

Open Enrollment Period 2013

Changes accepted from April 22 – June 14 noon

The insurance selections you make during this Open Enrollment Period will be in effect from July 1, 2013 to June 30, 2014.

Understanding your benefit options requires effort on your part. You need to review your benefit coverage and make the choices that best fit your needs for the next policy year. This is the time to *reinstate any waived coverage, add dependents, update student status or change from one type of plan to another* (such as change from the Traditional to the new Smart Choice Plan with HSA or Dental PPO to DHMO or vice versa).

If you want to add a *non-student dependent*, some additional information will be required. Insurance for Full-time students is subsidized by the City. For a non-student dependent, 100% of the coverage is borne by the employee and could be taxable.

If you do **NOT** need to make any changes to you or your family's medical, vision or dental insurance coverage, please check the appropriate boxes, print your name, sign & date below then return this to Human Resources on or before June 15th at noon. If changes are needed, you will need to indicate those changes here and on the appropriate enrollment form as well. If you are signing up for the added benefits available through the Smart Choice Plan, you will need to complete the HSA Eligibility Verification Form as well.

PLEASE CHECK ALL THAT APPLY

HEALTH – United Health Care

	Sign me up for the <i>new</i> SMART CHOICE PLAN (QHDHP)
	I elected the Smart Choice Plan above – Open a HEALTH SAVINGS ACCOUNT for me – <i>attach an HSA acknowledgment form</i>
	I want to remain on the TRADITIONAL HEALTH PLAN
	I DO want to <u>add or remove dependents</u> on the medical policy – <i>attach enrollment form</i>
	I DO wish to update my Medical/Child Care FSA contribution: Medical \$ _____ per pay eff. 7/1/13 Child Care: \$ _____ per pay eff. 7/1/13
	I DO NOT need to add or remove any dependents or from the medical insurance plan.

DENTAL / VISION – Guardian PPO or DHMO / VSP through Guardian

	I DO want to make changes (switch dental plans &/or add/remove dependents) to the vision &/or dental insurance policy – <i>attach enrollment form</i>
	I DO NOT want to switch dental plans or need to add or remove any dependents on the vision insurance plan.

Printed Name

Signature

Date

Please return to Human Resources on or before June 14th, 2013