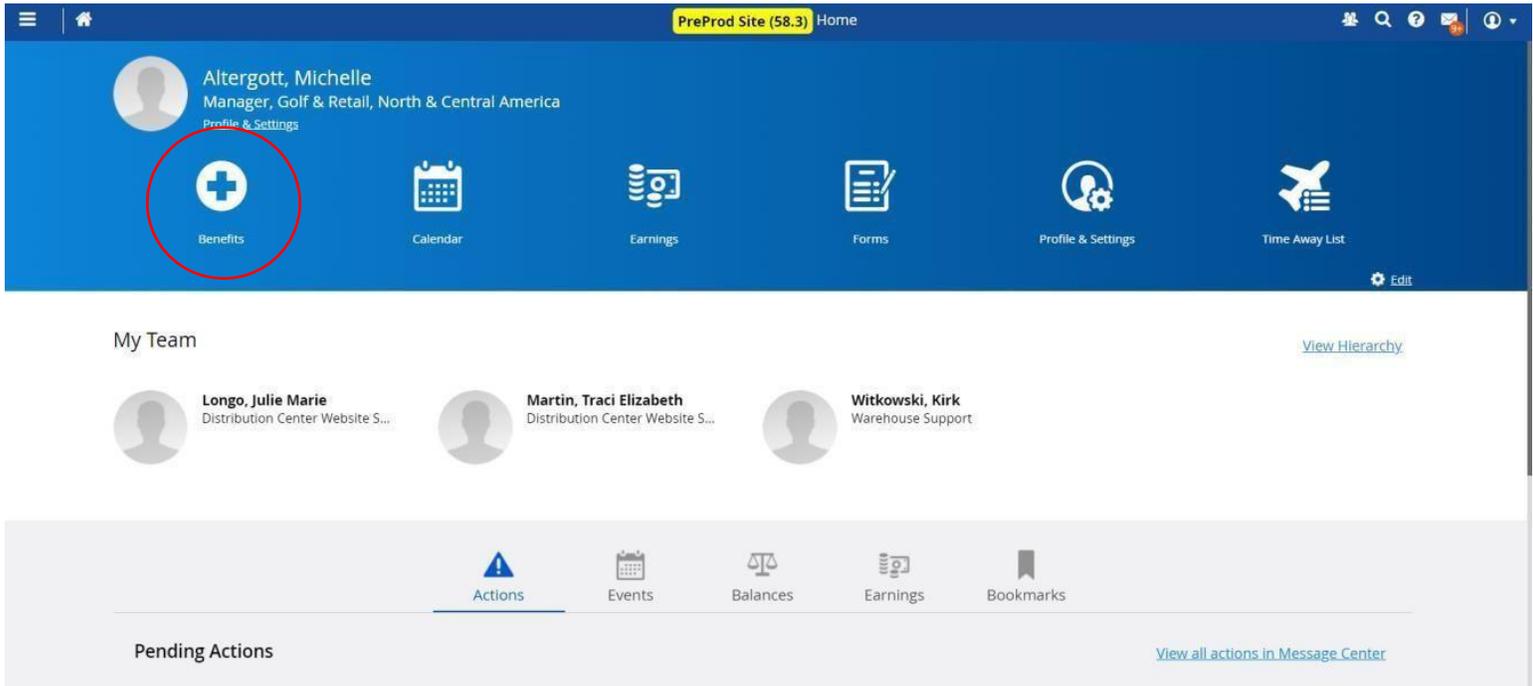


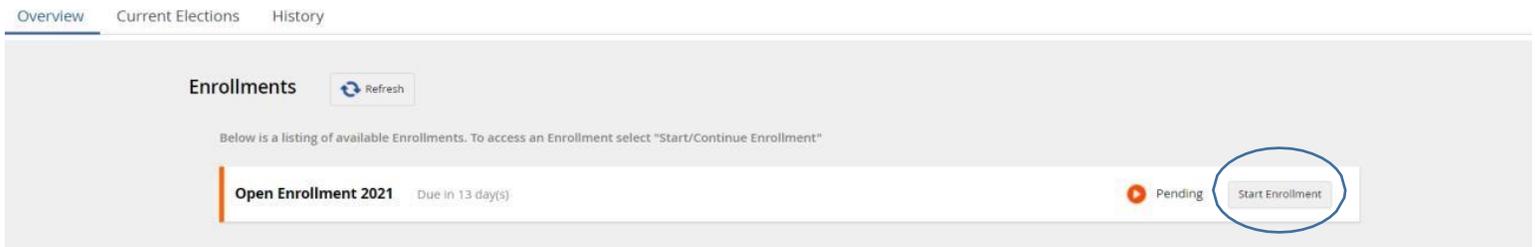
SOP Name: Benefits Enrollment

SOP Purpose: CAN Executive/ Salaried/Non-Union/Union EE will learn how to select your benefits and complete your Self-Serve new enrollment.

1. Log into your **Dayforce** page. From the landing page, select the **“Benefits”** icon.



2. This page will show you any Enrollments available at this time. Look for **“Open Enrollment 2021”** and select **“Start Enrollment”**.



- This will bring you to the **New Hire Enrollment** introduction. Select the **“Next”** button to begin enrollment.

CAN New Hire Enrollment

Your Current Elections CA\$23.64

Introduction Profile Elections Confirmation Summary

CAN New Hire Enrollment

Due in 2 day(s) - 3/31/2022

Close

Next

Close

Next

Enrollment

Health

CWR - Medical - Dental - Vision - GTA

Auto-Enrolled Benefits

Manulife Basic Life Plan

CHUBB Basic AD&D Plan

Manulife Short-Term Disability

Manulife Long-Term Disability

Optional Life/AD&D

CHUBB Employee Optional AD&D Plan

Manulife Employee Optional Life Plan

- On this page you can **add, remove** or **update** your dependent information.

CAN New Hire Enrollment

Your Current Elections CA\$23.64

Introduction Profile Elections Confirmation Summary

Profile Forms

Please review and confirm the profile information below. Upon completion, please proceed by selecting "Next".

