

Government of Newfoundland and Labrador
Executive Council
Treasury Board Secretariat
Benefits Administration

GROUP INSURANCE CONTINUATION FORM

<u>Please email this form to GroupInsurance@gov.nl.ca thirty (30) days prior to commencing leave.</u> Failure to submit may result in cancellation of group insurance coverage.

Continuation of the Group Insurance Program is not offered if self-employed or working with another employer. Your only option is to convert your coverage over to an individual policy with Canada Life within 31 days after your employment terminates. If you choose not to continue, coverage will terminate and Canada Life will forward your conversion options.

While on continuation you are required to pay your premiums bi-weekly. The only exception is parental leave (payment options for parental leave options are described below). Submission of this form is confirmation you will provide biweekly premium payments for the duration of your leave. Once your leave commences, a letter confirming your bi-weekly payment amounts will be sent from the Group Insurance Division to the email address you provide below (if a mailed copy to your home address is preferred, please leave the email address section blank below). If payments are not received at this office on the date due, Canada Life will be notified to cancel all insurance coverage as of the date of last premiums received. Any claims incurred after that date will not eligible and claims recovery will be made by Canada Life if required.

Name:	Employee ID #:
Department:	Telephone:
Mailing Address:	
Email Address:	
I WISH TO REMAIN IN THE GROUP II	NSURANCE PLAN: ☐ YES ☐ NO
Leave Start Date:	Expected Date of Return:
Please tick which category applies: □ Seasonal Layoff □ Special Leave Without Pay (If Extended Sick Leave, and eligible for Waiver of premium or Log Term Disability, these benefits must be applied for within 10 months of the disabling condition). □ Education Leave □ Parental Leave □ Parental Leave Option A: I wish to submit payment of Group Insurance premiums biweekly for duration of my leave □ Parental Leave Option B: I wish to have my Group Insurance premiums recovered from my biweekly pay when I return to work *If taking 18 months of parental leave, you may be required to pay the employer share after you 12 months. If you are a Bargaining Unit employee, please refer to your Collective Agreement for details on the duration of parental leave. If you are a Non-Bargaining employee please refer to to	

OTHER IMPORTANT FACTS YOU SHOULD KNOW

- Long Term Disability can only be continued while on Maternity Leave.
- If you elect to cancel Dental benefits while on continuation you will have to re-apply for coverage upon return to work, and each insured person will be restricted to \$100.00 for the first 12 months.



•	Long term disability and/or Waiver of Premium must be applied for within 4 months but no later than 10 months from the date of disabling condition. Benefits can only be continued for a maximum of 18 months.		
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En	nployee Signature	Date	