



# Insurance Enrollment Options

Name: \_\_\_\_\_ Employee ID: \_\_\_\_\_

**I am electing the following coverage effective 7/1/2009:**

### Medical Base

- Blue Cross Blue Shield Base Employee Only Coverage **(No Cost to Employee)**
- Blue Cross Blue Shield Base Family Coverage (\$225.34/pay period, \$450.68 per month)

### Medical Buy-Up

- Blue Cross Buy Up Single Coverage (\$12.74/pay period, \$25.48 per month)
- Blue Cross Buy Up Family Coverage (\$245.04/pay period, \$490.08 per month)

### Medical High Deductible Health Plan (HDHP)

- Blue Cross HDHP Single coverage **(No Cost to Employee) \***
  - Blue Cross HDHP Family coverage (\$184.79/pay period, \$369.58 per month) \*
- \*Employees who elect the HDHP will receive a monthly **employer contribution** of \$44.12 to their HSA/HCFSAs. See details below.

### Health Savings Account and Flexible Spending Account Options FOR EMPLOYEES ELECTING HDHP MEDICAL COVERAGE

I have elected to participate in the Blue Cross Blue Shield HDHP plan and want the \$44.12 monthly **EMPLOYER CONTRIBUTION** to go into the following account effective 7/1/2009:

- Health Savings Account (HSA) (\$22.06 per pay period, \$44.12 per month)
- Health Care Flexible Spending Account (HCFSAs) \* (\$22.06 per pay period, \$44.12 per month)  
This is an unlimited account and can not be elected with an HSA.

Additionally, I am electing to contribute **MY MONEY** into the following account(s) via payroll deduction effective July 1, 2009 (Maximum contributions are: **HSA**-HDHP plan deductible minus employer contribution. **HCFSAs**\* \$3000. **DCFSAs** \$5000

- Health Savings Account (HSA) \$\_\_\_\_\_ per pay period
- Health Care Flexible Spending Account (HCFSAs\*-will be limited if you are participating in an HSA) \$\_\_\_\_\_ per pay period
- Dependent Care Flexible Spending Account (DCFSAs\*) \$\_\_\_\_\_ per pay period

\* FSA Accounts cover expenses incurred between start of coverage and 6/30/10 only.  
\*\* Federal Annual DCFSAs maximum is \$5000.

### Flexible Spending Account Options FOR EMPLOYEES ELECTING BASE/BUY-UP COVERAGE

I have elected to participate in the Blue Cross Blue Shield base or buy-up plan. I am electing to contribute **MY MONEY** into the following account(s) via payroll deduction effective July 1, 2009 (Maximum contributions are: **HCFSAs**\* \$3000. **DCFSAs** \$5000

- Health Care Flexible Spending Account (HCFSAs) \$\_\_\_\_\_ per pay period
- Dependent Care Flexible Spending Account (DCFSAs\*) \$\_\_\_\_\_ per pay period

\* FSA Accounts cover expenses incurred between 7/1/09 and 6/30/10 only.  
\*\* Federal Annual DCFSAs maximum is \$5000.

