

MaPS Flexible Group Benefits Enrolment

Purpose:	<p>This reference guide provides you with the steps to enrol in the MaPS flexible group benefits. These selections remain in place until the next re-enrolment period, which take place every two years and allow plan members to modify their plan selections to meet their changing benefits needs.</p> <p>Also, if you experience a qualified life event, such as a marriage, divorce, birth of first child, etc., you will have the opportunity to change your benefits to meet your evolving needs. The steps provided here are specific to new hires but are relevant for making changes to existing benefits, dependents, and beneficiaries.</p> <p>If you choose not to complete the enrolment, your selections will default to single coverage. Note that if you do not make selections, any excess credits default to a Health Spending Account.</p>
Audience:	Newly hired University of Calgary Management and Professional Staff
Prerequisites:	You have received a system email notification from DoNotReply@ucalgary.ca indicating you can access the enrolment tool to make your benefit selections.
Related Documents	<p>For related benefits information, visit the UofC Human Resources website: https://ucalgary.ca/hr/benefits-pension/group-benefits/maps/flexible-benefits-plan-maps</p>

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Before You Enrol

The benefit choices you make today remain in place until the next re-enrolment period which is January 1st of each odd year (e.g., January 1, 2021, 2023), or on the occasion of a qualified life event (marriage, first child, divorce, etc.).

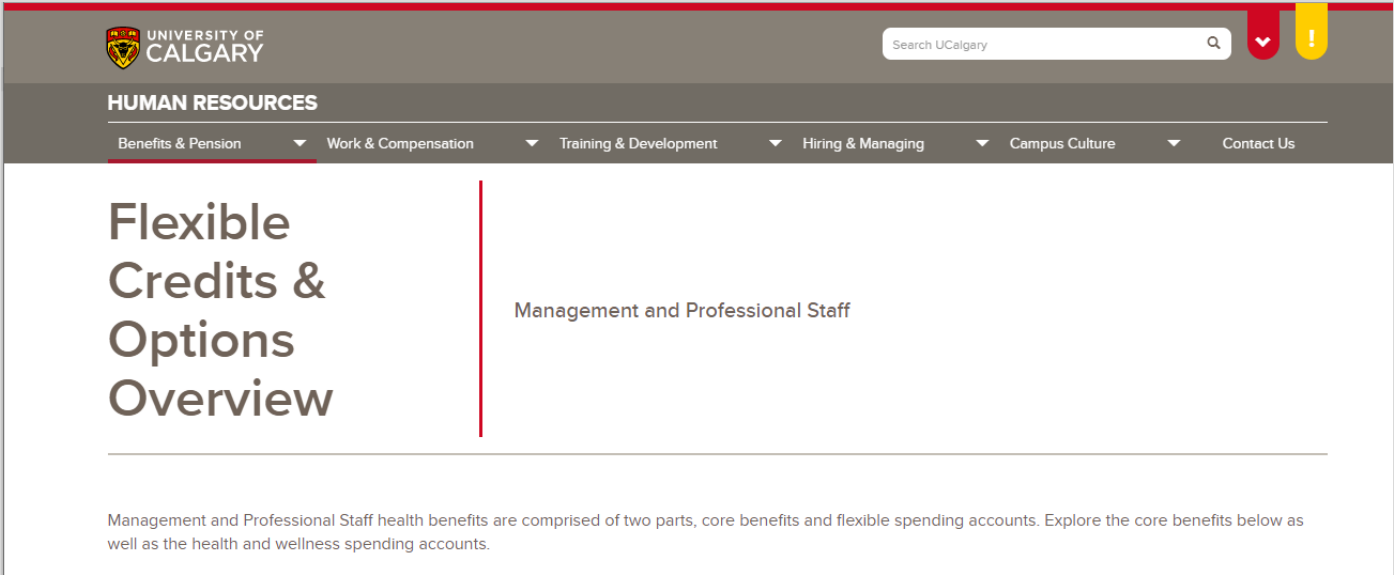
If you have experienced a life event, go to the HR Life Events page for key information, prior to making changes to your benefits:

<https://ucalgary.ca/hr/benefits-pension/life-events/maps>

Here are a few things to consider before you complete your enrolment.

Step 1: Review Your Benefit Options

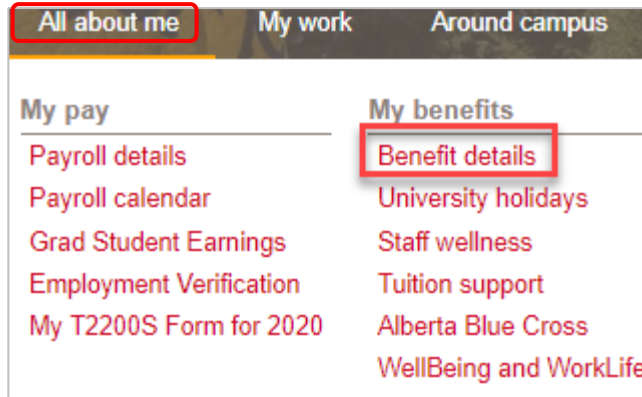
1. Navigate to <https://ucalgary.ca/hr/benefits-pension/group-benefits/maps/flexible-benefits-plan-maps>
2. Consider your coverage needs and whether they may change prior to the next re-enrolment period.



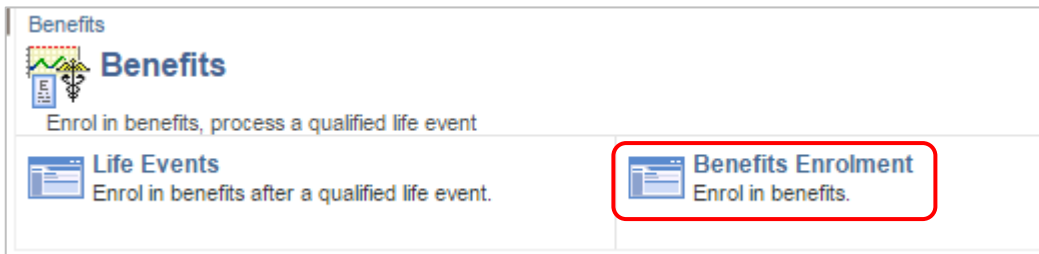
Complete Your Enrolment

Step 1: Navigate to the Enrolment Page

- From the My UCalgary Portal, click **All about me** → **My benefits** → **Benefit details**



- On the **Benefits** page, click **Benefits Enrolment**.



Step 2: Review Key Information

- The **Benefits Enrolment** page displays.
- Read the information.
- Click the **Overview of All Plans** link to review details about your benefits. The page opens in a new tab.
- In the **Open Benefits Events** section, click the **Information** button for more detailed instructions.

Benefits Enrolment

Amin L. Rippenhagen

The University of Calgary is pleased to provide a comprehensive Flexible Group Benefits Plan for Management and Professional Staff (MaPS). This program is designed to offer flexibility and allows you to make choices that best meet your needs.

Please review your options and make your selections. Click [Overview of All Plans](#) to review details about your option choices.

After your initial enrolment the only time you may change your benefit choices is during re-enrolment or at the time of a qualified life event.

Use the **Select** button to begin your enrolment.

Open Benefit Events					
Event Description		Event Date	Event Status	Job Title	
Hire/Rehire	i	2020/03/23	Open	Director, Olympic Oval	Select

After you click the **Select** button, it may take a few seconds for your benefit enrolment information to load.

5. Review the important information about **Enrolment**.
6. Click the **OK** button.

[Benefits Enrolment](#)

Hire/Rehire

Amin L Rippenhagen

As a new hire you must enrol in benefits within 14 days of your date of hire. If you do not complete your selection you will be defaulted to base single coverage with no optional benefits.

Before making your selections please enter your dependent data to ensure appropriate flex credits are provided to you. Please select "Review/Update Dependent Data" to enter your dependent information.

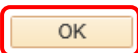
Select your Health and Dental option choices before allocating any excess credits to your Health and/or Wellness Spending Accounts. Once you have allocated all flex credits, choose your Life and LTD, optional and any voluntary benefits.

The only time you can change your benefit choices is during Re-enrolment or if you have a qualified life event.

Open Benefits Event

In this open benefit event, you will have the opportunity to review and finalize your benefits, including dependent and beneficiary information, as well as election of any optional benefits.

To make your benefit choices, go back to the Benefits Enrolment page and use the Select button to access your benefit event.



Step 3: Enter Dependent/Beneficiary Information

Enter your dependent information to ensure accuracy, so proper flex credits are calculated. If you have no dependents, enter beneficiary information for your insurance plan(s).

