

The WVURC is an AA/EEO/Minorities/Females/Vet/Disability/E-verify compliant employer.

Health Benefits Election Form: Health Savings Accounts

WVU Research Corp is offering you a choice of health plans, including a Qualified High Deductible Plan (QHDP) coupled with a Health Savings Account (HSA). Please make your selection below by checking the appropriate box matching plan and rate. If you do not wish to participate in any of the offered plans, please check the box marked "Waive" prior to signing and return the form to Human Resources.

Employee	Name				
Employee	Social Security Number		<u> </u>		
140	-				
Coverage	e Type and Premium Selection	n			
I choose t	he following coverage type and	l premium ded	uction:		
		Coverage Type			
		Employee (Employee Only		
		Employee+ One			
		Employee+	Employee+ Family		
D1	1 4 1 1 20 1 42	11: 1: A	. 1 1	· .c	
	•		•		t participating for a full 12 months.
Enter Anı	nual Election Amount & Numb	er of Pays, Hi	t Enter and the a	mount p	er paycheck will automatically caluclate
\$ [A	nnual Election Amount] ÷ [N	umbers of Pay	$[\mathbf{s}] = \mathbf{S} [\mathbf{Amount}]$	Per Pay	/check]
\$					
Employee Signature:				Date: _	
	-				
*Numbers	s of deductions if HSA Starts Ir	1			
January	22 Deductions	July	10 Deductions		
February	20 Deductions	August	8 Deductions		
March	18 Deductions	September	6 Deductions		
April	16 Deductions	October	4 Deductions		
May	14 Deductions	November	2 Deductions		
June	12 Deductions	December	24 Deductions		