Close Save Draft Back Next

Current Dependent Information

Current Dependent Information

Below is the list of your current dependents. You have the ability to Add, Edit, and/or Remove dependent(s).

Currently, you do not have any dependents.

+ Add

Close Save Draft Back Next

- Please note, "**Student category**" should only be selected for students who are between the ages of **21 to 26 years** and who are pursuing a **continuous** education.

Add New Dependent

Personal Information

** Required Field*

First Name*

Middle Name

Last Name*

Gender*

Relationship*

Birth Date*

National ID Number

National ID Expiry Date

Tobacco/Smoker

Date last used Tobacco/Smoked

Student

Disabled

Marital Status

Primary Address

Your address will be used as the dependent's primary address, unless a new address is entered.

Other Address

Phone Number

Currently does not have a phone number.

CAN New Hire Enrollment
Your Current Elections

Introduction **Profile** Elections Confirmation Summary

Profile Forms

Please review and confirm the profile information below. Upon completion, please proceed by selecting "Next".

Current Dependent Information

Below is the list of your current dependents. You have the ability to Add, Edit, and/or Remove dependent(s).

Name	Relationship	Birth Date	
<input type="checkbox"/> Test Spouse	Spouse	1/1/1997	<input type="button" value="View/Edit"/>
<input type="checkbox"/> Test Child	Child	11/1/2021	<input type="button" value="View/Edit"/>

Health and Wellness

6. You will also be required to complete your **health and wellness status**. Once updated click **“Next”** button.

CAN New Hire Enrollment Your Current Elections CA\$23.64

Introduction **Profile** Elections Confirmation Summary

Current Dependent Information

Health and Wellness

The Health and Wellness form is used when an employee's tobacco use status changes

Health And Wellness

Employee, Test
Status: Active Employee Number: 200003146

Health And Wellness

Effective Start Date*
3/29/2022

Tobacco/Smoker Status*
No

Date Last Used Tobacco/Smoked

Supporting Documents
Please attach your smoking cessation document(s).

Upload Files

Comment
 Add comment to the employee's file.

Close Save Draft Back Next

7. In the Elections form you will notice **single coverage** is **defaulted** for you but **you can decide to choose family coverage if applicable.**

Note: Accor benefits plan is mandatory plan and cannot be waived.

Kindly note, employees should be selecting same coverage level for all Health plans. For example, if single coverage is selected, it should be for Medical/Dental/Vision and GTA (if applicable) and if family coverage is selected it should be for Medical/Dental/Vision and GTA (if applicable)

CAN New Hire Enrollment Your Current Elections CA\$23.64

Introduction Profile **Elections** Confirmation Summary

Benefit Elections
Select your benefit options below. Upon completion, please proceed by selecting "Next".

Close Save Draft Back Next

Health
If you are going to waive your Health coverage. Please submit proof of being covered under your Spouse's medical plan or covered by an individual/provincial form of medical coverage to Accor HR Department. Thank you!

CWR - Medical - Dental - Vision - GTA

You must elect 1 option(s) in the election set.

Option Name Ascending Compare Selected

Option		
<input checked="" type="checkbox"/> CWR - Manulife Dental Single Start Date: 5/30/2022	CA\$33.19 CA\$0.00	<input type="checkbox"/>
CWR - Manulife Medical Single Start Date: 5/30/2022	CA\$39.16 CA\$0.00	<input type="checkbox"/>
CWR - Manulife Vision Single Start Date: 5/30/2022	CA\$4.11 CA\$0.00	<input type="checkbox"/>
GTA - Single Start Date: 5/30/2022	CA\$0.18 CA\$0.00	<input type="checkbox"/>
<input type="checkbox"/> CWR - Manulife Dental Family Start Date: 5/30/2022	CA\$73.17 CA\$0.00	<input type="checkbox"/>

CAN New Hire Enrollment Your Current Elections CA\$23.64

Introduction Profile **Elections** Confirmation Summary

CWR - Medical - Dental - Vision - GTA

You must select 1 option(s) in the election set.

Option Name Ascending Compare Selected

Option	Cost	Start Date	Dependents	Select
<input checked="" type="checkbox"/> CWR - Manulife Dental Single	CA\$33.19 CA\$0.00	5/30/2022		<input type="checkbox"/>
<input checked="" type="checkbox"/> CWR - Manulife Medical Single	CA\$39.16 CA\$0.00	5/30/2022		<input type="checkbox"/>
<input checked="" type="checkbox"/> CWR - Manulife Vision Single	CA\$4.11 CA\$0.00	5/30/2022		<input type="checkbox"/>
<input checked="" type="checkbox"/> GTA - Single	CA\$0.18 CA\$0.00	5/30/2022		<input type="checkbox"/>
<input type="checkbox"/> CWR - Manulife Dental Family	CA\$73.17 CA\$0.00	5/30/2022	• 2 Dependents	<input type="checkbox"/>
<input type="checkbox"/> CWR - Manulife Medical Family	CA\$72.29 CA\$0.00	5/30/2022	• 2 Dependents	<input type="checkbox"/>
<input type="checkbox"/> CWR - Manulife Vision Family	CA\$7.59 CA\$0.00	5/30/2022	• 2 Dependents	<input type="checkbox"/>
<input type="checkbox"/> GTA - Family	CA\$0.35 CA\$0.00	5/30/2022	• 2 Dependents	<input type="checkbox"/>

Show Details

8. If family coverage is selected, you will be required to select all dependents.

Option Details
CWR - Manulife Vision Family

Dependents
Please select dependents to be enrolled.

- Minimum number of Dependent(s): 1
- Maximum number of Dependent(s): 98

+ Add

Dependents	Remove
Child, Test (Child) Birth Date: 11/1/2021	✕
Spouse, Test (Spouse) Birth Date: 1/1/1997	✕

GTA - Family

Dependents
Please select dependents to be enrolled.