1. Click the **Select** button
2. The **Benefits Enrolment** page displays (you may need to scroll up).
3. Review the important information.
4. Click the **Review/Update Dependent Data** button.

Note: You cannot make your benefit selections until you have entered your dependent information.

5. The **Add/Review Dependent Beneficiary** page displays.
6. Click **Add a dependent or beneficiary**.

Note: Ensure you add any non-dependent beneficiaries for your Life Insurance or AD&D at this point.

Open Benefit Events					
Event Description		Event Date	Event Status	Job Title	
Hire/Rehire		2020/03/23	Open	Director, Olympic Oval	Select

After you click the **Select** button, it may take a few seconds for your benefit enrolment information to load.

Benefits Enrolment

Hire/Rehire

Amin L Rippenhagen

As a new hire you must enrol in benefits within 14 days of your date of hire. If you do not complete your selection you will be defaulted to base single coverage with no optional benefits.

Before making your selections please enter your dependent data to ensure appropriate flex credits are provided to you. Please select "Review/Update Dependent Data" to enter your dependent information.

Select your Health and Dental option choices before allocating any excess credits to your Health and/or Wellness Spending Accounts. Once you have allocated all flex credits, choose your Life and LTD, optional and any voluntary benefits.

The only time you can change your benefit choices is during Re-enrolment or if you have a qualified life event.

Select Review/Update Dependent Data to begin your enrolment. Go into each benefit to confirm or change election. Refer to [Group Benefit Definitions](#). To ensure your beneficiary form(s) populate correctly, you must go into each insurance benefit and follow the instructions to allocate percentages to your primary and secondary beneficiaries.

Review/Update Dependent Data

Add/Review Dependent/Beneficiary

Amin L Rippenhagen

Your enrolment in this benefit plan may requires proof of insurability. For Optional and Spousal Life Insurance as well as increases to MaPS Basic Life and LTD, Benefits will contact you with the appropriate forms for you to complete and submit to the provider. For Critical Illness (where applicable), please return to the enrolment page and download and complete the form.

No Dependents on Record

Add a dependent or beneficiary

[Return to Event Selection](#)

- Populate all the required and additional fields as needed. Required fields are marked with an asterisk.

Note: In Status Information, leave the **As of** date field blank.

- Click the **Save** button.
- Click to **Return to Dependent/Beneficiary Summary**.
- Repeat for each dependent or beneficiary.

Dependent/Beneficiary Personal Information

Amin L. Rippenhagen

Add/edit your dependent/beneficiary information. Note: Under Status Information, leave the As of field blank. Click the save button.

Personal Information

*First Name

Middle Name

*Last Name

Name Prefix

Name Suffix

Date of Birth

*Gender

Social Insurance Number

*Relationship to Employee

Status Information

*Marital Status As of

*Student As of

*Disabled As of

*Smoker As of

Address and Telephone

Same Address as Employee

Country Canada

Address 1764 Rousseau Avenue SW
Red Deer AB T0E 5L9

Same Phone as Employee

Phone

[Save](#)

[Return to Dependent/Beneficiary Summary](#)

- When done reviewing and/or adding dependents, click the **Return to Event Selection** link. This opens up your benefits for making selections.

[Add a dependent or beneficiary](#)

[Return to Event Selection](#)

Step 4: Make Your Enrolment Selections

1. The **MaPS Enrolment** page displays.
2. Scroll down to your **Enrolment Summary**.

Benefits Enrolment

Hire/Rehire

Amin L Rippenhagen

As a new hire you must enrol in benefits within 14 days of your date of hire. If you do not complete your selection you will be defaulted to base single coverage with no optional benefits.

Before making your selections please enter your dependent data to ensure appropriate flex credits are provided to you. Please select "Review/Update Dependent Data" to enter your dependent information.

Select your Health and Dental option choices before allocating any excess credits to your Health and/or Wellness Spending Accounts. Once you have allocated all flex credits, choose your Life and LTD, optional and any voluntary benefits.

The only time you can change your benefit choices is during Re-enrolment or if you have a qualified life event.

i Select **Review/Update Dependent Data** to begin your enrolment. Go into each benefit to confirm or change election. Refer to [Group Benefit Definitions](#). To ensure your beneficiary form(s) populate correctly, you must go into each insurance benefit and follow the instructions to allocate percentages to your primary and secondary beneficiaries.

[Review/Update Dependent Data](#)

Enrolment Summary

3. Click the **Enrol** button for **each** item in the **Enrolment Summary**, in order to make your selections.

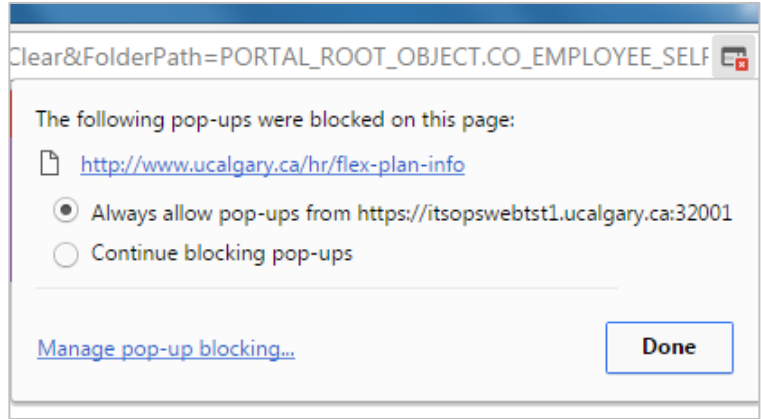
Note: Make your health and dental selections before any allocations to a wellness or health spending account. Flexible Credits are used to pay for Health and Dental. Excess credits remaining, if any, go to the Health or Wellness Spending Accounts.

Depending on your eligibility, the **Enrolment Summary** may include:

- a. Flexible Credits
- b. Health
- c. Dental
- d. Wellness Spending Account
- e. Health Spending Account
- f. Basic Life
- g. Optional Employee Life
- h. Optional Spousal Life (Couple/ Family coverage only)
- i. Optional Child Life (Family coverage only)
- j. AD&D
- k. Voluntary Employee AD&D
- l. Voluntary Spousal AD&D (Couple/ Family coverage only)
- m. Employee Critical Illness
- n. Spousal Critical Illness (Couple/ Family coverage only)
- o. Long-Term Disability
- p. Pension

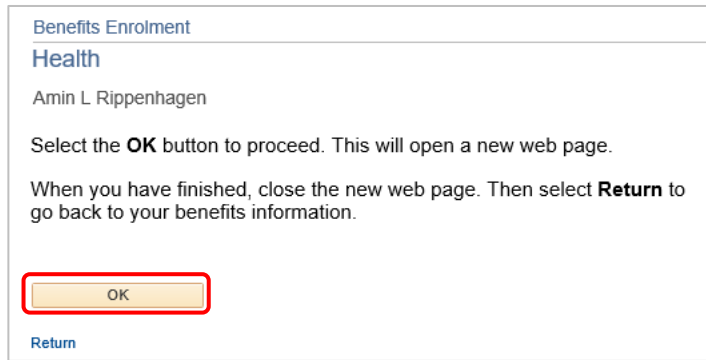
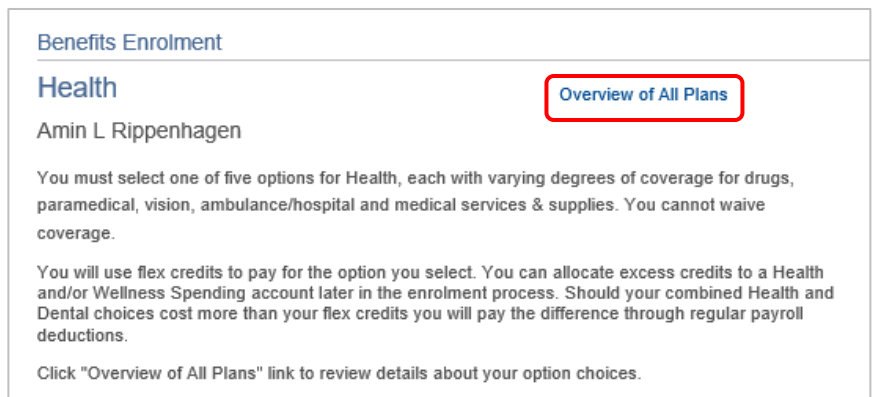
Enrolment Summary	
Flexible Credits Current: No Coverage. New: Family Coverage: \$4,645.00	<input type="button" value="Enrol"/>
Health Current: No Coverage. New: MaPS Extended Health Option 3:Family	<input type="button" value="Enrol"/>
Dental Current: No Coverage. New: MaPS Dental Option 3:Family	<input type="button" value="Enrol"/>
Wellness Spending Account Current: No Coverage.	<input type="button" value="Enrol"/>
Health Spending Account Current: No Coverage.	<input type="button" value="Enrol"/>
Basic Life Current: LIFE OPT 2: Salary X 2 New: LIFE OPT 2: Salary X 2 : \$200,000	<input type="button" value="Enrol"/>
Optional Employee Life Current: No Coverage. New: No Coverage.	<input type="button" value="Enrol"/>
Optional Spousal Life Current: No Coverage. New: No Coverage.	<input type="button" value="Enrol"/>
Optional Child Life Current: No Coverage. New: No Coverage.	<input type="button" value="Enrol"/>
AD&D Current: MaPS AD&D: \$100,000 New: MaPS AD&D: \$100,000	<input type="button" value="Enrol"/>
Voluntary Employee AD&D Current: No Coverage. New: No Coverage.	<input type="button" value="Enrol"/>
Voluntary Spousal AD&D Current: No Coverage. New: No Coverage.	<input type="button" value="Enrol"/>
Employee Critical Illness Current: No Coverage. New: No Coverage.	<input type="button" value="Enrol"/>
Spousal Critical Illness Current: No Coverage. New: No Coverage.	<input type="button" value="Enrol"/>
Long-Term Disability Current: MaPS LTD Option 1 New: MaPS LTD Option 1	<input type="button" value="Enrol"/>
Pension Current: Universities Academic Pension New: Universities Academic Pension	<input type="button" value="Enrol"/>

