 security questions. Then just click on the blue button to Complete	

You are all set! You can complete your Medical History for yourself and dependents under the age of 17. All dependents over the age of 17 (including spouses) will need to set up their own Teladoc Account. You are now able to see a doctor from the comfort and privacy of your own home!