- Minimum number of Dependent(s): 1

+ Add

Dependents	Remove
Child, Test (Child) Birth Date: 11/1/2021	✕
Spouse, Test (Spouse) Birth Date: 1/1/1997	✕

Save Cancel

Your Current Elections

Health

EAP
Effective Start: 3/1/2022
Employer: CA\$1.40

The screenshot displays the 'Option Details' dialog box in the Dayforce system. It is divided into two main sections: 'CWR - Manulife Dental Family' and 'CWR - Manulife Medical Family'. Each section has a 'Dependents' area with instructions to 'Please select dependents to be enrolled.' and rules for the number of dependents (1 minimum, 98 maximum). Below these are 'Add' and 'Remove' buttons and a table of selected dependents. The 'CWR - Manulife Dental Family' section shows two dependents: 'Child, Test (Child)' with a birth date of 11/1/2021 and 'Spouse, Test (Spouse)' with a birth date of 1/1/1997. The 'CWR - Manulife Medical Family' section shows one dependent: 'Child, Test (Child)' with a birth date of 11/1/2021. To the right of the dialog is the 'Your Current Elections' section, which includes a 'Health' icon and an 'EAP' option with an effective start date of 3/1/2022 and an employer code of CA\$1.40. At the bottom of the dialog are 'Save' and 'Cancel' buttons.

9. Next, you will review **Auto-Enrolled Benefits**, employee cannot opt out of these plans as these are mandatory plans:

Auto-Enrolled Benefits

To complete your beneficiary designation, please click this [Manulife Beneficiary Designation](#) link. Thank you!

- ▼ Manulife Basic Life Plan
- ▼ CHUBB Basic AD&D Plan
- ▼ Manulife Short-Term Disability
- ▼ Manulife Long-Term Disability

10. Click on “**Basic Life Plan**” to review and scroll down.

Auto-Enrolled Benefits

To complete your beneficiary designation, please click this [Manulife Beneficiary Designation](#) link. Thank you!

Manulife Basic Life Plan

i You may elect in a maximum of 1 option(s) in this election set.
i You have been automatically enrolled in option "CWR Executive/Salaried - Basic Life".

Option Name Ascending ▼ Compare Selected

Option		
<input checked="" type="checkbox"/> CWR Executive/Salaried - Basic Life Start Date: 5/30/2022 • Coverage preset at CA\$140,000.00 Show Details	CA\$8.05 CA\$0.00	<input type="checkbox"/>

11. Click on “**Basic AD&D**” plan to review.

CHUBB Basic AD&D Plan

i You may elect in a maximum of 1 option(s) in this election set.
i You have been automatically enrolled in option "CWR Executive/Salaried - Basic AD&D".

Option Name Ascending ▼ Compare Selected

Option		
<input checked="" type="checkbox"/> CWR Executive/Salaried - Basic AD&D Start Date: 5/30/2022 • Coverage preset at CA\$140,000.00 Show Details	CA\$8.05 CA\$0.00	<input type="checkbox"/>

12. Click on “**Short-Term Disability**” plan to review.

⬆
Manulife Short-Term Disability

i You may elect in a maximum of 1 option(s) in this election set.

i You have been automatically enrolled in option "CWR Salary/Hourly Non-Union w/out Gratuity Short-Term Disability".

Option Name Ascending ▾
Compare Selected
➤

Option		
<input checked="" type="checkbox"/> CWR Salary/Hourly Non-Union w/out Gratuity Short-Term Disability Start Date: 5/30/2022 • Coverage preset at CA\$942.31 Show Details	CA\$0.00	<input type="checkbox"/>

13. Click on “**Long-term Disability Plan**” to review. (if applicable)

⬆
Manulife Long-Term Disability

i You may elect in a maximum of 1 option(s) in this election set.

i You have been automatically enrolled in option "CWR Executive/Salaried Long-Term Disability".

Option Name Ascending ▾
Compare Selected
➤

Option		
<input checked="" type="checkbox"/> CWR Executive/Salaried Long-Term Disability Start Date: 5/30/2022 • Coverage preset at CA\$3,416.47 Show Details	CA\$23.64	<input type="checkbox"/>

14. To enroll in Optional Life/AD&D plan, click on the **drop down button** and select **individual plans** by selecting **coverage**. (Need to be confirmed – For optional plans, you are required to enroll in the plans for yourself before you enroll your spouse and/or child)

15. Click on the check box to select **Employee Optional AD&D plan**, after that click on **show details** to select **coverage amount**.
16. **Optional AD&D plans coverage** can be selected in the **units of \$5,000**.
- Employee optional AD&D
 - Spousal optional AD&D
 - Child optional AD&D

Option		
<input type="checkbox"/> CWR - Employee Optional AD&D Start Date: 5/30/2022 Show Details	CAS0.00	<input type="checkbox"/>
<input type="checkbox"/> Waive - CWR - Employee Optional AD&D Start Date: 3/1/2022		<input type="checkbox"/>

Option Details

CWR - Employee Optional AD&D

Coverage Amount
 Select the desired coverage amount below. You can use the slider or the plus or minus buttons to select your coverage amount.
 Minimum Coverage: CA\$0.00
 Maximum Coverage: CA\$500,000.00
 Amount in units of: CA\$5,000.00

Slider: 100,000 (range from CA\$0.00 to CA\$500,000.00)

Your Cost: CA\$10.00
Estimated Total Annual Amount: CA\$240.00

Your Current Elections

- CWR Executive/Salaried - Basic AD&D** (Employer CA\$8.05)
 Effective Start: 5/30/2022
 Coverage Amount: CA\$140,000.00
- CWR Executive/Salaried - Basic Life** (Employer CA\$8.05)
 Effective Start: 5/30/2022
 Coverage Amount: CA\$140,000.00
- CWR Executive/Salaried Long-Term Disability** (You CA\$23.64 1st & 2nd Pays of Month)
 Effective Start: 5/30/2022
 Coverage Amount: CA\$3,416.47
- CWR Salary/Hourly Non-Union w/out Gratuity Short-Term Disability**

CHUBB Employee Optional AD&D Plan

You may elect in a maximum of 1 option(s) in this election set.