Note: When you click into each item, ensure your pop-up blocker is set to allow pop-ups on this site.



Overview of All Plans

1. For an **Overview of All Plans**, once you have selected to edit an item in your Enrolment Summary, click the link in the top right corner. This link is available when you navigate into each item of the Enrolment Summary.
2. Click the **OK** button to open a new browser window of the UofC Human Resources website – Flexible Benefits Plan Information.
3. When done reviewing the available plans on the Human Resources website, click the other tab to return to your enrolment. You can return to the Human Resources website at any time by clicking the Flexible Benefits Plan tab.



4. Click **Return** to go back to your benefits information.

Benefits Enrolment

Health

Amin L Rippenhagen

Use the **Return** button to go back to your benefits information.

Return

Health

1. Click the **Enrol** button for the **Health** option.
2. Before you make your **Health** selections, review the important information.
3. Scroll down to make your selections.

Health **Enrol**

Current: No Coverage.

New: **MaPS Extended Health Option 3:Family**

Benefits Enrolment

Health [Overview of All Plans](#)

Amin L Rippenhagen

You must select one of five options for Health, each with varying degrees of coverage for drugs, paramedical, vision, ambulance/hospital and medical services & supplies. You cannot waive coverage.

You will use flex credits to pay for the option you select. You can allocate excess credits to a Health and/or Wellness Spending account later in the enrolment process. Should your combined Health and Dental choices cost more than your flex credits you will pay the difference through regular payroll deductions.

Click "Overview of All Plans" link to review details about your option choices.

i Your current coverage is: No Coverage. If you do not make a choice, your coverage will be: MaPS Extended Health Option 3 with Family coverage

MaPS Flexible Group Benefits Enrolment

- Validate the existing selection or change your selection as per your Health needs. If you do not make a selection, your coverage defaults to Option 3.

Note: The dollar amounts in the screen shot are just examples and may not accurately reflect your plan costs.

Select one of the following plans:

MaPS Extended Health Option 1

Coverage Level	Your Costs
Family	\$423.12

MaPS Extended Health Option 2

Coverage Level	Your Costs
Family	\$794.64

MaPS Extended Health Option 3

Coverage Level	Your Costs
Family	\$1,839.36

MaPS Extended Health Option 4

Coverage Level	Your Costs
Family	\$1,927.68

MaPS Extended Health Option 5

Coverage Level	Your Costs
Family	\$2,104.32

- Review Your Dependents** covered under this benefit. To make changes to dependents, click the **Update and Continue** button to return to the Enrolment Summary page.

Note: Changing dependents impacts your credits. If changes are made to dependents after benefits are selected, review selections to ensure they are still accurate.

- If you are done reviewing and/or making changes, click the **Update and Continue** button.

Review Your Dependents

The following table displays the dependents who are covered in this benefit. Should you wish to make changes to your dependents, please click *Update and Continue* to return to the Enrolment Summary page where you can Review/Update Dependent Data, then return to this page to complete your enrolment.

Dependent Beneficiary		
Enrol	Name	Relationship
<input checked="" type="checkbox"/>	Elan Rippenhagen	Spouse
<input checked="" type="checkbox"/>	Zoe Louise Rippenhagen	Child

Update and Continue
Discard Changes

Select the **Update and Continue** button to save your choice until you are ready to submit your final enrolment.

Select the **Discard Changes** button to ignore all entries made on this page and return to the Enrolment Summary.

- A summary displays with your selection.
- If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Health

Amin L Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen MaPS Extended Health Option 2 with Family coverage.

Your Estimated Cost

Annual Cost \$1,096.56

Your Covered Dependents

Dependent Information	
Name	Relationship
Elan Rippenhagen	Spouse
Zoe Louise Rippenhagen	Child

Notes

Once submitted, this choice will take effect on 2020/03/23. If a payroll deduction is required, it will start in the pay period beginning 2020/04/01.

Update Elections **Discard Changes**

Select the **Update Elections** button to save your choices.
Select the **Discard Changes** button to go back and change your choices.

Dental

- Click the **Enrol** button for the **Dental** option.
- Before you make your **Dental** selections, review the important information.
- Scroll down to make your selections.

Remember, you can review all plans by clicking the link in the top right corner.

Dental **Enrol**

Current: No Coverage.

New: **MaPS Dental Option 3:Family**

Benefits Enrolment

Dental [Overview of All Plans](#)

Amin L Rippenhagen

You must select one of five options for Dental, each with varying degrees of coverage for Basic Dental, Major Dental and Orthodontics. You cannot waive coverage.

You will use your flex credits to pay for the option you select. You can allocate excess credits to a Health and/or Wellness Spending account later in the enrolment process. Should your combined Health and Dental choices cost more than your flex credits you will pay the difference through regular payroll deductions.

Click "Overview of All Plans" link above to review details about your option choices.

i Your current coverage is: No Coverage. If you do not make a choice, your coverage will be: MaPS Dental Option 3 with Family coverage

4. Validate your existing selection or change your selection as per your Dental needs until the next re-enrolment period (except in the case of a qualified Life Event). If you do not make a selection, your coverage defaults to Option 3.

Select one of the following plans:

- MaPS Dental Option 1

Coverage Level	Your Costs
Family	\$1,170.00

- MaPS Dental Option 2

Coverage Level	Your Costs
Family	\$1,337.04

- MaPS Dental Option 3

Coverage Level	Your Costs
Family	\$1,984.80

- MaPS Dental Option 4

Coverage Level	Your Costs
Family	\$2,117.04

- MaPS Dental Option 5

Coverage Level	Your Costs
Family	\$2,284.08

5. **Review Your Dependents** covered under this benefit. To make changes to dependents, click the **Update and Continue** button to return to the Enrolment Summary page.
6. If you are done reviewing and/or making changes, click the **Update and Continue** button.

Review Your Dependents

The following table displays the dependents who are covered in this benefit. Should you wish to make changes to your dependents, please click *Update and Continue* to return to the Enrolment Summary page where you can Review/Update Dependent Data, then return to this page to complete your enrolment.

Dependent Beneficiary		
Enrol	Name	Relationship
<input checked="" type="checkbox"/>	Elan Rippenhagen	Spouse
<input checked="" type="checkbox"/>	Zoe Louise Rippenhagen	Child

Update and Continue
Discard Changes

Select the **Update and Continue** button to save your choice until you are ready to submit your final enrolment.

Select the **Discard Changes** button to ignore all entries made on this page and return to the Enrolment Summary.

7. A summary displays with your selection.
8. If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Dental

Amin L Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen MaPS Dental Option 1 with Family coverage.

Your Estimated Cost

Annual Cost \$1,170.00

Your Covered Dependents

Dependent Information	
Name	Relationship
Elan Rippenhagen	Spouse
Zoe Louise Rippenhagen	Child

Notes

Once submitted, this choice will take effect on 2020/03/23. If a payroll deduction is required, it will start in the pay period beginning 2020/04/01.

Update Elections
Discard Changes

Select the **Update Elections** button to save your choices.

