

MOUNTAINEERS GO FIRST.

As a benefits-eligible employee, WVU Benefits Administration Holds your health and well-being in high regard so you can go above and beyond to reach your goals. WVU offers a comprehensive employee benefits package with a variety of options which you can tailor to meet your needs. To help ensure that your benefits are set up accurately, follow the instructions and turn in all forms promptly within the designated time frames. The required forms in this packet are due *prior to your first day of employment*.

OVERVIEW:

WVU pays the full cost for:

- Basic Life Insurance
- Sick and Annual Leave - *eligibility guidelines apply*
- Approved University-Designated Holidays

WVU shares the cost of these benefits with you:

- Health Coverage
- 401(a) Retirement Plan - enrollment mandated by West Virginia
- Retiree Health Coverage - *eligibility guidelines apply*

You may also choose to enroll in several voluntary benefits for which the employee will pay the full cost for:

- Dental
- Vision
- Hearing
- Hyatt Group Legal
- Flexible Spending Accounts
- Health Savings Accounts
- Supplemental Retirement Plans: 403(b), 457(b), and Roth 403(b)
- Optional and/ or Dependent life insurance
- Short, Long and/or Extended long-term disability
- Accident Insurance
- Critical Illness
- Hospital Indemnity
- Universal Life
- Identity Theft
- Pet Insurance

MEDICAL BENEFITS

West Virginia University offers [Insurance Plans](#) such as health, dental, vision, and hearing plans.

RETIREMENT PROGRAMS

401(a) is a defined contribution plan in which benefits-eligible employees are required to contribute 6% of their gross pay into a 401(a) Defined Contribution Plan which will be matched by an additional 6% provided by the University. Both the employee and employer contributions are fully vested. Contribution amounts are subject to IRS limits. Supplemental 403(b), 457(b), and Roth 403(b) Plans allow a benefits-eligible employees to supplement their retirement savings with the advantages of tax-deferral and payroll deduction. [Contributions](#) are limited to a maximum determined each year by the Internal Revenue Service.

Summary for Benefits

FLEXIBLE SPENDING and HEALTH SAVINGS

[The Medical Flexible Spending Account \(FSA\)](#) is used to pay for eligible medical expenses which aren't covered by your insurance or other plan. Your full annual contribution amount is available at the beginning of the plan year (July 1) and the maximum amount is \$2,550 and must be used during the benefit year with a grace period for incurred expense submissions.

[The Dependent Care FSA](#) is a great way to pay for eligible dependent care expenses such as after school care, baby-sitting fees, elder care services, nursery and preschool. The maximum amount depends on your tax filing status and must be used during the benefit year with no grace period. This savings account does not cover tuition fees.

[A Health Savings Account \(HSA\)](#) is a tax-free account that can be used to pay health care expenses. Unlike a Flexible Spending Account (FSA), the funds do not have to be spent in the plan year they are deposited. The maximum amount depends on your tax filing status. This account is only eligible with PEIA Plan C Health Insurance.

[Limited-use Medical Flexible FSA](#) is designed specifically for employees who wish to take advantage of a Health Savings Account (HSA) while continuing to enjoy the tax savings expected from an FSA. However, the funds in a Limited-Use Medical FSA can only be used for dental, vision, and preventive care expenses not covered by your high deductible health plan. This account is only eligible with PEIA Plan C Health Insurance.

LIFE INSURANCE

[Basic Life Insurance](#) premiums for active employees are paid by WVU and coverage amounts are based on age. [Optional Life Insurance](#) for benefits-eligible employees is guaranteed up to \$100,000 without evidence of insurability if enrolled during optional deadline period. Additional options are available.

[Dependent Life Insurance](#) is also offered and may require evidence of insurability.

ACCIDENT INSURANCE

[Accident Insurance](#) is available for purchase through convenient payroll deductions. Employees choose the coverage limits and amounts in multiples of \$10,000 up to \$350,000. Amounts above \$250,000 cannot exceed 10 times an employee's annual base salary. Employees can purchase coverage for themselves, spouse and/ or children.