Option Name Ascending Compare Selected

Option	Cost	Select
<input checked="" type="checkbox"/> CWR - Employee Optional AD&D Start Date: 5/30/2022 • CA\$100,000.00 Coverage Show Details	CA\$10.00	<input type="checkbox"/>
<input type="checkbox"/> Waive - CWR - Employee Optional AD&D Start Date: 3/1/2022		<input type="checkbox"/>

CHUBB Spouse Optional AD&D Plan

You may elect in a maximum of 1 option(s) in this election set.

Option Name Ascending Compare Selected

Option	
<input type="checkbox"/> Waive - CWR - Spouse Optional AD&D Start Date: 3/1/2022 • 1 Dependent Show Details	<input type="checkbox"/>

CAN New Hire Enrollment

Your Current Elections CA\$33.64

Option Details

CWR - Spouse w/Child(ren) 15% Optional AD&D

Coverage Amount
Your Coverage has been preset to the following amount:
CA\$7,500.00

Dependents
Please select dependents to be enrolled.
Minimum number of Dependent(s): 1

+ Add

Dependents	Remove
Child, Test (Child) Birth Date: 11/1/2021	<input type="checkbox"/>

Your Cost: CA\$1.13
Estimated Total Annual Amount: CA\$27.00

CWR - Spouse w/Child(ren) 50% Optional AD&D

Coverage Amount
Your Coverage has been preset to the following amount:
CA\$25,000.00

Dependents
Please select dependents to be enrolled.

Your Current Elections

Life and Disability

- CWR Executive/Salaried - Basic AD&D** Employee: CA\$8.05
Effective Start: 5/30/2022
Coverage Amount: CA\$140,000.00
- CWR Executive/Salaried - Basic Life** Employee: CA\$8.05
Effective Start: 5/30/2022
Coverage Amount: CA\$140,000.00
- CWR Executive/Salaried Long-Term Disability** Employee: CA\$23.64
Effective Start: 5/30/2022
Coverage Amount: CA\$3,416.47
1st & 2nd Paye of Month
- CWR Salary/Hourly Non-Union w/out Gratuity Short-Term Disability**

Save Cancel

CHUBB Spouse w/Children Optional AD&D Plan

You may elect in a maximum of 1 option(s) in this election set.

Option Name Ascending Compare Selected

Option	
<input checked="" type="checkbox"/> CWR - Spouse w/Child(ren) 15% Optional AD&D Start Date: 5/30/2022 • CA\$7,500.00 Coverage • 1 Dependent CWR - Spouse w/Child(ren) 50% Optional AD&D Start Date: 5/30/2022 • CA\$25,000.00 Coverage • 1 Dependent Show Details	CA\$1.13 CA\$3.75 <input type="checkbox"/>

17. **Optional Life plans coverage** can be selected in the **units of \$10,000**.

- Employee optional life
- Spousal optional life
- Child optional life

Manulife Employee Optional Life Plan

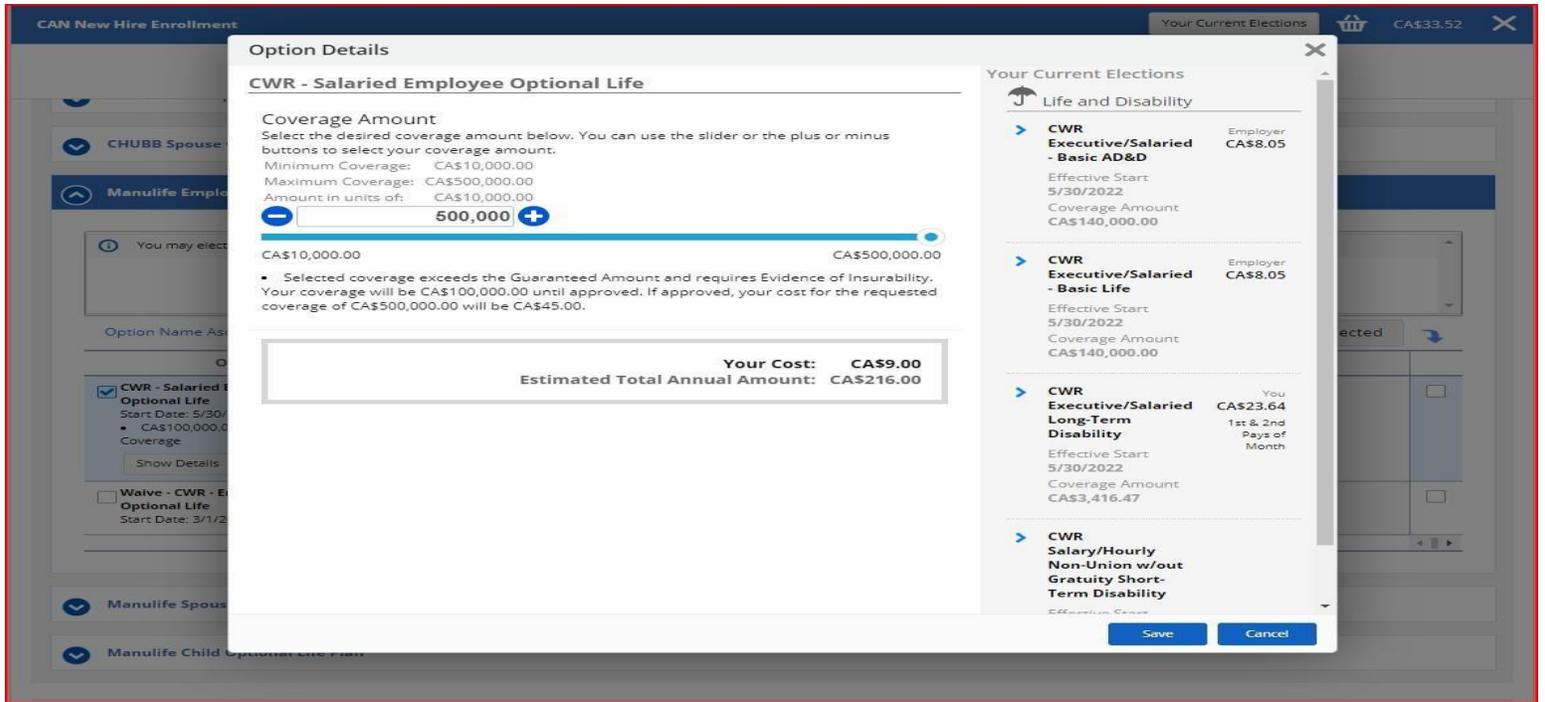
You may elect in a maximum of 1 option(s) in this election set.

