Revised 12-10-24

BENEFITS ENROLLMENT CHECKLIST

WV Division of Administrative Services 1124 Smith Street, Suite 2100 Charleston, WV 25301

phone: (304) 558-2350 fax: (304) 558-4878

BENEFITS					
Please check New Hire, Temp to Perm or Transfer					
New Hire					
Temp to Perm					
Transfer-In					
Department Transferring In from					

Name			Oasis ID #	
Facility (Work Location)		Date of New F Perm or Tr		
If Employee's Pay Location is Different than their				
Work Location, list Pay Location Here: (this is located in Oasis on EPM screen beside Home Unit and Pay Location):				

PUBLIC EMPLOYEES RETIREMENT SYSTEM	For DAS Use				
WV RETIREMENT PLUS (457) Public Employees Retirement Enrollment and Beneficia	form				
WV Retirment Plus (457) Enrollment and Beneficiary					
WV Retiffient Flus (457) Enforment and Beneficiary					
PUBLIC EMPLOYEES INSURANCE AGENCY (PEIA)					
Employees must receive the following:	Employee's Initials confirming receipt				
PEIA Shopper's Guide (not needed for Transfers)					
PEIA Summary Plan Description (not needed for Transfe					
Instructions for PEIA Online Enrollment					
PEIA Enrollments should be completed Online (see in If Opting out of Insurance(s), Form must be complete		•	For DAS Use Approved Benefits Online or		
•		•			
If Opting out of Insurance(s), Form must be complete	Employee's Initials if Opting	•	Approved Benefits Online or		
If Opting out of Insurance(s), Form must be complete Basic Life Insurance Enrollment (not needed for Transfers)	Employee's Initials if Opting Out Employee's Initials if Opting	•	Approved Benefits Online or		
If Opting out of Insurance(s), Form must be complete Basic Life Insurance Enrollment (not needed for Transfers) Health Benefits Enrollment (not needed for Transfers) Optional and Dependent Life Enrollment (not needed for Transfers) I acknowledge that I must complete my Beneficiary Information for any Ba	Employee's Initials if Opting Out asic and Optice	e onal Life	Approved Benefits Online or		
If Opting out of Insurance(s), Form must be complete Basic Life Insurance Enrollment (not needed for Transfers) Health Benefits Enrollment (not needed for Transfers) Optional and Dependent Life Enrollment (not needed for Transfers)	Employee's Initials if Opting Out spic and Option Inplete my ber Ingeles Insurand Indress provide	onal Life leficiary ce Agency"	Approved Benefits Online or Received completed form		
If Opting out of Insurance(s), Form must be complete Basic Life Insurance Enrollment (not needed for Transfers) Health Benefits Enrollment (not needed for Transfers) Optional and Dependent Life Enrollment (not needed for Transfers) I acknowledge that I must complete my Beneficiary Information for any Balnsurance that I enroll in through MetLife. After policy approval, I can coninformation online at mybenefits.metlife.com by choosing "WV Public Employas my organization, or, I could complete and mail in the paper form to the a	Employee's Initials if Opting Out Employ	onal Life leficiary ce Agency"	Approved Benefits Online or Received completed form		

Section below to be Signed by Employee

I have been given the Shopper's Guide and Summary Plan Description books for PEIA's Basic Life Insurance, Health Insurance
and Optional/Dependent Life Insurance, as well as the Plan Book and form for Mountaineer Flex Benefits. I understand that if I
choose not to enroll in Basic Life, Optional/Dependent Life and/or Health Insurance through PEIA, that I must complete the
enrollment forms to decline (waive) this insurance.

Employee Signature	Date