Select the **Discard Changes** button to go back and change your choices.

Wellness Spending Account (WSA)

1. Click the **Enrol** button for the **Wellness Spending Account**.
2. Before you make your **Wellness Spending Account** selections, review the important information.
3. If you choose to enrol in MaPS WSA, select the option. If you choose not to, click the **Update and Continue** button.

Wellness Spending Account Enrol

Current: No Coverage.

Benefits Enrolment

Wellness Spending Account Overview of All Plans

Amin L Rippenhagen

A Wellness Spending Account (WSA) can be used to enhance your personal well-being by reimbursing costs associated with wellness, learning, development and technology expenses. Amounts claimed are taxable and will result in a T4A slip. WSA can only be used by you and not your dependents. For detailed information on Wellness Spending Accounts click "Overview of All Plans" link to review details about your option choices.

Any excess credits after Health and Dental options have been made can be allocated to either a Wellness Spending Account, Health Spending Account or a combination of both. By default, all excess credits reside in the Health Spending Account until allocated.

i Indicate your desired annual allocation of excess credits below

Your excess credit amount is \$2,378.44. If this is a positive amount, you may allocate some or all of this amount to this account. Anything left over will default into your Health Spending Account. If this is a negative amount, it will be deducted from your pay on a per-pay-period basis.

Select an Option

No, I do not want to enrol


MaPS WSA

Update and Continue
Discard Changes

4. If you select the **MaPS WSA** option, enter the **Excess Credit Allocation** you would like to make

Note: you can also divide your excess credits between the WSA and Health Spending account.

5. Click the **Update and Continue** button.

Your excess credit amount is \$2,378.44.  If this is a positive amount, you may allocate some or all of this amount to this account. Anything left over will default into your Health Spending Account. If this is a negative amount, it will be deducted from your pay on a per-pay-period basis.

Select an Option

No, I do not want to enrol

MaPS WSA

Indicate the amount of credits you wish to allocate to your Wellness Spending Account:

Excess Credit Allocation

Update and Continue
Discard Changes

Select the **Update and Continue** button to save your choice until you are ready to submit your final enrolment.

Select the **Discard Changes** button to ignore all entries made on this page and return to the Enrolment Summary.

6. A summary displays with your selection.
7. If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Wellness Spending Account

Amin L Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen to enrol in the MaPS WSA plan with an annual allocation of \$500.00.

Notes

Once submitted, this choice will take effect on 2020/03/23.

Update Elections
Discard Changes

Select the **Update Elections** button to save your choices.
 Select the **Discard Changes** button to go back and change your choices.

Health Spending Account (HSA)

1. Click the **Enrol** button for the **Health Spending Account**.
2. Review the important information about your Health Spending Account. Any excess credits default to this account. To change the amount, change your Wellness Spending Account amount, or change your health and dental elections.

Health Spending Account Enrol

Current: No Coverage.

Benefits Enrolment

Health Spending Account [Overview of All Plans](#)

Amin L Rippenhagen

The Health Spending Account allows you to use excess credits to pay for some Health expenses. For detailed information about Health Spending Accounts click "Overview of All Plans" link to review details about your option choices.

Any excess credits after Health and Dental options have been made will default to your Health Spending Account. This amount can be allocated between a Wellness Spending Account and your Health Spending Account. The amount indicated below reflects your available excess credits.

i Remaining excess credits default to this Account. If you wish to change this amount, change your Wellness Spending Account amount, or update your health and dental elections.

- 3. The Excess Credit Allocation defaults in.
- 4. Click the **Update and Continue** button.

Annual Allocation

MaPS HSA

Credits default to this plan. If you wish to change the amount, first allocate credits in your Wellness Spending Account (WSA).

Excess Credit Allocation

Update and Continue

Select the **Update and Continue** button to save your choice until you are ready to submit your final enrolment.

- 5. A summary displays with your selection.
- 6. If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary.

Benefits Enrolment

Health Spending Account

Amin L Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen to enrol in the MaPS HSA plan with an annual allocation of \$1,878.44.

Notes

Once submitted, this choice will take effect on 2020/03/23.

Update Elections

Select the **Update Elections** button to save your choices.

Basic Life

- 1. Select the **Enrol** button for **Basic Life**.
- 2. Before you make your **Basic Life** selections, review the important information.
- 3. At hire, no medical evidence of insurability is required. But if you choose to increase your coverage level during bi-annual re-enrolment periods, evidence is required.
- 4. Scroll down to make your selections.

Remember, you can review all plans by clicking the link in the top right corner.

Basic Life Enrol

Current: LIFE OPT 2: Salary X 2
 New: LIFE OPT 2: Salary X 2 : \$200,000

Benefits Enrolment

Basic Life [Overview of All Plans](#)

Amin L Rippenhagen

Participation in the Basic Life Insurance benefit is mandatory. You must select one of the three option choices.

Click "Overview of All Plans" link above to review details about your option choices. Please note that at hire and during a qualified life event, no medical evidence of insurability is required. However, if you wish to increase your coverage level during bi-annual re-enrolment periods, medical evidence of insurability will be required and any changes to your coverage will not take effect until approved by the insurer.

i Your current coverage is: MaPS Life Insurance Option 2: Salary X 2 This coverage will continue if you do not make a choice.

Basic Life coverage is mandatory and is required before enrolling in the following optional plans:
 Optional Employee Life
 Optional Child Life
 Optional Spousal Life

- 5. To explore option costs, click the Benefits Calculator.
- 6. This launches in a new window. You will have to enter your UofC username and password.
- 7. When done reviewing navigate back to the **Benefits Enrolment** tab.
- 8. Review or change your **Coverage Level** as per your needs. If you do not make a selection, your coverage defaults to Option 2.

Select an Option

If you would like to explore various option costs, click [Benefits Calculator](#).

Coverage Level	Your Annual Cost
<input type="radio"/> MaPS Life Insurance Option 1 (\$100,000)	127.68
<input checked="" type="radio"/> MaPS Life Insurance Option 2 (\$200,000)	255.12
<input type="radio"/> MaPS Life Insurance Option 3 (\$420,000)	573.60

9. Designate your beneficiaries. Put a percentage amount for at least one beneficiary.
10. To add a beneficiary not already listed, navigate back to the **Enrolment Summary** page. It is important that you complete this section to avoid any delays should a claim be made.

Note: You can't change the **Allocation as** field from Percent (the drop down is deceiving).

Designate Your Beneficiaries

The following table displays a list of your eligible beneficiaries. If a beneficiary is missing from this list, or you wish to make changes to their personal information, please click **Update and Continue** on this page and return to Review/Update Dependent Data on the Enrolment Summary page. Once you have updated the beneficiary information, return to this page to make your allocations.

Refer to [Naming Beneficiaries](#) for details on naming beneficiaries.

You may designate any or all of the following individuals as Primary or Secondary beneficiaries by allocating a percent of the total benefit. Secondary beneficiaries receive benefits only if all Primary beneficiaries are deceased. If there is anyone on your list that you do not want to receive your benefit just leave their percentage blank or indicate 0%.

You must print and sign the beneficiary designation form which is provided at the end of the enrolment process. If you do not designate a beneficiary, there may be delays or issues in the event of a claim. The designation in self-service is for display purposes. The original, signed Group Benefits - Beneficiary Designation form is required for claims. If no signed designation is on file, the claim would be paid to your estate.

*Enter Primary Allocations as

*Enter Secondary Allocations as

Allocation Details					
Name	Relationship	Current Primary Percent	Current Secondary Percent	New Primary Allocation	New Secondary Allocation
Elan Rippenhagen	Spouse			100	
Zoe Louise Rippenhagen	Child				
Total				0	0

11. Click the **Update and Continue** button.
12. A summary displays of your selections.
13. If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Update and Continue
Discard Changes

Benefits Enrolment

Basic Life

Amin L Rippenhagen

Important: Review this page to confirm your choice.

Your Choice

You have chosen MaPS Life Insurance Option 2 (\$200,000) coverage.

Your Estimated annual Cost

Annual Cost \$224.40

Your Primary Beneficiary Allocations

Primary Allocation Details		
Name	Relationship	Percent of Benefit
Elan Rippenhagen	Spouse	100

Your Secondary Beneficiary Allocations

You have not designated any secondary beneficiaries.

Notes

The amount of coverage for this plan is based upon your salary, and will vary in accordance with any changes to your salary over time. Once submitted, this choice will take effect on 2020/03/23. Deductions for this benefit will start in the pay period beginning 2020/04/01.