HYATT GROUP LEGAL PLAN

[The Legal Plan](#) covers full representation for many important personal legal services.

SPOTLIGHT PROGRAMS

[Care@Work](#) - WVU has partnered with Care.com, a national organization of caregivers, to bring eligible employees and members of the WVU Retirees Association Care@Work membership at no cost. Eligible employees will have access to care for every member of their family, no matter where they are nationwide, simply by signing up with their official WVU e-mail address.

WVU WELLNESS

Employee Wellness is a program that encourages all employees to manage one's well-being every day and offers multiple resources to enhance the health and wellness of the employees.

DISABILITY PLANS

Mt. Flex Short-term Disability is a pre-tax benefit. The weekly Short-Term Disability (STD) benefit is based on the employee's earnings from WVU. The group insurance policy refers to these earnings as pre-disability earnings. The weekly benefit is 70% of the employee's pre-disability earnings, reduced by deductible income. The maximum weekly benefit is \$750.

Mt. Flex Long-term Disability is a pre-tax benefit. The monthly Long-term Disability benefit is based on the employee's earnings from WVU. The group insurance policy refers to these earnings as pre-disability earnings. The monthly benefit is either 50 or 70% of the employee's pre-disability earnings, reduced by deductible income. The maximum monthly benefit is \$6,000 (50%) or \$8,571 (70%).

Standard Long-term Disability (LTD) is a post-tax premium; therefore, the benefit is not taxable. The income benefit is based upon the employee's base salary and begins after six months of total disability. The income benefit is 60% of the employee's base salary up to \$5,000 - therefore salary amounts over \$100,000 are not covered (see ILTD below)- less any offsets, such as any income payable from Social Security, Worker's Compensation, and any disability benefit payable under any insurance or retirement plan sponsored by WVU or any salary continuance programs. The minimum monthly benefit under this plan is \$100. The annuity benefit provides for a monthly contribution of an amount equal to 12 percent of the employees' salary to TIAA and/or CREF Retirement Accounts. The plan also includes a "Survivor Income Benefit" payable as of the first day of the month after the employee's death. The "Survivor Income Benefit" equals the last monthly income benefit received, multiplied by three. It will be paid to surviving dependent(s) if criteria are met.

Extended Individual Long-term Disability (ILTD) Extended Individual Long-term Disability (ILTD) is designed to be a complement to your Standard Long-Term Disability (LTD) plan at WVU and is restricted to those earning more than \$100,000 annually.

ILTD plan offers:

- Higher income replacement of income if you become disabled long-term
- High quality policy features: you own the individual policy and you make all the decisions on the policy
- You can keep the policy if you no longer work at WVU
- Benefits are not subject to federal and state income tax.
- Premiums are discounted and payroll deduction arrangements are offered.

ADDITIONAL VOLUNTARY BENEFITS

Identity Theft Protection through InfoArmor proactively protects against identity theft, and also includes credit monitoring. By detecting fraud at the source, InfoArmor's PrivacyArmor benefit will minimize damages and better protect you from the #1 crime in America.

- Proactive identity monitoring, including high-risk transaction monitoring
- Credit monitoring, monthly credit score and an annual credit report
- Fully-Managed Privacy Advocate® Identity Restoration
- WalletArmor to make replacing a lost wallet quick and easy
- Digital Identity report with Privacy Grade and tips
- Solicitation reduction and more

Pet Insurance offered through VPI, America's oldest, largest and most popular pet insurance provider. It is accepted by all vets, even specialist and emergency providers. An easy claims process that covers accidents, illnesses and preventative care. WVU employees are offered discounted rates.

WVU Credit Union

The WVU's Credit Union is federally insured and owned entirely by its members and is operated for them exclusively. Payroll deductions and direct deposits available.

WVU is proud to offer [many other programs, services and discounts](#) that benefit employees, their families and the community. These may include software/hardware discounts, ticket discounts and various program assistance. Eligibility may vary by program service and discount.

WVU does not guarantee the quality of goods or services provided by participating vendors.

Let's go.

