

Alpine Homecare

Open Enrollment January 1, 2024 through December 31, 2024

Plan Elections

Health Insurance – Plan Option:

BASE Doctors Plan

Choice Plus H.S.A. Plan

Health Insurance – Dependents to Enroll:

Employee Only

Employee + Spouse

Employee + Child(ren)

Employee + Family

Waive health insurance

I understand that by waiving coverage at this time, I will not be allowed to participate unless I qualify at a special enrollment period or as a late enrollee, if applicable, or at the next open enrollment period.

Dental Insurance – Dependents to Enroll:

Employee Only

Employee + Spouse

Employee + Child(ren)

Employee + Family

Waive dental insurance

Vision Insurance – Dependents to Enroll:

Employee Only

Employee + Spouse

Employee + Child(ren)

Employee + Family

Waive vision insurance

If you have not previously enrolled or you are enrolling a dependent who was not previously enrolled, you must complete the application form to provide all personal information required for the enrollment.

Please print name: _____

Signature: _____

Date: _____