Update Elections
Discard Changes

Optional Employee Life

1. Click the **Enrol** button for **Optional Employee Life**.
2. Before you make your **Optional Employee Life** selections, review the important information.
3. If you choose to enrol, medical evidence of insurability is required.
4. Scroll down to make your selections.

Remember, you can review all plans by clicking the link in the top right corner.

5. If you would like to enrol in this additional insurance, select MaPS Optional Life Insurance.
6. Enter a **Coverage Amount** in units of \$1,000 up to \$300,000. You will be sent required forms to complete and submit to the provider. Your coverage does not begin until approval is received from the provider.

Optional Employee Life Enrol

Current: No Coverage.
New: No Coverage.

Benefits Enrolment

Optional Employee Life [Overview of All Plans](#)

Amin L Rippenhagen

Optional Life Insurance is available in units of \$1,000 up to a maximum of \$300,000 subject to medical evidence of insurability. The cost of Optional Life depends on the amount of coverage chosen and your age, gender and smoking status.

If you wish to enrol or increase your amount of coverage, Benefits will send the required forms to you to complete and send to the insurer. Please note that coverage under this benefit and associated payroll deductions will not take effect until approval is received from the insurer.

If you would like to explore various option costs, click [Benefits Calculator](#).

i Your current coverage is: **No Coverage**. This coverage will continue if you do not make a choice.

Enrolment in this benefit requires medical evidence of insurability. If you select this choice, you will receive an Evidence of Medical Insurability form from Benefits, which you must complete and send to the insurer.

This benefit plan requires enrolment in one of the following plans:
Basic Life

Select an Option

No, I do not want to enrol

Yes MaPS Optional Life Insurance

Enter a Coverage Amount

This plan requires that you specify a coverage amount. Enter an amount to indicate your desired coverage. Your annual premium rate for this plan is \$6.0000 per \$1,000 of coverage.

Coverage Amount

7. Designate your beneficiaries. To add a beneficiary, navigate back to the **Enrolment Summary** page.

Note: You can't change the **Allocation as** field from Percent (the drop down is deceiving).

Designate Your Beneficiaries

The following table displays a list of your eligible beneficiaries. If a beneficiary is missing from this list, or you wish to make changes to their personal information, please click [Update and Continue](#) on this page and return to [Review/Update Dependent Data](#) on the Enrolment Summary page. Once you have updated the beneficiary information, return to this page to make your allocations.

Refer to [Naming Beneficiaries](#) for details on naming beneficiaries.

You may designate any or all of the following individuals as Primary or Secondary beneficiaries by allocating a percent of the total benefit. Secondary beneficiaries receive benefits only if all Primary beneficiaries are deceased. If there is anyone on your list that you do not want to receive your benefit just leave their percentage blank or indicate 0%.

You must print and sign the beneficiary designation form which is provided at the end of the enrolment process. If you do not designate a beneficiary, there may be delays or issues in the event of a claim. The designation in self-service is for display purposes. The original, signed Group Benefits - Beneficiary Designation form is required for claims. If no signed designation is on file, the claim would be paid to your estate.

*Enter Primary Allocations as

*Enter Secondary Allocations as

Allocation Details					
Name	Relationship	Current Primary Percent	Current Secondary Percent	New Primary Allocation	New Secondary Allocation
Elan Rippenhagen	Spouse			<input type="text" value="50"/>	<input type="text"/>
Zoe Louise Rippenhagen	Child			<input type="text" value="50"/>	<input type="text"/>
Total				50	0

8. Click the **Update and Continue** button.

9. A summary displays of your selections.
10. If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Optional Employee Life

Amin L Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen MaPS Optional Life Insurance coverage for \$100,000.

Your Estimated annual Cost

Annual Cost	\$118.80
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Your Primary Beneficiary Allocations

Primary Allocation Details

Name	Relationship	Percent of Benefit
Elan Rippenhagen	Spouse	50
Zoe Louise Rippenhagen	Child	50

Your Secondary Beneficiary Allocations

You have not designated any secondary beneficiaries.

Notes

You will receive a form from Benefits to complete and send to the insurer before this coverage can take effect. The premium for this plan is based upon your age, gender, and smoker status as of the end of each pay period. The cost above is calculated based on the smoker status in our records, which may not be up-to-date. Coverage and deductions will take effect when approval has been received from the insurer.

Select the **Update Elections** button to save your choices.
 Select the **Discard Changes** button to go back and change your choices.

Optional Spousal Life

1. Click the **Enrol** button for Optional Spousal Life.
2. Review the important information about Optional Spousal Life.
3. If you choose to enrol, medical evidence of insurability is required.
4. Scroll down to make your selections.

Optional Spousal Life Enrol

Current: No Coverage.
New: No Coverage.

Benefits Enrolment

Optional Spousal Life Overview of All Plans

Amin L Rippenhagen

Optional Life Insurance is available for your spouse in units of \$1,000 up to a maximum of \$300,000 subject to medical evidence of insurability. The cost of Optional Life depends on the amount of coverage chosen and the age, gender and smoking status of your spouse. You, as the employee, are automatically the beneficiary.

If you wish to enrol or increase your amount of coverage, Benefits will send the required forms to you to complete and send to the insurer. Please note that coverage under this benefit and associated payroll deductions will not take effect until approval is received from the insurer.

If you would like to explore various option costs, click [Benefits Calculator](#).

i Your current coverage is: **No Coverage**. This coverage will continue if you do not make a choice.

Enrolment in this benefit requires medical evidence of insurability. If you select this choice, you will receive an Evidence of Medical Insurability form from Benefits, which you must complete and send to the insurer.

This benefit plan requires enrolment in one of the following plans:
Basic Life

5. If you would like to enrol in this additional insurance, select MaPS Spousal Life Insurance.
6. Enter a **Coverage Amount** in units of \$1000 up to \$300,000. You will be sent required forms to complete and submit to the provider. Your spousal coverage does not begin until approval is received from the provider.

Notes

If you select this choice, you will receive an Evidence of Medical Insurability form from Benefits, which you must complete and send to the insurer.

Select an Option

No, I do not want to enrol

Yes MaPS Spousal Life Insurance

Enter a Coverage Amount

This plan requires that you specify a coverage amount. Enter an amount to indicate your desired coverage. Your annual premium rate for this plan is \$0.5280 per \$1,000 of coverage.

Coverage Amount

You will be required to provide Medical Evidence of Insurability if you choose a coverage amount of \$1 or greater.

7. Enrol your spouse. To add a dependent, navigate back to the **Enrolment Summary** page.

Enrol Your Dependents

The following table displays the dependents who are covered in this benefit. Should you wish to make changes to your dependents, please click *Update and Continue* to return to the Enrolment Summary page where you can Review/Update Dependent Data, then return to this page to complete your enrolment. You will be required to provide Medical Evidence of Insurability if you choose a coverage amount of \$1 or greater.

Allocation Details		
Name	Relationship	Covered
Elan Rippenhagen	Spouse	<input checked="" type="checkbox"/>

8. Click the **Update and Continue** button.
9. A summary displays of your selections.
10. If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Update and Continue
Discard Changes

Benefits Enrolment

Optional Spousal Life

Amin L Rippenhagen

i

Your Choice

You have chosen MaPS Spousal Life Insurance coverage for \$50,000.

Your Estimated annual Cost

Annual Cost	\$26.40
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Your Covered Dependents

Primary Allocation Details

Name	Relationship	Amount
Elan Rippenhagen	Spouse	\$50,000

Notes

You will receive a form from Benefits to complete and send to the insurer before this coverage can take effect.

Coverage and deductions will take effect when approval has been received from the insurer.

Update Elections
Discard Changes

Select the **Update Elections** button to save your choices.

Select the **Discard Changes** button to go back and change your choices.

Optional Child Life

1. Click the **Enrol** button for Optional Child Life.
2. Review the important information about Optional Child Life.
3. Scroll down to make your selections.

Optional Child Life Enrol

Current: No Coverage.

New: No Coverage.

Benefits Enrolment

Optional Child Life [Overview of All Plans](#)

Amin L Rippenhagen

Optional Child Life is available for your eligible dependent child(ren) in units of \$5,000 to a maximum of \$15,000 per insured child. The amount of coverage selected is applicable to all of your eligible dependent children. You, as the employee, are automatically the beneficiary.

If you would like to explore various option costs, click [Benefits Calculator](#).

i Your current coverage is: No Coverage. This coverage will continue if you do not make a choice.

This benefit plan requires enrolment in one of the following plans:
Basic Life

- If you would like to enrol in this additional insurance, select MaPS Child Optional Life.
- Enter a **Coverage Amount** in units of \$5,000 up to \$15,000.