Employee Name:

Start Date in Benefit-Eligible Position:

mm/dd/yyyy

Optional Benefits Enrollment Deadline:

mm/dd/yyyy

(Example: If your start date is 08/16/2016, your enrollment deadline is 10/31/2016. Example: If your start date = Aug. 16, optional deadline = Oct. 31.)

Remote Benefit Processing Agreement

As a benefits-eligible employee, we hold your health and well-being in high regard so you can go above and beyond to reach your goals. WVU offers a comprehensive employee benefits package with a variety of options that you can tailor to meet your needs. To help ensure your benefits are set up accurately, please follow the instructions and turn in all forms promptly within the designated time frames. You may also choose to participate in a benefit session, where benefits will be explained in detail. (Call 304-293-5700 ext 4 to register for session.)

Required Forms - (Must be returned on or before 1st day of next month)

Initials

As a benefit-eligible employee, I understand there are mandatory forms that have to be returned to Benefits Administration no later than my 1st day of work. The required forms/ acknowledgments include the following:

- | | |
|---|-----------------------------------|
| Employment Years of Service Form | Basic Life Insurance Notification |
| 401(a) Retirement Vendor Selection Form | 4. Tobacco Affidavit |

Optional Benefits - (May enroll during month of eligibility and two following months)

Initials

I understand that as a benefit-eligible employee I have the month in which I become benefit-eligible and the following two months, to sign up for optional benefits. The deadline for signing up for these optional benefits is Once my forms are received and approved, coverage is effective on the first day of the next month.

- A. Health Insurance Enrollment Form
- B. PEIA PPB Plans - Primary Care Physician Designation Form
- C. Optional and Dependent Life Insurance Enrollment Form (During optional enrollment period, employees are guaranteed up to \$100,000 coverage. May enroll after the optional enrollment period, but will be subject to evidence of insurability and underwriting approval.)
- D. FBMC Mountaineer Flexible Benefits Enrollment Form (Includes: dental and vision insurance, medical and dependent care flexible spending accounts, health savings account, hearing service plan, disability* plans, legal plans, etc.)
- E. Standard Insurance Company Voluntary LTD Enrollment Form * (May enroll after optional enrollment period, but will be subject to evidence of insurability and underwriting approval. New hires guaranteed issue.)
- F. AIG Personal Accident Insurance Enrollment Form
- G. Supplemental Retirement Accounts Salary Reduction Agreement
- H. Voluntary Benefits (Includes Critical Illness, Hospital Indemnity, ID Theft Protection, Pet Insurance)

By signing this agreement, I am choosing to remote process for my new benefits. If I need additional assistance, I will contact the WVU Benefits Administration Office to register for a benefits session. If you have an email client installed, you can simply click the email now button. If not, you can still submit electronically by clicking: "File", then "Send File", then "Attach to Email". You may also print the file and mail or hand deliver to HR Benefits - 2nd Floor, PO Box 6640, 1 Waterfront Place, Morgantown, WV 26506

Employee Signature

Date- mm/dd/yyyy



Division of Human Resources
Benefits Administration
(304) 293-5700 x. 4
benefits@mail.wvu.edu
(rev. 10/24/2016)

Last

First

MI

Gen

Official Use Only

Employee Name:

Start Date in Benefit-Eligible Position:

mm/dd/yyyy

Optional Benefits Enrollment Deadline:

mm/dd/yyyy

(Is the month in which I become benefit eligible and the following two months. Example: eligible date = Aug 16, optional date = Oct 31)

Required Benefit Forms Checklist

Please review the items below to ensure you have completed all the tasks necessary to set up your employee benefits. The deadlines specified above are extremely important to the accurate and timely processing of your benefits. Please be sure to return all required documentation prior to your first day working in your benefit-eligible position.

These Must Be Returned Prior to Your First Day of Work in Benefit-Eligible Position

1. Benefits Orientation Required Forms Checklist (This Form)

This checklist will help ensure you fill out all the required forms. If your benefit eligible date and your optional benefit date are not already filled in above, please do that first.

