

Open Enrollment Benefit Election Form

Plan Year 9/1/2020 – 08/31/2021



Please print below:

Employee Name:

Employee Elections: Please place a check mark in the applicable boxes. Contributions for medical, vision and dental are per bi-weekly pay period and are taken out of your paycheck with pre-tax dollars.

BCN Medical & BCBSM Vision Insurance	<input checked="" type="checkbox"/>	Cost per (26) Pay Periods
Cost per (26 Pay Periods)		
Employee		\$31.11
Employee + 1		\$85.99
Employee + 1 SSDI/Medicare Dep. *		\$85.99
Family		\$107.79
Family + 1 SSDI/Medicare Dep. *		\$107.79
Waive coverage		-\$75.00 **
* Social Security Disability Insurance (There are very few employees whom this will apply. Please check with Krista Cierpial before selecting one of these options)		
**To be eligible for the \$75.00 per month waiver bonus, employees must show proof of coverage elsewhere. The waiver is paid on the last pay period of each month.		

Mutual of Omaha Dental Insurance	<input checked="" type="checkbox"/>	PPO Core (Low) Cost per (26) Pay Periods	<input checked="" type="checkbox"/>	PPO Buy-Up (High) Cost per (26) Pay Periods
Cost per (26 Pay Periods)				
Employee		\$0.00		\$ 7.14
Employee + 1		\$0.00		\$12.35
Family		\$0.00		\$20.65
Waive coverage				

Please answer the below questions	No	Yes	
Are you or any of your dependents currently eligible for Medicare, or will you be eligible for Medicare in the next 12 months?			If yes, who?
Are any of your dependents whom you are electing medical insurance for currently covered under Social Security Disability?			If yes, who?
If you are waiving coverage, are you waiving due to cost?			
If you are waiving coverage, are you waiving due to coverage elsewhere (such as a spouse or family member's plan)?			
If you answer yes to any of the following questions below, it may be necessary for you to complete additional paperwork. Please contact Krista Cierpial for assistance in ensuring the proper paperwork is completed on a timely basis.			

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	Yes	No	
Are you currently not enrolled and are now enrolling into the medical plan due to open enrollment?			If yes, who?
Are you currently enrolled and would like to add or remove a dependent onto/from the medical plan ?			If yes, who?
Are you currently not enrolled and are now enrolling into the dental plan due to open enrollment?			If yes, who?
Are you currently enrolled and would like to add or remove a dependent onto/from the dental plan ?			If yes, who?
Are you currently enrolled in dental and would like to switch from one plan to the other?			

If adding a dependent spouse or child to any of the medical or dental programs, please note that Gleaners may require that you submit proof of relationship (i.e. birth certificate / marriage license).

If making changes to your existing elections (including adding / removing dependents or electing / changing coverages (i.e. switching dental plans or enrolling in optional life) – an additional form may be required.

Authorization / Waiver

I have received, read and understand the explanation regarding my option to participate under the Gleaners Community Food Bank Benefit Programs. If I have declined to participate in the medical/vision and/or dental programs, I understand that I may not re-enter the plan, except at open enrollment (September 2020) unless I have a change in family status (e.g., marriage, divorce, death of a spouse/dependent, birth/adoption of a child, or a change in my spouse's employment status). If electing benefit, I authorize the company to redirect my salary on a pre-tax basis for insurance contributions. I understand that by participating in the insurance plan, my Social Security benefits may be affected because the contributions will be deducted before my salary is taxed. I understand that the benefit option that I have chosen will remain in force for the remainder of the plan year and may only be changed at the next open enrollment (September 2020), unless I have a change in family status.

Employee Signature: _____ Date: _____

**PLEASE NOTE THAT ALL FORMS MUST BE RETURNED TO KRISTA CIERPIAL BY
WEDNESDAY, AUGUST 26, 2020**