Select an Option

No, I do not want to enrol

Yes MaPS Child Optional Life

Enter a Coverage Amount

This plan requires that you specify a coverage amount. Enter an amount to indicate your desired coverage. Your annual premium rate for this plan is \$2,640 per \$1,000 of coverage. You must enter either \$5,000, \$10,000 or \$15,000.

Coverage Amount

- Enrol your child. To add a dependent, navigate back to the **Enrolment Summary** page.

Enrol Your Dependents

The following table displays the dependents who are covered in this benefit. Should you wish to make changes to your dependents, please click *Update and Continue* to return to the Enrolment Summary page where you can Review/Update Dependent Data, then return to this page to complete your enrolment.

Allocation Details

Name	Relationship	Covered
Zoe Louise Rippenhagen	Child	<input checked="" type="checkbox"/>

- Click the **Update and Continue** button.
- A summary displays of your selections.
- If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Optional Child Life

Amin L. Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen MaPS Child Optional Life coverage for \$10,000.

Your Estimated annual Cost

Annual Cost	\$26.40
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Your Covered Dependents

Primary Allocation Details

Name	Relationship	Amount
Zoe Louise Rippenhagen	Child	\$10,000

Notes

Once submitted, this choice will take effect on 2020/03/23. Deductions for this benefit will start in the pay period beginning 2020/04/01.

Select the **Update Elections** button to save your choices.
Select the **Discard Changes** button to go back and change your choices.

AD&D

1. Employees are automatically insured for Basic Accidental Death and Dismemberment (AD&D) with a principle sum of \$100,000. This benefit provides coverage should you experience an accident resulting in death or serious injury. Your designation of beneficiary for Basic AD&D is the same as for Basic Life Insurance, therefore no action is required for this benefit.

AD&D
 Current: MaPS AD&D: \$100,000
 New: MaPS AD&D: \$100,000

Voluntary Employee AD&D

1. Click the **Enrol** button for **Voluntary Employee AD&D**.
2. Review the important information about Voluntary Employee AD&D.
3. Select an Option, to enrol or not.
4. If you choose to enrol, enter a Coverage Amount in units of \$1,000 up to \$250,000.

Voluntary Employee AD&D Enrol
 Current: No Coverage.
 New: No Coverage.

Benefits Enrolment

Voluntary Employee AD&D [Overview of All Plans](#)

Amin L Rippenhagen

Voluntary Accidental Death & Dismemberment (AD&D) is available to employees and provides coverage for death or injury resulting from an accident. Coverage can be purchased in units of \$1,000 to a maximum of \$250,000.

i Your current coverage is: No Coverage. This coverage will continue if you do not make a choice.

Select an Option

No, I do not want to enrol
 Yes MaPS Voluntary ADD

Enter a Coverage Amount

This plan requires that you specify a coverage amount. Enter an amount to indicate your desired coverage. Your annual premium rate for this plan is \$0.1680 per \$1,000 of coverage.

Coverage Amount

- Designate your beneficiaries. To add a beneficiary, navigate back to the **Enrolment Summary** page.

Note: You can't change the **Allocation as** fields from Percent (the drop down is deceiving).

Designate Your Beneficiaries

The following table displays a list of your eligible beneficiaries. If a beneficiary is missing from this list, or you wish to make changes to their personal information, please click [Update and Continue](#) on this page and return to [Review/Update Dependent Data](#) on the Enrolment Summary page. Once you have updated the beneficiary information, return to this page to make your allocations.

Refer to [Naming Beneficiaries](#) for details on naming beneficiaries.

You may designate any or all of the following individuals as Primary or Secondary beneficiaries by allocating a percent of the total benefit. Secondary beneficiaries receive benefits only if all Primary beneficiaries are deceased. If there is anyone on your list that you do not want to receive your benefit just leave their percentage blank or indicate 0%.

You must print and sign the beneficiary designation form which is provided at the end of the enrolment process. If you do not designate a beneficiary, there may be delays or issues in the event of a claim. The designation in self-service is for display purposes. The original, signed Group Benefits - Beneficiary Designation form is required for claims. If no signed designation is on file, the claim would be paid to your estate.

*Enter Primary Allocations as Percent ▼

*Enter Secondary Allocations as Percent ▼

Allocation Details					
Name	Relationship	Current Primary Percent	Current Secondary Percent	New Primary Allocation	New Secondary Allocation
Elan Rippenhagen	Spouse			75	
Zoe Louise Rippenhagen	Child			25	
Total				75	0

- Click the **Update and Continue** button.

Update and Continue

Discard Changes

- A summary displays of your selections.
- If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Voluntary Employee AD&D

Amin L Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen MaPS Voluntary AD&D coverage for \$5,000.

Your Estimated annual Cost

Annual Cost \$0.84

Your Primary Beneficiary Allocations

Primary Allocation Details

Name	Relationship	Percent of Benefit
Elan Rippenhagen	Spouse	75
Zoe Louise Rippenhagen	Child	25

Your Secondary Beneficiary Allocations

You have not designated any secondary beneficiaries.

Notes

Once submitted, this choice will take effect on 2020/03/23. Deductions for this benefit will start in the pay period beginning 2020/04/01.

Update Elections **Discard Changes**

Select the **Update Elections** button to save your choices.
 Select the **Discard Changes** button to go back and change your choices.

Voluntary Spousal AD&D

- Click the **Enrol** button for **Voluntary Spousal AD&D**.
- Review the important information about Voluntary Spousal AD&D.
- Select an Option, to enrol or not.

Voluntary Spousal AD&D **Enrol**

Current: No Coverage.
 New: No Coverage.

Benefits Enrolment

Voluntary Spousal AD&D [Overview of All Plans](#)

Amin L Rippenhagen

Voluntary Accidental Death & Dismemberment (AD&D) is available for your spouse and provides coverage for death or injury resulting from an accident. Coverage can be purchased in units of \$1,000 to a maximum of \$250,000. You, as the employee, are automatically the beneficiary.

i Your current coverage is: **No Coverage. This coverage will continue if you do not make a choice.**

Select an Option

No, I do not want to enrol
 Yes MaPS Voluntary Spousal ADD

Update and Continue **Discard Changes**

- If you choose to enrol, enter a Coverage Amount in units of \$1,000 up to \$250,000.

Select an Option

No, I do not want to enrol

Yes MaPS Voluntary Spousal ADD

Enter a Coverage Amount

This plan requires that you specify a coverage amount. Enter an amount to indicate your desired coverage. Your annual premium rate for this plan is \$0.1680 per \$1,000 of coverage.

Coverage Amount

- Enrol your spouse. To add a dependent, navigate back to the **Enrolment Summary** page.

Enrol Your Dependents

The following table displays the dependents who are covered in this benefit. Should you wish to make changes to your dependents, please click *Update and Continue* to return to the Enrolment Summary page where you can Review/Update Dependent Data, then return to this page to complete your enrolment.

Allocation Details

Name	Relationship	Covered
Elan Rippenhagen	Spouse	<input type="checkbox"/>

- Click the **Update and Continue** button.
- A summary displays of your selections.
- If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Voluntary Spousal AD&D

Amin L Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen MaPS Voluntary Spousal AD&D coverage for \$25,000.

Your Estimated annual Cost

Annual Cost	\$4.20
-------------	--------

Your Covered Dependents

Primary Allocation Details

Name	Relationship	Amount
Elan Rippenhagen	Spouse	\$25,000

Notes

Once submitted, this choice will take effect on 2020/03/23. Deductions for this benefit will start in the pay period beginning 2020/04/01.

Select the **Update Elections** button to save your choices.
Select the **Discard Changes** button to go back and change your choices.

Employee Critical Illness

1. Click the **Enrol** button for Employee Critical Illness.
2. Before you make your **Employee Critical Illness** selections, review the important information.
3. Scroll down to make your selections.

Remember, you can review all plans by clicking the link in the top right corner.

4. Enter your coverage amount.
5. Click the Update and Continue button.

Employee Critical Illness Enrol

Current: No Coverage.
New: No Coverage.

Benefits Enrolment

Employee Critical Illness [Overview of All Plans](#)

Amin L Rippenhagen

Voluntary Employee Critical Illness is insurance designed to ease the heavy financial cost associated with diagnosis of a specific illness with payment of a non-taxable lump sum benefit. Coverage can be purchased in units of \$1,000 up to a maximum of of \$225,000. Within the first 31 days of eligibility you may purchase up to \$30,000 without providing medical evidence of insurability. Any amount over \$30,000 or any amount after 31 days requires evidence of insurability.

Costs are based on your age, gender and smoker status. Click "Overview of All Plans" to view your option choices.

i Your current coverage is: No Coverage. This coverage will continue if you do not make a choice.