Option Name Ascending ▼ Compare Selected

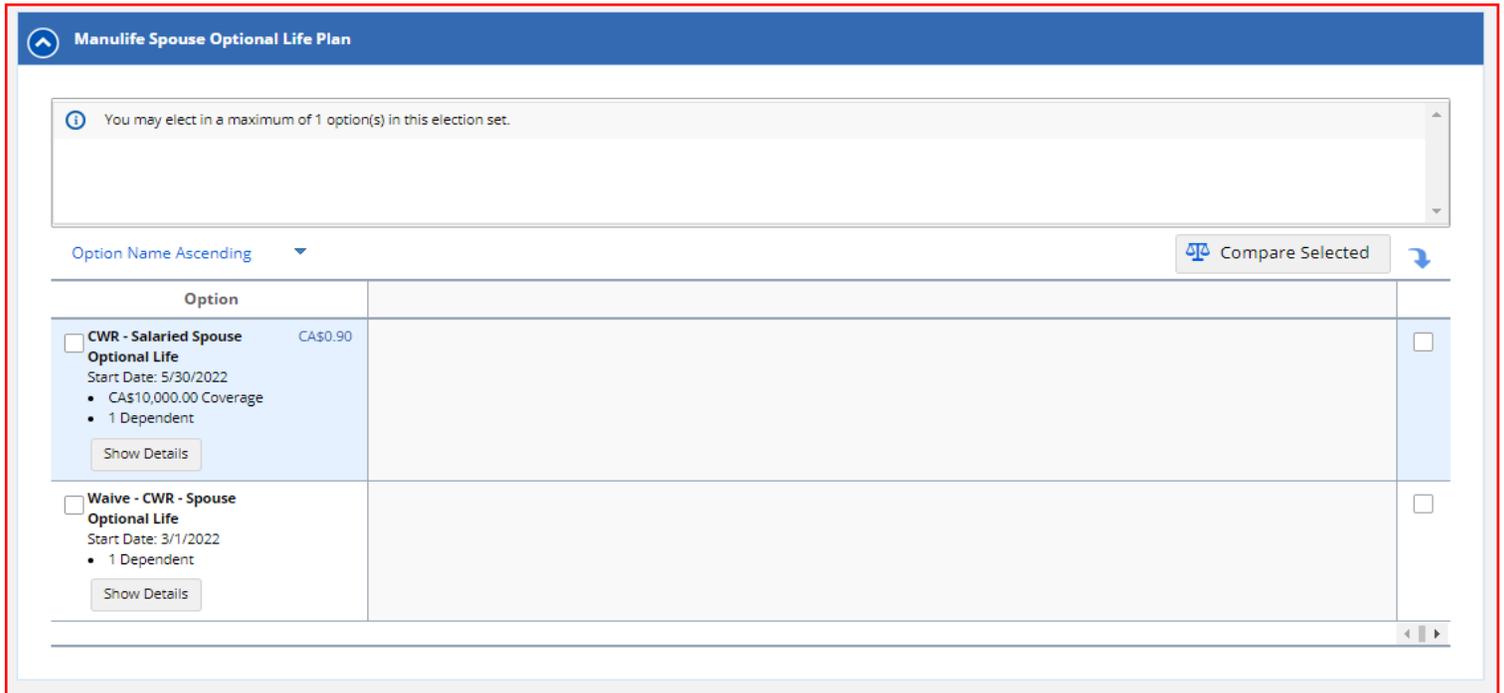
Option		
<input type="checkbox"/> CWR - Salaried Employee Optional Life Start Date: 5/30/2022 • CA\$10,000.00 Coverage Show Details	CA\$0.90	<input type="checkbox"/>
<input type="checkbox"/> Waive - CWR - Employee Optional Life Start Date: 3/1/2022		<input type="checkbox"/>

18. If you want to **enroll in optional life**, click on the Optional life plan and either drag the slide bar to preferred coverage or simply type in the amount in **units of \$10,000**. Click **“Save”** and scroll down.

Note: When you select optional life plan, please note Non-Evidence Max is \$100,000. Coverage requested over \$100,000 will require you to submit Evidence of Insurability form to Manulife, once approved, you can advise your T&C team to update coverage.



19. If you wish, you can enroll in “Spouse Optional Life Plan”



CAN New Hire Enrollment Your Current Elections CA\$42.52

Option Details

CWR - Salaried Spouse Optional Life

Coverage Amount
 Select the desired coverage amount below. You can use the slider or the plus or minus buttons to select your coverage amount.
 Minimum Coverage: CA\$10,000.00
 Maximum Coverage: CA\$500,000.00
 Amount in units of: CA\$10,000.00

CA\$10,000.00 CA\$500,000.00

- Selected coverage exceeds the Guaranteed Amount and requires Evidence of Insurability. Your coverage will be CA\$50,000.00 until approved. If approved, your cost for the requested coverage of CA\$500,000.00 will be CA\$45.00.

Dependents
 Please select dependents to be enrolled.

