Retiree Benefits Enrollment Form



Personal Information				
Select One: □ New Retiree □ Annual Enrollment □ Spouse Deceased				
Name:	WFU ID:		Date of Birth:	
Retirement Date:	Coverage Date:		Phone:	
Address:				
Circle the plan option you would like to enroll in or check the cancel/ waive box				
Medical / Prescription Plan	Low Plan	High Plan	Cancel/Waive	
Retiree Only on Aetna	\$516.64	\$607.37	☐ Cancel/Waive By choosing this election, I understand that I cannot return to the Wake Forest plan at a later date.	
Spouse Only on Aetna	\$603.64	\$694.37		
Retiree & Spouse on Aetna	\$1,301.38	\$1,510.05		
Retiree on Aetna & Spouse on Via Benefits	\$516.64	\$607.37		
Retiree on Via Benefits & Spouse on Aetna	\$603.64	\$694.37		
Retiree on Via Benefits & Spouse & Child on Aetna	905.46	\$1,041.56		
Retiree on Via Benefits & Spouse & Children on Aetna	\$1,207.28	\$1,388.74		
Retiree on Via Benefits & Child on Aetna	\$301.82	\$347.19		
Retiree on Via Benefits & Children on Aetna	\$603.64	\$694.37		
Retiree & Spouse on Via Benefits	Enrolled	Plan to Enroll		
Retiree Only on Via Benefits	Enrolled	Plan to Enroll		
Spouse Only on Via Benefits	Enrolled	Plan to Enroll		
Dental Plan (MetLife)	Low Plan	High Plan	Cancel/Waive	
Retiree Only (or Surviving Spouse)	\$26.72	\$48.35	☐ Cancel/Waive By choosing this election, I understand that I cannot return to the Wake Forest plan at a later date.	
Retiree & Spouse	\$56.35	\$100.65		
Retiree & Child	\$45.39	\$80.33		
Retiree & Children	\$60.71	\$104.18		
Family	\$86.79	\$154.24		
Vision Plan (Superior Vision)	Select		Cancel/Waive	
Retiree Only (or Surviving Spouse)	\$6.18 \$11.96		☐ Cancel/Waive By choosing this election, I understand that I cannot return	
Retiree & One Dependent				
Family	\$17	7.58	to the Wake Forest plan at a later date.	
\$2,000 Death Benefit (designate your beneficiary) * Death bene	efit is for WFU R	Retirees only		
ame: Date of Birth:		Benefit %:		
Address:			Relationship:	
Beneficiary Phone #::			Date:	
Retiree Signature:				

Include any additional beneficiaries on the back of this form.