Select an Option

No, I do not want to enrol

Yes Voluntary Critical Illness MPS

Enter a Coverage Amount

This plan requires that you specify a coverage amount. Your annual premium rate for this plan is \$4,6440 per \$1,000 of coverage.

Coverage Amount

You will be required to provide Medical Evidence of Insurability if you choose a coverage amount of \$30,001 or greater. Please download the [Voluntary Critical Illness Application Form](#) and complete and send to benefits@ucalgary.ca.

Update and Continue
Discard Changes

Select the **Update and Continue** button to save your choice until you are ready to submit your final enrolment.

Select the **Discard Changes** button to ignore all entries made on this page and return to the Enrolment Summary.

- A summary displays of your selections.
- Complete the Voluntary Critical Illness Application Form, then send it to benefits@ucalgary.ca. Your coverage will take effect when the provider approves the request.
- If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Employee Critical Illness

Amin L Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen Voluntary Critical Illness MPS coverage for \$50,000.

Your Estimated annual Cost

Annual Cost	\$232.20
-------------	----------

Notes

Remember to download the [Voluntary Critical Illness Application Form](#) and complete and send to benefits@ucalgary.ca.
 The premium for this plan is based upon your age as of the end of each pay period. As a result, your deduction amount may change at your next birthday.
 Coverage for \$30,000 or less will take effect on 2020/03/23. Additional coverage will take effect when the approval has been received from the insurer.

Select the Update Elections button to save your choices.
 Select the Discard Changes button to go back and change your choices.

Spousal Critical Illness

- Click the **Enrol** button for Spousal Critical Illness.
 - Before you make your **Spousal Critical Illness** selections, review the important information.
 - Scroll down to make your selections.
- Remember, you can review all plans by clicking the link in the top right corner.

Spousal Critical Illness

Current: No Coverage.
 New: No Coverage.

- Enter your coverage amount.
- Note that you are required to provide medical evidence of insurability if you choose coverage over \$15,000.

Benefits Enrolment

Spousal Critical Illness [Overview of All Plans](#)

Amin L Rippenhagen

Voluntary Spousal Critical Illness is insurance designed to ease the heavy financial cost associated with diagnosis of a specific illness with payment of a non-taxable lump sum benefit. Coverage can be purchased in units of \$1,000 up to a maximum of \$225,000 subject to medical evidence of insurability.

Within the first 31 days of eligibility you may purchase up to \$15,000 without providing medical evidence of insurability. Any amount over \$15,000 or any amount after 31 days requires evidence of insurability.

Costs are based on your spouse's age, gender and smoker status.

i Your current coverage is: No Coverage. This coverage will continue if you do not make a choice.

Select an Option

No, I do not want to enrol

Yes Spousal Critical Illness MPS

Enter a Coverage Amount

This plan requires that you specify a coverage amount. Your annual premium rate for this plan is \$2,4840 per \$1,000 of coverage.

You will be required to provide Medical Evidence of Insurability if you choose a coverage amount of \$15,001 or greater. Please download the [Voluntary Critical Illness Application Form](#) and complete and send to benefits@ucalgary.ca.

5. Select to enrol your spouse.
6. Click the **Update and Continue** button.

Enrol Your Dependents

The following table displays the dependents who are covered in this benefit. Should you wish to make changes to your dependents, please click *Update and Continue* to return to the Enrolment Summary page where you can Review/Update Dependent Data, then return to this page to complete your enrolment. You will be required to provide Medical Evidence of Insurability if you choose a coverage amount of \$15,001 or greater. Please download the [Voluntary Critical Illness Application Form](#) and complete and send to benefits@ucalgary.ca.

Allocation Details

Name	Relationship	Covered
Elan Rippenhagen	Spouse	<input checked="" type="checkbox"/>

Update and Continue

Discard Changes

Select the **Update and Continue** button to save your choice until you are ready to submit your final enrolment.

Select the **Discard Changes** button to ignore all entries made on this page and return to the Enrolment Summary.

7. A summary displays of your selections.
8. Download the Voluntary Critical Illness Application Form. Complete it and send it to benefits@ucalgary.ca.
9. If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Spousal Critical Illness

Amin L. Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen Spousal Critical Illness MPS coverage for \$25,000.

Your Estimated annual Cost

Annual Cost	\$62.10
-------------	---------

Your Covered Dependents

Primary Allocation Details

Name	Relationship	Amount
Elan Rippenhagen	Spouse	\$25,000

Notes

Remember to download the [Voluntary Critical Illness Application Form](#) and complete and send to benefits@ucalgary.ca.

Coverage for \$15,000 or less will take effect on 2020/03/23. Additional coverage will take effect when the approval has been received from the insurer.

Update Elections Discard Changes

Select the **Update Elections** button to save your choices.

Select the **Discard Changes** button to go back and change your choices.

Long-Term Disability

1. Click the **Enrol** button for **Long-Term Disability**.
 2. Before you make your **Long-Term Disability** selections, review the important information.
 3. Note there is a six month waiting period for this coverage.
 4. Scroll down to make your selections. If you do not make a selection, your coverage defaults to Option 1.
- Remember, you can review all plans by clicking the link in the top right corner.
5. Review or change your **Coverage Level** as per your needs.

Long-Term Disability Enrol

Current: MaPS LTD Option 1
New: MaPS LTD Option 1

Benefits Enrolment

Long-Term Disability Overview of All Plans

Amin L Rippenhagen

You must select one of three options for Long-Term Disability. Coverage is mandatory. Click on Overview of All Plans link to review details about your option choices.

Your costs will be calculated based on your annual earnings and the option selected.

There is a six-month waiting period for this coverage.

i Your current coverage is: MaPS LTD Option 1 This coverage will continue if you do not make a choice.

Select an Option

Below are the options with your annual cost.

Select one of the following plans:

Plan Name	Total
<input checked="" type="radio"/> MaPS LTD Option 1	\$1,527.36
<input type="radio"/> MaPS LTD Option 2	\$1,578.72
<input type="radio"/> MaPS LTD Option 3	\$1,783.44

6. Click the **Update and Continue** button.

Update and Continue

Discard Changes

7. A summary displays of your selections.
8. If you are happy with your selection, click the **Update Elections** button to return to the Enrolment Summary. Otherwise click **Discard Changes** to update your selection.

Benefits Enrolment

Long-Term Disability

Amin L Rippenhagen

i Important: Review this page to confirm your choice.

Your Choice

You have chosen MaPS LTD Option 1 coverage.

Your Estimated annual Cost

Annual Cost	\$1,527.36
-------------	------------

Notes

Once submitted, this choice will take effect on 2020/09/23. Deductions for this benefit will start in the pay period beginning 2020/10/01.

Select the **Update Elections** button to save your choices.
Select the **Discard Changes** button to go back and change your choices.

Pension

1. Click the **Enrol** button for **Pension**.
2. Depending on your eligibility, Pension is mandatory and can't be deselected.

Pension

Current: Universities Academic Pension
New: Universities Academic Pension

Benefits Enrolment

Pension

Amin L Rippenhagen

MaPS employees are members of the Universities Academic Pension Plan (UAPP) and is mandatory. UAPP is a defined benefit plan that, at retirement, provides a monthly retirement benefit to the member. Employees and the university contribute equally to the UAPP.

i Your current coverage is: **Universities Academic Pension**

Yes Universities Academic Pension

- Designate your beneficiaries. If you have a spouse, he/she is your primary beneficiary. If you don't have a spouse, enter a non-spousal beneficiary in the New Secondary Allocation column, leaving the New Primary Allocation column blank.
- Click the **Update and Continue** button.

Designate Your Beneficiaries

The following table displays a list of your eligible beneficiaries. If a beneficiary is missing from this list, or you wish to make changes to their personal information, please click **Update and Continue** on this page and return to **Review/Update Dependent Data** on the **Enrolment Summary** page. Once you have updated the beneficiary information, return to this page to make your allocations.

Refer to [Naming Beneficiaries](#) for details on naming beneficiaries.

Your spouse, if you have one, is your pension partner, and must be designated as your primary pension beneficiary. Please enter 100% in the primary beneficiary field for your spouse.

You should also designate a non-spousal beneficiary in addition to your spouse in the event that your spouse is also deceased at the time of your death. Use the secondary beneficiary fields for that designation.

If you do not have a spouse, you should designate a non-spousal beneficiary.

When you complete your enrolment, you must print and sign the form that is provided and return it to Human Resources. Please note that the paper form is required, all system records are for display purposes only.

