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# HAMPTON BOARD OF EDUCATION

It is important to know that you can change your benefit plan and your level of coverage only during the annual open enrollment period. The only time outside of the open enrollment period that allows you to change your level of coverage for health benefits (within your selected plan) is when: you get married or divorced, your spouse or dependent dies, upon the birth or adoption of your child; if your spouse loses or obtains a job; or you or your spouse take an unpaid leave of absence. You may also change your coverage if you or your spouse changes from full-time to part-time employment or vice versa.

I agree to have my gross salary reduced in accordance with Section 125 of the Internal Revenue Code. These monies will be used to cover my contribution toward the benefits listed below. This agreement will remain in effect until my employment terminates, a qualifying change occurs, my benefits change at the beginning of a new plan year, or my employer terminates, suspends or modifies the plan.

## MEDICAL ELECTION FORM PRE-TAX PAYROLL AUTHORIZATION

- I elect to have my share of my group Medical Insurance premiums deducted on a “pre-tax” basis. I understand that this election will adversely affect my Social Security and Social Security-related benefits.
- I **do not** elect to have my share of my group Medical Insurance premiums deducted on a “pre-tax” basis.

Signature: \_\_\_\_\_

## DENTAL ELECTION FORM PRE-TAX PAYROLL AUTHORIZATION

- I elect to have my share of my group Dental Insurance premiums deducted on a “pre-tax” basis. I understand that this election will adversely affect my Social Security and Social Security-related benefits.
- I **do not** elect to have my share of my group Dental Insurance premiums deducted on a “pre-tax” basis.

Signature: \_\_\_\_\_