2. Employment Years of Service Form (Required Form #2 - Parts 1, 2, and 3)

Include any prior service with State of West Virginia, including WVU. If you do not have prior years of service, sign the appropriate spot and go to required form 3. If you do have prior years of service you will need to complete [Part 3](#) and provide that form to any prior agency so they can verify your work experience.

I UNDERSTAND that if I selected that I have prior years of service in required form #2, then it is my responsibility to complete [part 3](#) and provide that page to any prior agency for whom I am requesting application of years of service. Until [part 3](#) is returned and verified, my years of service **WILL NOT** be applied.

3. 401(a) Defined Contribution Retirement Plan Vendor Selection Form (Required Form #3) Participation in a qualified 401(a) retirement plan is REQUIRED by the State of West Virginia. All benefits-eligible employees must enroll and contribute 6% of total earnings to the retirement plan of their choice. A 6% employer match is provided to all employees and is 100% vested. Note: Employees who choose TIAA-CREF and do not enroll online will be default enrolled into the plan under an age-appropriate LifeCycle Fund; Empower requires the employee to choose their plan. For both, beneficiaries and plan changes can be made approximately 1 week after processing for payroll.

4. Basic Life Insurance Notification - no form

All benefit-eligible employees are provided a Basic Life insurance policy that is paid for by the University. Details about the policy can be found in the [Public Employees Insurance Agency \(PEIA\) Shoppers' Guide](#). (page 44) You will need to register at [Manage My Benefits](#) to set up beneficiaries once your coverage is activated (approximately 1 week after processing for payroll; otherwise default beneficiaries will be applied.

5. Tobacco Affidavit - no form

If none of the people enrolled on your PEIA coverage use tobacco, you will receive the discount on your PEIA PPB Plan health coverage (if any) and optional life insurance premiums. I acknowledge by checking the acceptance box below that WVPEIA or its agents have access to my medical records to check my tobacco use status.

Who uses tobacco: Policyholder Dependent (spouse and/or children)
No Tobacco Users within the last six (6) months



THE FOLLOWING IS AN EXAMPLE LIST OF WV STATE AGENCIES ELIGIBLE FOR YEARS OF SERVICE VERIFICATIONS

Employment as a Student Worker, Work-Study or Graduate Student does not count as eligible service time

