

EXTENDED HEALTH INSURANCE PLAN ENROLMENT FORM FOR MEMBERS OF THE ASSOCIATION OF PART-TIME PROFESSORS OF THE UNIVERSITY OF OTTAWA (APTPUO)

Employee name (please print)	Employee number
Select APTPUO Group, if applicable <input type="checkbox"/> Law <input type="checkbox"/> Official Languages & Bilingualism Institute (OLBI) <input type="checkbox"/> Toronto/Windsor	

Correspondence related to your enrolment will be sent to your uOttawa email address.

<p>I wish to participate in the Extended Health Insurance Plan for a period of 12 months (September 1 to August 31)</p> <p><input type="checkbox"/> Single: \$92.10 monthly <input type="checkbox"/> Family: \$236.58 monthly</p> <p>I understand that on May 1 of every year, under the annual policy renewal with the insurer, monthly group insurance premiums may change. While the University will advise me of any premium changes, no other withdrawal authorization form will be required and this form will serve as my authorization. (To determine premiums, see reverse side for the course credit-based formula.)</p>
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Automatic bank withdrawal information

I understand that to continue my participation in group insurance benefits for a period longer than the duration of my current contract, I must provide automatic bank withdrawal authorization.

I authorize the University of Ottawa to withdraw funds from the same bank account as my payroll deposit to pay for the Extended Health Insurance Plan.

I accept that if the automatic withdrawal is not honoured by my bank, the University of Ottawa a) is not responsible for paying the premiums in question and b) may charge a service fee of \$75 if my bank account has insufficient funds. I also recognize that my group insurance coverage may be terminated if my premiums are not paid.

See page 2 for information on Collection of personal information.

Signature	Date

Email your completed and signed form to [HR Benefits](#).
 You may also return it by mail or in person to:

Human Resources
 University of Ottawa
 550 Cumberland, Room 019
 Ottawa ON K1N 6N5

For Human Resources office use only	
DOB ver.	
Contract number:	
Verified by:	

Extended Health Insurance Plan

At hiring, unionized part-time professors holding appointments may opt into the [APTPUO members' Extended Health Insurance Plan](#) for a period of twelve months.

This plan covers a variety of expenses (coverage may vary), such as drugs prescribed by a qualified physician, emergency dental care, massage therapy and physiotherapy.

You can reduce your insurance premium up to 100% at a rate of 8.3% of the premium per course credit or equivalent taught during the preceding academic year.

If you belong to APTPUO OLBI, you can reduce your insurance premium up to 100% at a rate of 0.295% per teaching hour during the preceding academic year.

Example

- If you taught the equivalent of 12 credits in the preceding academic year, your insurance premium for the year would be zero (0) (Credit of 12 x 8.3% = 100%).
- If you taught the equivalent of 6 credits in the preceding academic year, your insurance premium for the year would be 50% of the costs shown below (Credit of 6 x 8.3% = 50%).

Automatic withdrawal

If you do not currently have a part-time teaching contract, you can continue to pay premiums (based on the course credit calculation) through automatic bank withdrawals.

Automatic bank withdrawals take place on the 15th and the last day of each month during the 12 months of coverage. When these dates fall on a weekend or statutory holiday, withdrawals occur on the previous working day. Since automatic bank withdrawals are processed through the payroll system, they take place on the same dates as pay deposits. See the calendar of bank withdrawals and pay dates on the My Info website (Human Resources) under the icon [Compensation](#).

If you wish to participate in the Extended Health Insurance Plan, please complete the form on the reverse side and return as indicated.

If you have any questions regarding this plan, [email HR Benefits](#) or call 613-562-5832.

APTPUO Pension Plan

The APTPUO Pension Plan is open to all members of the bargaining unit who have worked during the previous calendar year. Participation is optional. For more information, see [The Association of Part-Time Professors of the University of Ottawa \(APTPUO\) Pension Plan](#) on the My info website.

Collection of personal information

Your personal information is collected under the authority of the University of Ottawa Act and is intended to be used for the purposes of (and those consistent with) the administration of your Human Resources employee file. For more information on this matter, visit the University's [Access to Information and Privacy Office website](#). If you have any further questions, you may [email Human Resources](#) or call 613-562-5832.