



Haverhill Public Schools

Benefits

Health Insurance Opt-Out

The City of Haverhill will provide a health insurance opt-out option. Eligible employees who enroll in the program will receive a lump-sum financial incentive payment. The amount will be \$1500.00 for an individual and \$3000 for a family. In order to be eligible for the program, an employee must meet the following criteria:

- The employee must have 24 consecutive months of enrollment in a City of Haverhill health plan
- The employee must provide written proof of other (Non-City of Haverhill) health coverage

I waive all health insurance coverage through the City of Haverhill at this time. I have attached proof of other health insurance coverage. I understand that if I waive coverage at this time, I will not be eligible to re-enroll for a period of one year from the date of my opt-out.

Name of Employee (Please print)

Signature

Date

Return this form and proof of other coverage to:

Haverhill Public Schools
Benefits Department
4 Summer Street, Room 104
Haverhill, MA 01830

Office use only:

- | | |
|---|----------------------------------|
| <input type="checkbox"/> Approved _____ | <input type="checkbox"/> \$1,500 |
| <input type="checkbox"/> Paid out _____ | <input type="checkbox"/> \$3,000 |

4 Summer Street Haverhill, Massachusetts 01830 (978) 374-3411 phone - (978) 374-3422 fax

Visit us at www.Hillies.org