



OPEN ENROLLMENT & FORMS OVERVIEW

OPEN ENROLLMENT NOTICE

Distribute *Open Enrollment Notices* to all eligible employees prior to the beginning of the Open Enrollment Period. **Employees will not be able to make changes after the Open Enrollment Period is over.**

OPEN ENROLLMENT FLYER

****Note:** Post the *Open Enrollment Flyer* in a prominent place where all staff can view it. You may make copies and post them in several locations, such as the teacher's lounge, a break room, or a bulletin board.

EMPLOYEE BENEFIT ELECTION FORM

Members who only want to make benefit changes (e.g., change from a Basic Plan to an RM Plan, or add Dental and Vision coverage) should be provided an *Employee Benefit Election Form*. ****Note:** This form should only be used during the Open Enrollment Period and is not required for new employees.

MUST ENROLLMENT FORM

Current MUST members are NOT required to annually complete the MUST enrollment form. Eligible employees not currently covered who would like to request coverage are required to complete the MUST enrollment form. Those employees waiving coverage should fill out the MUST waiver form. ****Note:** Whether the member chooses to elect voluntary life (when the school offers) or not, please use the enrollment form with voluntary life. There is an option at the bottom of the voluntary life form that allows the employee to waive voluntary life (if applicable). This will allow your MUST team to process any submitted forms as smoothly and as quickly as possible.

IMPAIRED DEPENDENT FORM

Dependent children are eligible for coverage up to age 26 regardless of student or marital status. Impaired dependents over age 26 may be eligible for coverage with completion of *Impaired Dependent Form*.

MUST CHANGE FORM

Use this form for employees and retirees who wish to make enrollment changes, such as address change, add or drop.

MUST WAIVER FORM

Use this form for employees who elect to waive coverage at initial hiring and benefit offering. For groups that have voluntary life, please use the Waiver Form (with Voluntary Life). Employees covered as a dependent under a policy held by an employee of the same school district are eligible for all Life and Long Term Disability (LTD) benefits offered by the group. If your group offers Employer Paid Life and Employer Voluntary LTD, employees who waived coverages are eligible for these policies. All employees who are waiving benefits are required to complete a *MUST Waiver Form*. If they are eligible for life benefits, they need to designate their beneficiaries.

TERMINATION NOTICE

This form is used to terminate coverage for individuals who have left employment, and are no longer eligible for benefits. To drop a dependent's coverage or to drop retiree coverage, please use a *MUST Change Form*.

DOMESTIC PARTNER FORM

Use this form to establish the eligibility of a domestic partner at initial enrollment or during the Open Enrollment Period. This is not a *Special Enrollment Event*.

COMMON-LAW MARRIAGE AFFIDAVIT

Use this form to establish the eligibility of a common-law spouse at initial enrollment or during the Open Enrollment Period.

EVIDENCE OF INSURABILITY FORM

A new employee may elect up to the lesser of \$500,000 or 4X annual salary in \$10,000 increments. ****Note:** Up to \$100,000 is available without Evidence of Insurability (Guaranteed Issue) when elected during Initial Enrollment. Amounts over \$100,000 will require Evidence of Insurability which will be provided to the member by MUST.

For existing employees requesting Voluntary Employee-Paid Life coverage outside of Initial Enrollment, Evidence of Insurability is required. MUST will provide a required *Evidence of Insurability Form* to the member requesting coverage.