- Minimum number of Dependent(s): 1
- Maximum number of Dependent(s): 1

+ Add

Dependents	Remove
Spouse, Test (Spouse) Birth Date: 1/1/1997	<input type="button" value="X"/>

Your Cost: CA\$4.50
Estimated Total Annual Amount: CA\$108.00

Your Current Elections

- CWR Executive/Salaried - Basic AD&D** Employer CA\$8.05
 Effective Start: 5/30/2022
 Coverage Amount: CA\$140,000.00
- CWR Executive/Salaried - Basic Life** Employer CA\$8.05
 Effective Start: 5/30/2022
 Coverage Amount: CA\$140,000.00
- CWR Executive/Salaried Long-Term Disability** You CA\$23.64
1st & 2nd Pays of Month
 Effective Start: 5/30/2022
 Coverage Amount: CA\$3,416.47
- CWR Salary/Hourly Non-Union w/out Gratuity Short-Term Disability**
 Effective Start:

Manulife Child Optional Life Plan

You may elect in a maximum of 1 option(s) in this election set.

Option Name Ascending

Option	
<input type="checkbox"/> CWR - Child(ren) Optional Life CA\$0.60 Start Date: 6/1/2022 • CA\$10,000.00 Coverage • 1 Dependent <input type="button" value="Show Details"/>	<input type="checkbox"/>
<input type="checkbox"/> Waive - CWR - Child(ren) Optional Life Start Date: 3/1/2022 • 1 Dependent <input type="button" value="Show Details"/>	<input type="checkbox"/>

The screenshot shows the 'Option Details' dialog box for 'CWR - Child(ren) Optional Life'. The dialog is overlaid on the 'Your Current Elections' page. The 'Option Details' dialog contains the following information:

- Coverage Amount:** Your Coverage has been preset to the following amount. **CAS10,000.00**
- Dependents:** Please select dependents to be enrolled.
 - Minimum number of Dependents(s): 1
 - + Add
 - Table with 2 columns: Dependents, Remove. One row: Child, Test (Child), Birth Date: 1/1/2021, [X]
- Your Cost:** **CAS0.60**
- Estimated Total Annual Amount:** **CAS14.40**

The background 'Your Current Elections' page shows a list of selected benefits:

- Life and Disability**
 - CWR Executive/Salaried - Basic AD&D** Employer CAS8.05, Effective Start 5/30/2022, Coverage Amount CAS140,000.00
 - CWR Executive/Salaried - Basic Life** Employer CAS8.05, Effective Start 5/30/2022, Coverage Amount CAS140,000.00
 - CWR Executive/Salaried Long-Term Disability** You CAS23.64, 1st & 2nd Pays of Month, Effective Start 5/30/2022, Coverage Amount CAS3,416.47
 - CWR Salary/Hourly Non-Union w/out Gratuity Short-Term Disability**

Buttons for 'Save' and 'Cancel' are visible at the bottom of the dialog.

20. After **enrolling** in all plans, click **“Next”** to confirm benefits elections:

The screenshot shows the 'Elections' step in the 'CAN New Hire Enrollment' process. The progress bar at the top indicates the following steps: Introduction (completed), Profile (completed), Elections (current), Confirmation, and Summary. The main content area lists the following benefit options:

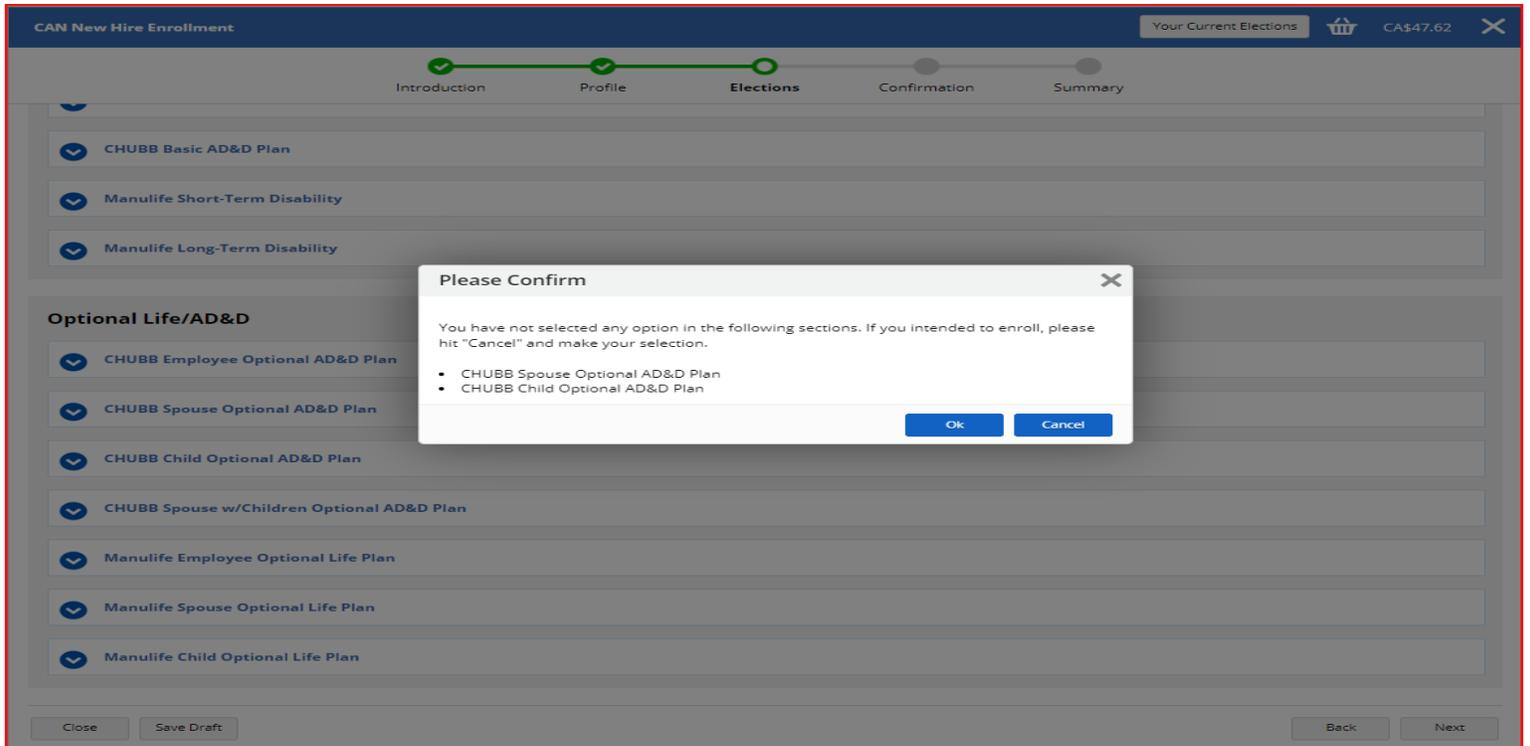
- CHUBB Basic AD&D Plan
- Manulife Short-Term Disability
- Manulife Long-Term Disability