<input type="checkbox"/> Adjutant General	<input type="checkbox"/> College of Graduate Studies	<input type="checkbox"/> Economic and Community Development	<input type="checkbox"/> Governor's Office	<input type="checkbox"/> Regional Jail & Prison Authority
<input type="checkbox"/> Aeronautics Commission	<input type="checkbox"/> College of Osteopathic Medicine	<input type="checkbox"/> Emergency Services	<input type="checkbox"/> Interstate Education Compact	<input type="checkbox"/> Rehabilitation
<input type="checkbox"/> Alcohol Beverage Control Comm.	<input type="checkbox"/> Concord University	<input type="checkbox"/> Employment Security	<input type="checkbox"/> Southern Regional Education Board	<input type="checkbox"/> Secretary of State's Office
<input type="checkbox"/> Air Pollution Control Comm.	<input type="checkbox"/> Crime Victims Compensation Fund	<input type="checkbox"/> Commission on Aging,	<input type="checkbox"/> Health Care Cost Review Authority	<input type="checkbox"/> Shepherd University
<input type="checkbox"/> Advisory Council on Voc Ed	<input type="checkbox"/> Culture and History	<input type="checkbox"/> Education Broadcasting Authority	<input type="checkbox"/> Health Department	<input type="checkbox"/> Solid Waste Authority
<input type="checkbox"/> Antiquities Commission	<input type="checkbox"/> Department of Agriculture	<input type="checkbox"/> WMUL-TV	<input type="checkbox"/> Andrew S. Rowan Memorial Home	<input type="checkbox"/> Southern Community Col. (L)
<input type="checkbox"/> Attorney General	<input type="checkbox"/> Department of Banking	<input type="checkbox"/> WSWP-TV	<input type="checkbox"/> Denmark State Hospital	<input type="checkbox"/> Southern Community Col. (W)
<input type="checkbox"/> Beef Industry Assessment Bd WV	<input type="checkbox"/> Department of Commerce	<input type="checkbox"/> WWVU-TV	<input type="checkbox"/> Hopemont State Hospital	<input type="checkbox"/> State Armory Board
<input type="checkbox"/> Beer Commission	<input type="checkbox"/> Department of Corrections	<input type="checkbox"/> WNPB-TV	<input type="checkbox"/> Pinecrest State Hospital	<input type="checkbox"/> State Elections Commission
<input type="checkbox"/> Bluefield State College	<input type="checkbox"/> Corrections-Central Office	<input type="checkbox"/> WPBY-TV	<input type="checkbox"/> Fairmont Emergency Hospital	<input type="checkbox"/> Tax Department
<input type="checkbox"/> Board of Accountancy	<input type="checkbox"/> Anthony Center	<input type="checkbox"/> Education & State Employees Grievance Bd.	<input type="checkbox"/> Welch Emergency Hospital	<input type="checkbox"/> Teacher's Retirement Board
<input type="checkbox"/> Board of Architects	<input type="checkbox"/> Davis	<input type="checkbox"/> FFA & FHA Camp Conference Center	<input type="checkbox"/> Colin Anderson	<input type="checkbox"/> Treasure's Office
<input type="checkbox"/> Board of Chiropractic Examination	<input type="checkbox"/> Huttonsville	<input type="checkbox"/> Fairmont State University	<input type="checkbox"/> Greenbrier School	<input type="checkbox"/> Boxing Commission
<input type="checkbox"/> Board of Coal Mine Health & Safety	<input type="checkbox"/> Industrial Home for Girls	<input type="checkbox"/> Farm Management Commission	<input type="checkbox"/> Sharpe	<input type="checkbox"/> Turnpike Commission
<input type="checkbox"/> Board of Dental Examiners	<input type="checkbox"/> Industrial Home for Boys	<input type="checkbox"/> Barboursville State Farm	<input type="checkbox"/> Spencer	<input type="checkbox"/> Water Development Authority
<input type="checkbox"/> Energy, Econ. & Environ. Com.	<input type="checkbox"/> Leckle Center	<input type="checkbox"/> Denmark State Farm	<input type="checkbox"/> Huntington	<input type="checkbox"/> Commission on Uniform State Laws
<input type="checkbox"/> Board of Embalmers and Funeral Dir.	<input type="checkbox"/> WV Penitentiary	<input type="checkbox"/> Hopemont State Farm	<input type="checkbox"/> Lakin	<input type="checkbox"/> Water Resources Board
<input type="checkbox"/> Board of Engineers & Professors	<input type="checkbox"/> State Prison for Women	<input type="checkbox"/> Huttonsville State Farm	<input type="checkbox"/> HEPC	<input type="checkbox"/> West Liberty College
<input type="checkbox"/> Board of Examiners in County	<input type="checkbox"/> State Prison for Men	<input type="checkbox"/> Lakin State Farm	<input type="checkbox"/> House of Delegates	<input type="checkbox"/> West Virginia Network
