

## HUMAN RESOURCES

<b>Subject</b>	<b>CHANGE OF PERSONAL INFORMATION - PENSION &amp; BENEFITS</b> (formerly titled "2.02 Change of Personal Information - Benefits")		
<b>Procedure Section</b>	<b>6 Benefits and Pension</b>		
<b>No.</b>	6.02		
<b>Exempt Employment Policy References</b>			
<b>Collective Agreement References</b>			
<b>Forms &amp; Other Reference Material</b>	<a href="#">MSP Group Change Request</a> Manulife > <a href="#">Application for Change in benefit coverage</a>		
<b>Status of Approval</b>	Approved	31-May-2013	Margo Kendal

### PREAMBLE:

The pension and group benefit plans have specific requirements with regard to maintaining employee and dependent records. Employees are responsible for notifying Human Resources on a timely basis of any changes that will impact pension and/or group benefits.

### PROCEDURE:

1. Employees will submit, in writing, any changes in marital or dependent status, legal name, address, and telephone promptly to the Human Resources Division.
2. Employees notifying Human Resources of a name change must submit the required documentation (e.g. copy of marriage certificate, birth certificate, etc.) to support the change.
3. Employees wishing to add or delete a dependent for medical or dental coverage must complete the appropriate benefit form and submit it to Human Resources.
4. Addition or deletion of spouses may require supporting documentation.
5. Definition of dependent:

**BC Medical Services Plan** – a spouse and children who are deemed to be resident.

Spouse – a resident who is either married to or is living and cohabiting in a marriage-like relationship with the applicant, and may be of the same gender as the plicant, ant5 Tm[ ]T&T EMC 9.54 Tm0 g[t]13(h)14(e)14[t]13(h)

**Insurance Carrier** – your spouse or child who is covered under the Provincial Plan (MSP)

Spouse – your legal spouse, or a person continuously living with you in a role like that of a marriage partner for at least 12 months (24 months for Medical Travel Benefits).

Child – your natural or adopted child or stepchild (a stepchild must be living with you to be eligible), who is: unmarried, under age 21, or under age 25 if a full-time student, not employed on a full-time basis and not eligible for coverage as an employee under this or any other Group Benefit Program. *A child who is incapacitated on the date he or she reaches the age when coverage would normally terminate will continue to be an eligible dependent. However, the child must have been covered under this Benefit Program immediately prior to that date. A child is considered incapacitated if he or she is incapable of engaging in any substantially gainfully activity and it dependent on the employee for support, maintenance and care, due to a mental or physical handicap. The administrator, acting on behalf of your*