To properly populate the form, you MUST enter your spouse as 100% primary beneficiary. Secondary beneficiaries are used to designate your non-spousal beneficiaries only. Under pension rules, your spouse must be designated primary.

*Enter Primary Allocations as ▼

*Enter Secondary Allocations as ▼

Allocation Details					
Name	Relationship	Current Primary Percent	Current Secondary Percent	New Primary Allocation	New Secondary Allocation
Elan Rippenhagen	Spouse			<input type="text" value="100"/>	<input type="text"/>
Zoe Louise Rippenhagen	Child			<input type="text"/>	<input type="text" value="100"/>
Total				100	0

Update and Continue

Discard Changes

Select the **Update and Continue** button to save your choice until you are ready to submit your final enrolment.


Select the **Discard Changes** button to ignore all entries made on this page and return to the **Enrolment Summary**.

5. A summary displays of your selections.
6. Click the **Update Elections** button to return to the Enrolment Summary.

Benefits Enrolment

Pension

Amin L Rippenhagen



Your Choice

You are participating in Universities Academic Pension.

Your Contributions

Your Primary Beneficiary Allocations

Primary		
Name	Relationship	Percent of Benefit
Eian Rippenhagen	Spouse	100

Your Secondary Beneficiary Allocations

Secondary		
Name	Relationship	Percent of Benefit
Zoe Louise Rippenhagen	Child	100

Notes

Contributions will start with the pay period beginning 2020/03/23.

Select the **Update Elections** button to save your choices.


Select the **Discard Changes** button to go back and change your choices.

Step 5: Finalize Your Selections

1. If you are happy with your selections, click to **Save and Continue**. You can also choose to **Save for Later** if you are not ready to finalize your selections.

Save and Continue
Save for Later

Select the **Save and Continue** button to send your final choices to Human Resources.

 **Important:** Your enrolment will not be complete until you submit your choices at the end of the enrolment process.

2. A **Benefit Enrolment Summary** table populates for your review.
3. Click **OK** to continue.

Note: Your enrolment is not complete until you submit your choices. If you do not submit by the end of the enrolment period, your coverage defaults to single coverage and any excess credits go to your Health Spending Account.

Benefits Enrolment

Amin L Rippenhagen

Prior to submitting your choices to Human Resources, please take a moment to review your selections summarized below.
If you are ready to submit, click OK to continue with the enrolment process. Click Cancel to return to the enrolment page to make changes.

Once you have submitted your choices, they can only be changed within 31 days of a Life Event (or at the time of the next Re-Enrolment for MaPS employees).

Benefit Selections					
Benefit Plan	Covrg Level	Pay Period Employer	Pay Period Employee	Annual Employer	Annual Employee
MaPS Extended Health Option 2	Family	\$45.69		\$1096.56	
MaPS Dental Option 1	Family	\$48.75		\$1170.00	
MaPS Life Insurance Option 2			\$9.35		\$224.40
MaPS Optional Life Insurance			\$6.05		\$145.20
MaPS Spousal Life Insurance			\$1.10		\$26.40
MaPS Child Optional Life			\$1.10		\$26.40
MaPS AD&D		\$0.70		\$16.80	
MaPS Voluntary AD&D			\$0.03		\$0.84
MaPS Voluntary Spousal AD&D			\$0.17		\$4.20
Voluntary Critical Illness MPS			\$10.12		\$243.00
Spousal Critical Illness MPS			\$2.58		\$62.10
MaPS LTD Option 1			\$63.64		\$1527.36

Credit/Cost Summary	
Annual Health Price Tag	\$1096.56
Annual Dental Price Tag	\$1170.00
Annual Excess Credits (or payroll deduction)	\$2378.44
Annual HSA Allocation	\$1878.44
Annual WSA Allocation	\$500.00
Your pro-rated credit amount	
Pro-rated HSA Allocation	\$1565.37
Pro-rated WSA Allocation	\$416.67

Note - all deductions are estimates - actual deductions will be displayed on your paycheque.

OK
Cancel

Errors

1. If you have any errors, click the **Return** button to make changes to your plan selections, or click the **Continue** button (warnings only).
2. Warnings also indicate whether you need to complete an evidence of medical insurability form (for each insurance plan you registered in). This form is provided to you by Benefits once you have submitted your selections.
3. Click the **Continue** button.


Benefits Enrolment

Errors and Warnings


Amin L Rippenhagen

Your enrolment contains some warnings or errors. Please review the following list and make any required changes in your enrolment.


Errors and Warnings

	Optional Employee Life	Warning
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Your enrolment in this benefit plan may requires proof of insurability. For Optional and Spousal Life Insurance as well as increases to MaPS Basic Life and LTD, Benefits will contact you with the appropriate forms for you to complete and submit to the insurer. For Critical Illness (where applicable), please return to the enrolment page and download and complete the form.

	Employee Critical Illness	Warning
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Your enrolment in this benefit plan may requires proof of insurability. For Optional and Spousal Life Insurance as well as increases to MaPS Basic Life and LTD, Benefits will contact you with the appropriate forms for you to complete and submit to the insurer. For Critical Illness (where applicable), please return to the enrolment page and download and complete the form.

	Spousal Critical Illness	Warning
-----------------------------------------------------------------------------------	--------------------------	---------

Your enrolment in this benefit plan may requires proof of insurability. For Optional and Spousal Life Insurance as well as increases to MaPS Basic Life and LTD, Benefits will contact you with the appropriate forms for you to complete and submit to the insurer. For Critical Illness (where applicable), please return to the enrolment page and download and complete the form.

Return	Select the Return button to go back to the Enrolment Summary and correct your benefit choices.
Continue	Select the Continue button to ignore these warnings and submit your benefit choices.

Submit Benefits

1. Review the important information and instructions prior to submitting your benefits.

Benefits Enrolment

Submit Benefits

Amin L Rippenhagen

You have almost completed your enrolment. Prior to submitting your choices, please click the Beneficiary Designation link(s) to the right of the Submit button at the bottom of this page to print and sign your beneficiary designations. Please ensure you print these forms prior to hitting the Submit button. If you do not sign and submit these forms to Human Resources, there may be delays or issues in the event of a claim.

Once you have printed your beneficiary form, if you have no further changes, select the **Submit** button on this page to finalize your benefit choices.

2. Before you click the Submit button, click the links to each form: **Group Benefits – Beneficiary Designation Form**, and **UAPP Designation of Spouse and Non Spouse Beneficiary** (for Academic and MaPS staff only).

Note: When you click each form, ensure your pop-up blocker is set to allow pop-ups on this site.

3. Once you have printed off the forms, and you are done making changes to your benefits, click the **Submit** button.

4. **Submit Confirmation** displays. Click the **Print Enrolment Confirmation** button to generate a confirmation statement of your elections.
5. To return to the **Benefits Enrolment** page, click the OK button.

Do not submit your benefit choices until you have completed your enrolment. You may save your choices on each page and return to the Enrolment Summary as many times as you'd like prior to submitting. Once you select the **Submit** button your benefit choices will be sent to Human Resources for processing and you will no longer be able to make changes.

Once you have submitted your enrolment you will be unable to make changes to our benefits unless you have a qualified life event.

Should you require assistance with your enrolment contact the Integrated Service Centre (ISC) at hr@ucalgary.ca or call 403-220-8800.

Authorize Elections

By submitting your benefit choices you are authorizing the University of Calgary to take deductions from your paycheque to pay for your benefit costs. You are also authorizing the University to send necessary personal information to your selected providers to initiate and support your coverage.

Submit

Cancel

Group Benefits - Beneficiary Designation Form
UAPP Designation of Spouse and Non Spouse
Beneficiary

Select the **Submit** button to send your final choices to Human Resources for processing.

Select the **Cancel** button if you are not ready to submit your choices and wish to return to the Enrolment Summary.

Benefits Enrolment

Submit Confirmation

Amin L Rippenhagen

Your benefit choices have been successfully submitted to Human Resources. You will receive an email confirming your choices and the Benefits team will receive a copy.

Click the **OK** button to return to the Benefits Enrolment page.

OK

A confirmation statement displays. Print it off and keep it to validate your benefits when they come into effect.

Next Steps

Your selections will remain in place until the next re-enrolment period, which take place toward the end of the calendar year, every even year, and become effective January 1st of the following year. You may also have the opportunity to make new allocations if you experience a qualified life event, such as a marriage, divorce, or birth of a first child.

For a qualified life event, review Life Events on the HR web pages at <https://ucalgary.ca/hr/benefits-pension/life-events/maps> and follow the steps provided.

Be sure to send your completed paper beneficiary designation form to Human Resources.