<input type="checkbox"/> Board of Exam for Nurses, Practitioners	<input type="checkbox"/> Northern Region	<input type="checkbox"/> Moundsville State Farm	<input type="checkbox"/> Commission on Postmortem Exam.	<input type="checkbox"/> Worker's Compensation Fund
<input type="checkbox"/> Board of Insurance	<input type="checkbox"/> Southern Region	<input type="checkbox"/> Pence Springs State Farm	<input type="checkbox"/> Purchasing Prac & Proc Comm.	<input type="checkbox"/> Women's Commission
<input type="checkbox"/> Board of Foresters & Professors	<input type="checkbox"/> Department of Education	<input type="checkbox"/> Pinecrest State Farm	<input type="checkbox"/> Insurance Commission	<input type="checkbox"/> WV Auditor's Office
<input type="checkbox"/> Board of Landscape Architects	<input type="checkbox"/> Department of Energy (Mines)	<input type="checkbox"/> Pruntytown State Farm	<input type="checkbox"/> Joint Expenses	<input type="checkbox"/> WV Hospital Finance Authority
<input type="checkbox"/> Board of Land Surveyors	<input type="checkbox"/> Department of Highways	<input type="checkbox"/> Salem State Farm	<input type="checkbox"/> Legislative Auditor	<input type="checkbox"/> WV Human Rights Commission
<input type="checkbox"/> Board of Probation & Parole	<input type="checkbox"/> Department of Labor	<input type="checkbox"/> Spencer State Farm	<input type="checkbox"/> Library Commission	<input type="checkbox"/> WV School for the Deaf & Blind
<input type="checkbox"/> Board of Public Employees Insurance	<input type="checkbox"/> Department of Health/Human Resources	<input type="checkbox"/> St. Mary's State Farm	<input type="checkbox"/> Lottery Commission	<input type="checkbox"/> WV State University
<input type="checkbox"/> Board of Exam-WV Radiologic Tech	<input type="checkbox"/> Department of Welfare	<input type="checkbox"/> Sweet Springs State Farm	<input type="checkbox"/> Marshall University	<input type="checkbox"/> WV State Senate
<input type="checkbox"/> Board of Occupational Therapy	<input type="checkbox"/> Children's Home	<input type="checkbox"/> Weston State Farm	<input type="checkbox"/> Marshall Univ. Medical School	<input type="checkbox"/> WV State Supreme Court
<input type="checkbox"/> Board of Optometry	<input type="checkbox"/> Department of Motor Vehicles	<input type="checkbox"/> WV Children's Home State Farm	<input type="checkbox"/> Municipal Bond Commission	<input type="checkbox"/> West Virginia University
<input type="checkbox"/> Board of Osteopathy	<input type="checkbox"/> Department of Natural Resources	<input type="checkbox"/> Finance & Administration	<input type="checkbox"/> Northern Community College	<input type="checkbox"/> WVU HSC Charleston
<input type="checkbox"/> Board of Pharmacy	<input type="checkbox"/> Blennerhasset Historical Park Comm.	<input type="checkbox"/> F&A Transportation	<input type="checkbox"/> Nursing Home Licensing Board	<input type="checkbox"/> WVU Institute of Technology
<input type="checkbox"/> Board of Physical Therapy	<input type="checkbox"/> Interstate Comm. Pot. River Basin	<input type="checkbox"/> Info Systems Service Division	<input type="checkbox"/> Oil and Gas Conservation Comm.	<input type="checkbox"/> WVU Mountaineer Temps
<input type="checkbox"/> Board of Psychologists	<input type="checkbox"/> Interstate Mining Compact Comm.	<input type="checkbox"/> Revolving Fund	<input type="checkbox"/> Public Employees Retirement Board	<input type="checkbox"/> WVU Parkersburg
<input type="checkbox"/> Board of Sanitations	<input type="checkbox"/> Ohio River Basin Commission	<input type="checkbox"/> Surplus Property	<input type="checkbox"/> Public Legal Service Council, WV	<input type="checkbox"/> WVU Potomac State College
<input type="checkbox"/> Board of Social Work Examiners	<input type="checkbox"/> Ohio River Valley Water San.Com	<input type="checkbox"/> Building Commission	<input type="checkbox"/> Public Service Commission	
<input type="checkbox"/> Board of Veterinarians	<input type="checkbox"/> Public Land Corporation	<input type="checkbox"/> Fire Commission	<input type="checkbox"/> Racing Commission	
<input type="checkbox"/> Bridgemont Community Technical College	<input type="checkbox"/> Department of Public Safety	<input type="checkbox"/> Glenville State College	<input type="checkbox"/> Railroad Maintenance Authority	
<input type="checkbox"/> Civil Service	<input type="checkbox"/> Department of Veteran's Affairs	<input type="checkbox"/> Greenbrier Valley College Center	<input type="checkbox"/> Real Estate Commission	
<input type="checkbox"/> Coal Mine Safety & Tech. Review Comm.	<input type="checkbox"/> Directors	<input type="checkbox"/> Geological & Economic Survey	<input type="checkbox"/> Regulatory Board of Exam for Nurses	

