

Option to Continue Employee Benefits While on Leave of Absence Without Pay or Layoff

INSTRUCTIONS:

- To maintain benefits while on leave without pay, you must apply by completing this form. Full payment or monthly postdated cheques must be received within 30 days of the beginning of your leave.
- Send completed form to the Benefits Service Centre via:
 - AskMyHR Service Request:** www.gov.bc.ca/myhr/contact - Select My Team/Organization > Benefits > Submit a Health Benefit Form/Application
 - Fax:** 604-320-4031
 - Mail:** Block E, 2261 Keating Cross Road, Saanichton, BC, V8M 2A5
- Please retain a copy for your records.
- For more information or forms, please visit MyHR at www.gov.bc.ca/MyHR or call (toll free) 1 877-277-0772 or in Victoria or Vancouver 250-952-6000

Freedom of Information and Protection of Privacy Act (FOIPPA) This information is collected by the British Columbia Public Service under s. 26(c) of FOIPPA. Any questions about the collection and the use of this information can be directed to an HR Service Representative at the BC Public Service Agency by submitting a request to AskMyHR and selecting My Team/Organization > Employee & Labour Relations > Other Issues & Inquiries, phoning: 1-877-277-0772 or writing to: Manager, Contact Centre Operations, BC Public Service Agency, 810 Blanshard Street, Victoria, BC V8W 2H2.

EMPLOYEE INFORMATION

LAST NAME		FIRST NAME		EMPLOYEE ID	
MINISTRY		DEPT ID (MIN - PAYLIST)		CANADA LIFE ID	
EMPLOYEE CLASS <small>NOTE: Use the arrow keys to move between the choices and make your selection (or click on your selection).</small>				APPOINTMENT STATUS	
BCGEU	PEA	NURSES	OIC	REGULAR	FULL TIME
EXCL MGR	SCHEDULE A	SAL PHYSICIANS	OTHER: _____	AUXILIARY (with Benefits)	PART TIME
HOME ADDRESS		CITY, PROVINCE		POSTAL CODE	PHONE NUMBER (10 digits)

REASON FOR APPLICATION

LEAVE OF ABSENCE WITHOUT PAY TYPE OF LEAVE: (e.g., education) _____ START DATE (yyyy-mm-dd) _____ END DATE (yyyy-mm-dd) _____

LAYOFF LAST DAY ON PAY: (yyyy-mm-dd) _____

OPTION TO CONTINUE EMPLOYEE BENEFITS (including WCB direct payments)

During an approved leave of absence without pay or layoff of ONE CALENDAR MONTH OR MORE, an employee may choose to maintain coverage for any of the benefit plans listed below. Coverage may be maintained up to a limit of six (6) months for layoff, 12 months for deferred salary leave and up to 24 months for other approved leaves (some limitations apply). Coverage continuation shall not exceed 24 months for the combined length of any or all leaves (including maternity, pre-placement adoption and/or parental leaves). Employees are responsible for the full premium cost for any benefits they choose to continue. Full payment or monthly post-dated cheques must be received within 30 days of commencement of the leave in order to process this application. If payment is not received within 30 days of commencement of leave, there is no further option to continue benefits coverage. **DO NOT SEND PAYMENT UNTIL BILLED.**

BENEFITS SELECTION Choose the health and life insurance (1) and/or long term disability coverage (2) you wish to continue.

1. HEALTH AND INSURANCE BENEFITS

	MAINTAIN COVERAGE?		MAINTAIN COVERAGE?	
	YES	NO	YES	NO
EXTENDED HEALTH PLAN			OPTIONAL SPOUSE LIFE INSURANCE	
DENTAL PLAN			OPTIONAL CHILD LIFE INSURANCE	
EMPLOYEE BASIC LIFE INSURANCE			OPTIONAL EMPLOYEE AD&D INSURANCE	
OPTIONAL FAMILY FUNERAL BENEFIT			OPTIONAL SPOUSE AD&D INSURANCE	
OPTIONAL EMPLOYEE LIFE INSURANCE			OPTIONAL CHILD AD&D INSURANCE	

2. LONG TERM DISABILITY PROGRAM

(applies to regular employees)

IMPORTANT NOTES

RE-ENROLMENT FOR BENEFITS COVERAGE UPON RETURN TO WORK

If your benefits were not maintained or you did not pay the premiums to maintain your benefits, you are responsible for reinstating your benefits coverage upon returning to work from an approved leave of absence. Please visit the Benefits while on leave or layoff page (link below) under the section called "Re-enrolment for benefits coverage upon return to work," for instructions on how to reinstate your benefits. Refer to the heading that applies to your situation. Your benefits plans will be reinstated on the appropriate date pending the required notification or receipt of your application, and in accordance with applicable benefits policy.

Link: <https://www2.gov.bc.ca/gov/content/careers-myhr/all-employees/pay-benefits/benefits/benefits-leave>

PUBLIC SERVICE PENSION PLAN

A period of absence without salary does NOT count as pensionable service under the provisions of the Public Service Pension Plan. Upon return to work, you may be able to purchase this service and pay the cost directly to the BC Pension Corporation. For more information, please visit the Purchase of Service page on MyHR at www2.gov.bc.ca/gov/content/careers-myhr/all-employees/pay-benefits/benefits/pension/purchase-service.

AUTHORIZATION

SIGNATURE _____ DATE SIGNED
yyyy-mm-dd

Retain a copy for your records.