

This Benefit Fact Sheet provides information about late applicant status and the associated risks. In order to avoid being treated as a late applicant, employees/dependents must enrol in the employee benefit plans within 31 days of becoming eligible to participate or experiencing a life-changing event (see cover page of [Active Employee Enrolment/Change Form](#) for details about life-changing events). It is important that employees/dependents understand that they may be treated as a late applicant if they choose to decline or cancel coverage and wish to enrol at a later date, and that they may be denied coverage as a result.

What is a Late Applicant?

A late applicant is an employee/dependent who wishes to enrol in the employee benefit plans beyond 31 days of:

1. becoming eligible to participate; or
2. experiencing a life-changing event (e.g. marriage, common-law partnership, birth or adoption, divorce/separation, death of a spouse, initial post-secondary enrolment, involuntary loss of coverage).

With respect to the Long Term Disability (LTD) Plan, a late applicant is defined as an employee who declined to participate within 31 days of when the Plan was first implemented for their employer group, and who wishes to enrol.

The implications of late applicant status are outlined for each benefit in the table below. For benefits in which a [Statement of Health Form](#) is required, the employee/dependent may be denied coverage based on their medical history.

Health	<ul style="list-style-type: none"> • Coverage can be added at any time by indicating on the Active Employee Enrolment/Change Form. Statement of Health Form required. • If coverage is approved, the effective date is the date that the insurer approved the application.
Dental	<ul style="list-style-type: none"> • Coverage can be added at any time by indicating on the Active Employee Enrolment/Change Form. Statement of Health Form not required. • Dental benefits will be limited to \$100 per person for the first 12 months of coverage. • The effective date is the first day of the month following the date in which the application form was signed.
Optional Life / Accidental Death & Dismemberment (AD&D)	<ul style="list-style-type: none"> • Coverage can be added at any time by indicating on the Active Employee Enrolment/Change Form. Statement of Health Form required. • If coverage is approved, the effective date is the date that the insurer approved the application.
Voluntary AD&D	<ul style="list-style-type: none"> • Coverage can be added at any time by indicating on the Active Employee Enrolment/Change Form. Statement of Health Form not required.
Optional Critical Illness	<ul style="list-style-type: none"> • Coverage can be added at any time by visiting www.medaviebc.ca/optional/gnb or calling Medavie Blue Cross' Optional Benefits Team at 1-844-949-3809. Statement of Health Form required. • If coverage is approved, the effective date is the date that the insurer approved the application.
Dependent Life	<ul style="list-style-type: none"> • Coverage can only be added during the annual open enrolment opportunity in the month of May by indicating on the Special Enrolment/Change Form (distributed in April). Statement of Health Form not required.
LTD	<ul style="list-style-type: none"> • Coverage can be added at any time by indicating on the Active Employee Enrolment/Change Form. Statement of Health Form required. • If coverage is approved, the effective date is the date that the insurer approved the application.

For more information, contact Vestcor's Member Services Team at (506) 453-2296 or toll-free 1-800-561-4012.