WEST VIRGINIA UNIVERSITY DEPARTMENT OF HUMAN RESOURCES-BENEFITS OFFICE
PO Box 6640 • One Waterfront Place • Morgantown, WV 26506 • Phone: (304) 293-5700 x 4 • Fax: (304) 293-7532

EMPLOYMENT/YEARS OF SERVICE VERIFICATION FORM

The employee listed below has informed our office that s/he has prior Years of Service with your agency. This information is needed for annual leave accrual rate determination, calculation of longevity/annual increment pay and related issues. It should be noted that this information is public information and therefore not protected.

Please return this completed form directly to the WVU Human Resources Department at the address at the top of this page. Thank you.

EMPLOYEE INFORMATION:

I _____ (Name of Employee, please print) give my permission to _____ (Department) for release of any and all information requested below to the Division of Human Resources at WVU regarding my past years of service. If you should need further information, please contact me at:

_____ (phone #) _____ (signature)

Information below is to be completed by the prior employing state agency:

PLEASE DO NOT USE WHITEOUT ON THIS FORM. INITIAL ALL CROSSOUTS.

STATE AGENCY INFORMATION

State Agency Name		Contact Name & Title	
Address—Number & Street			
City	State	Zip Code	Phone No.

Employee Hire Date* MM/DD/YY	Employee End Date MM/DD/YY	Work Week Total Hours	Months Per Year	Benefits Eligible Yes or No	Job Title	Annual Leave to Transfer (Hours)	Sick Leave to Transfer (Hours)

*Show Breaks in Service

I verify to the best of my knowledge that the above information is correct.

State Agency Representative Signature

Date

If completing this packet electronically, print this page and submit to your previous employer(s) for their verification. To print - click on the print button and choose "current page".

Last

First

MI

Gen

Official Use Only

Employee Name:

Start Date in Benefit-Eligible Poition

mm/dd/yyyy

Optional Benefits Enrollment Deadline:

mm/dd/yyyy

WEST VIRGINIA UNIVERSITY

401(a) Defined Contribution Retirement Plan - Vendor Selection/ Salary Reduction Agreement Form

Institution

WVU Morgantown

WVU HSC Charleston

WVU Tech

WVU Parkersburg

WVU Potomac State

Mandatory Contributions for Retirement

The West Virginia Higher Education Policy Commission 401(a) Defined Contribution Retirement Plan provides for a mandatory contribution of 6% of gross earnings. This amount will automatically be deducted from ALL pays, and be remitted to your retirement plan vendor for application to your retirement account. At the same time, the employer (WVU) matching contribution of 6% will also be remitted to your retirement plan vendor for application to your retirement account. The allocation for application will be determined according to your specifications, or applied under the default choice in lieu thereof. You must create an account for either vendor and log in to assign beneficiaries.

Employee Statement of Agreement

I understand that under West Virginia Code Section 5-10c-1, et seq. (HB 2022), it is mandatory that I contribute 6% of my pre-tax earnings to the West Virginia Higher Education Policy Commission 401(A) Defined Contribution Retirement Plan. Upon termination of employment, retirement accumulations may be withdrawn under various options or set up as annuity income. Income taxes are due for the tax year during which received.

TIAA-CREF

TIAA has a default life cycle fund or build your own portfolio after initial deduction.

EMPOWER

Empower requires additional steps for enrollment after initial payroll deduction.

*Note - An enrollment and participant directed investment form for the selected vendor must be completed and forwarded to the vendor prior to any payroll deduction. The submission of this Vendor Selection Form replaces any prior vendor selection made by the participant.

Employee Signature: -

Date:

Central Human Resources Use Only

Accepted on behalf of Employer by: _____ Date: _____

401(a) Vendor Code:

TIAA-CREF (309)

EMPOWER (311)

Never send social security numbers through email.