Optional Life/AD&D

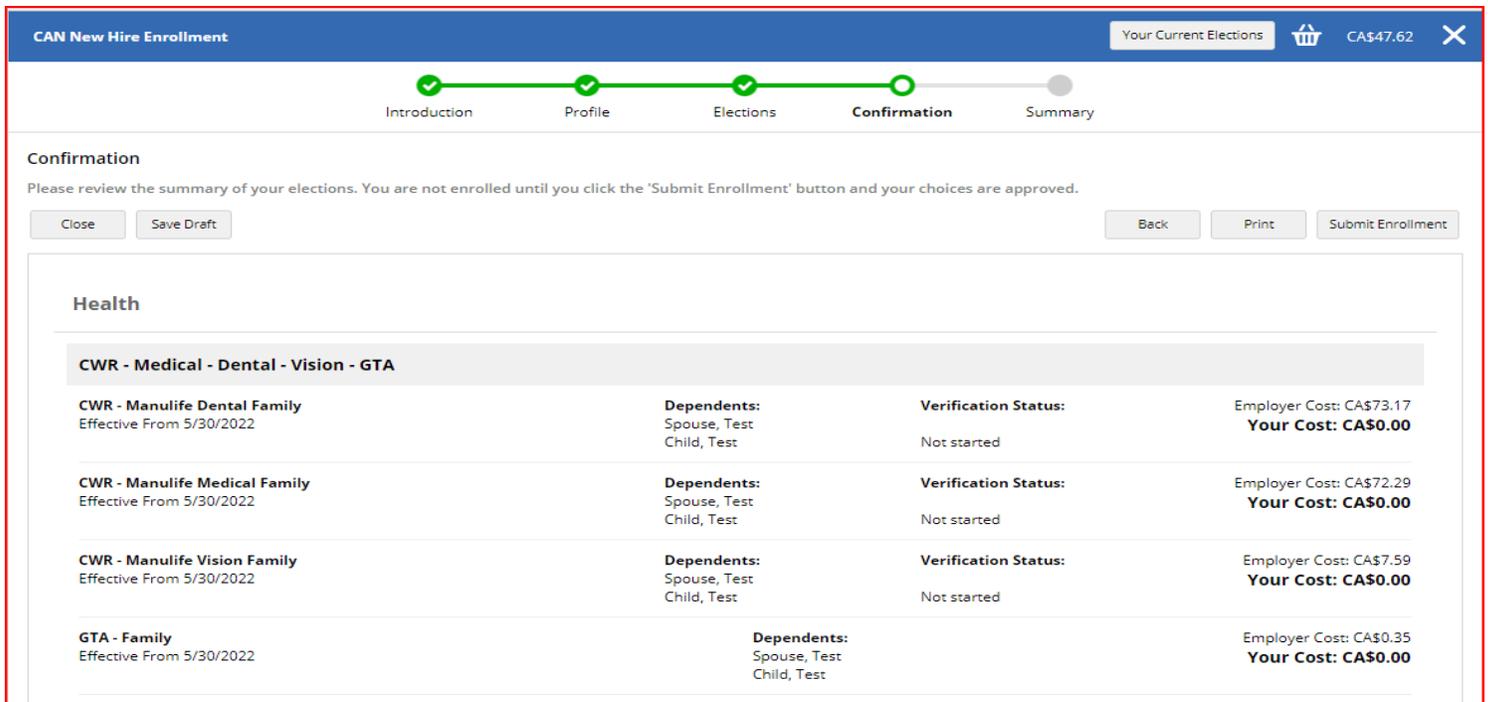
- CHUBB Employee Optional AD&D Plan
- CHUBB Spouse Optional AD&D Plan
- CHUBB Child Optional AD&D Plan
- CHUBB Spouse w/Children Optional AD&D Plan
- Manulife Employee Optional Life Plan
- Manulife Spouse Optional Life Plan
- Manulife Child Optional Life Plan

Buttons for 'Close', 'Save Draft', 'Back', and 'Next' are visible at the bottom. The 'Next' button is highlighted with a red box.

21. If you missed enrolling in one or two benefits, you will receive notification to enroll in mandatory plans; optional plans can be waived. Click on **“Ok”** to continue.



22. On this page, you can review your **benefits elections**. You will also notice, premium associated with the plan, and employer and employee cost for the plan.



Auto-Enrolled Benefits

Manulife Basic Life Plan

CWR Executive/Salaried - Basic Life
Effective From 5/30/2022
Your Coverage is preset at CA\$140,000.00

Employer Cost: CA\$8.05
Your Cost: CA\$0.00

CHUBB Basic AD&D Plan

CWR Executive/Salaried - Basic AD&D
Effective From 5/30/2022
Your Coverage is preset at CA\$140,000.00

Employer Cost: CA\$8.05
Your Cost: CA\$0.00

Manulife Short-Term Disability

CWR Salary/Hourly Non-Union w/out Gratuity Short-Term Disability
Effective From 5/30/2022
Your Coverage is preset at CA\$942.31

Your Cost: CA\$0.00

Manulife Long-Term Disability

CWR Executive/Salaried Long-Term Disability
Effective From 5/30/2022
Your Coverage is preset at CA\$3,416.47

Your Cost: CA\$23.64
1st & 2nd Pays of Month

23. Once you review your benefits, click on “Submit Enrollment”.

Optional Life/AD&D			
CHUBB Employee Optional AD&D Plan			
CWR - Employee Optional AD&D Effective From 5/30/2022 CA\$50,000.00 in coverage			Your Cost: CA\$5.00 1st & 2nd Pays of Month
CHUBB Spouse w/Children Optional AD&D Plan			
CWR - Spouse w/Child(ren) 15% Optional AD&D Effective From 5/30/2022 CA\$7,500.00 in coverage	Dependents: Child, Test		Your Cost: CA\$1.13 1st & 2nd Pays of Month
CWR - Spouse w/Child(ren) 50% Optional AD&D Effective From 5/30/2022 CA\$25,000.00 in coverage	Dependents: Spouse, Test		Your Cost: CA\$3.75 1st & 2nd Pays of Month
Manulife Employee Optional Life Plan			
CWR - Salaried Employee Optional Life Effective From 5/30/2022 CA\$100,000.00 in coverage Your requested coverage amount is CA\$500,000.00			Your Cost: CA\$9.00 1st & 2nd Pays of Month
Manulife Spouse Optional Life Plan			
CWR - Salaried Spouse Optional Life Effective From 5/30/2022 CA\$50,000.00 in coverage Your requested coverage amount is CA\$500,000.00	Dependents: Spouse, Test		Your Cost: CA\$4.50 1st & 2nd Pays of Month
Manulife Child Optional Life Plan			
CWR - Child(ren) Optional Life Effective From 6/1/2022 CA\$10,000.00 in coverage	Dependents: Child, Test	Verification Status: Not started	Your Cost: CA\$0.60 1st & 2nd Pays of Month
			Your Cost: CA\$47.62 Estimated Total Annual Amount: CA\$1,142.81
<input type="button" value="Close"/>	<input type="button" value="Save Draft"/>	<input type="button" value="Back"/>	<input type="button" value="Print"/> <input type="button" value="Submit Enrollment"/>

24. Next you can see all your confirmed benefits elections. If you have dependents, you will be required to submit verification (Please review Dependent Verification SOP) and for your Basic life and/or optional life, you will be required to click on Manulife link to complete your beneficiary form online at Manulife. After that you click on Return to Benefits. Benefits enrollment is complete.

CAN New Hire Enrollment
Your Current Elections CA\$47.62 ✕

Congratulations! Your enrollment has been submitted.

Dependent Verification Required - Please provide documents to verify your dependents.
View details

Print Return to Benefits

Next Steps

To complete your beneficiary designation, please click this [Manulife Beneficiary Designation](#) link. Thank you!

Health

CWR - Medical - Dental - Vision - GTA			
CWR - Manulife Dental Family Effective From 5/30/2022	Dependents: Spouse, Test Child, Test	Verification Status: Not started	Employer Cost: CA\$73.17 Your Cost: CA\$0.00
CWR - Manulife Medical Family Effective From 5/30/2022	Dependents: Spouse, Test Child, Test	Verification Status: Not started	Employer Cost: CA\$72.29 Your Cost: CA\$0.00
CWR - Manulife Vision Family Effective From 5/30/2022	Dependents: Spouse, Test Child, Test	Verification Status: Not started	Employer Cost: CA\$7.59 Your Cost: CA\$0.00
GTA - Family Effective From 5/30/2022	Dependents: Spouse, Test Child, Test		Employer Cost: CA\$0.35 Your Cost: CA\$0.00

Auto-Enrolled Benefits

Manulife Basic Life Plan	
CWR Executive/Salaried - Basic Life Effective From 5/30/2022 Your Coverage is preset at CA\$140,000.00	Employer Cost: CA\$8.05 Your Cost: CA\$0.00
CHUBB Basic AD&D Plan	
CWR Executive/Salaried - Basic AD&D Effective From 5/30/2022 Your Coverage is preset at CA\$140,000.00	Employer Cost: CA\$8.05 Your Cost: CA\$0.00
Manulife Short-Term Disability	
CWR Salaried/Hours Non-Union/Part-Time/Contingent/Short-Term	Your Cost: CA\$0.00

25. In the following screen you can review all benefits enrollment.

test site (DEV)
Benefits

Overview Current Elections **History** Dependent Verification Forms

Below is a listing of historical benefit summaries. To view a summary, select the summary description below.

Summary	Date
CAN New Hire Enrollment	3/29/2022 12:09 PM
Benefits Election Update	3/28/2022 12:52 PM

← CAN New Hire Enrollment - 3/29/2022 12:09 PM → ×

Employee Name: Employee, Test
Pay Frequency: Bi-Weekly
Recent Hire Date: 3/1/2022
Enrollment Date: 3/29/2022

Health

CWR - Manulife Dental Family Effective From 5/30/2022	Dependents: Child, Test Spouse, Test	Employer Cost: CA\$73.17 Your Cost: CA\$0.00
CWR - Manulife Medical Family Effective From 5/30/2022	Dependents: Child, Test Spouse, Test	Employer Cost: CA\$72.29 Your Cost: CA\$0.00
CWR - Manulife Vision Family Effective From 5/30/2022	Dependents: Child, Test Spouse, Test	Employer Cost: CA\$7.59 Your Cost: CA\$0.00
GTA - Family Effective From 5/30/2022	Dependents: Child, Test Spouse, Test	Employer Cost: CA\$0.35 Your Cost: CA\$0.00

Life and Disability

CWR Executive/Salaried - Basic AD&D Effective From 5/30/2022 Your Coverage is preset at CA\$140,000.00	Employer Cost: CA\$8.05 Your Cost: CA\$0.00
CWR Executive/Salaried - Basic Life Effective From 5/30/2022 Your Coverage is preset at CA\$140,000.00	Employer Cost: CA\$8.05 Your Cost: CA\$0.00
CWR Salary/Hourly Non-Union w/out Gratuity Short-Term Disability Effective From 5/30/2022 Your Coverage is preset at CA\$942.31	Your Cost: CA\$0.00
CWR Executive/Salaried Long-Term	Your Cost: CA\$23.64

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