



Online Insurance Enrollment Form

Directions for Successful Completion and Submittal

- 1) You must complete all sections of the enrollment form and sign it—even if you have current coverage with dependents and beneficiaries on file. You must complete your form in one sitting. You cannot stop at any point and then come back to complete the form.
- 2) Forms may be submitted once only, however, if you submit your form and all required fields have not been completed, you will need to complete those fields to ensure a successful submittal.
- 3) When you arrive at the enrollment form, whether you are enrolling for the first time or increasing your level of coverage, the form will provide you with the options you are eligible for during this Modified Open Enrollment, with no medical questions asked, up to the guaranteed issue amount.
- 4) **Address:**
If the address on the form is not your current address, contact your payroll department to update your address for mailing purposes. Your payroll information comes to PEF from the Comptroller's office. If you do not update your address, you will not receive your policy booklet(s).
- 5) **Voluntary Life and Accidental Death & Dismemberment Coverage (Group Term Life):**
You, as the member, must enroll or be enrolled in Voluntary Life (Group Term Life) before you can enroll a spouse/domestic partner or dependent child. When you indicate that you would like to enroll or increase coverage, the amounts you are eligible for, will be pre-set.
 - If you are electing domestic partner coverage, you will need to complete a Domestic Partner Affidavit that can be downloaded from the Group Term Life page of the website. Complete the form, have it signed by a Notary Public, and return it to PEF MBP. This form must be completed and returned to prove partnership.
- 6) **Short-Term Disability & Long-Term Disability*:**
For Short-Term Disability, If you are enrolling for the first time and/or you are increasing coverage, when you indicate on the form that you would like to elect coverage or increase coverage, the optional coverage amounts will appear. If you are enrolling for the first time, you will see your options for enrollment at \$100, \$200, \$300, \$400 weekly. If for example you are enrolled at the \$600 level, and you check the box to elect coverage or increase coverage, you will be presented with: \$100, \$200, \$300, \$400, \$500, \$600, and \$700. If you're currently enrolled up to the maximum of \$700 for STD, the form is going to show you \$100, \$200, \$300, \$400, \$500, \$600, and \$700. You may maintain your current coverage.

For Long-Term Disability, you must be working at least 35 hours bi-weekly on a regularly scheduled basis, in order to be eligible. Per Diem employees are not eligible for Long-Term Disability. New enrollees can enroll at 50% of annual salary and, if already enrolled, you can increase coverage to 60% of salary.

**PLEASE NOTE: New York State Civil Service employees are not eligible for New York State Disability Benefits Law Coverage. Sun Life and the PEF Membership Benefits Program can provide that much needed insurance.*
- 7) **Dependent Information:**
If you will be applying for spousal/domestic partner or dependent child coverage, please have all your spouse/domestic partner and dependent child information handy as you must complete the form in its entirety once you begin the process.

For each dependent, you will need to provide:

- Relationship to Member
- Full Legal Name
- Gender
- Date of Birth

8) Primary Beneficiary Section:

Beneficiary information must be added for Voluntary Life and Accidental Death & Dismemberment Coverage (Group Term Life), whether you are electing coverage for the first time and/or are increasing existing coverage.

- You cannot assume that if you have existing coverage that we will apply prior beneficiaries to this enrollment form. You must complete the beneficiary section.
- If you do not complete the beneficiary section, PEF MBP will reach out to you as your form will not be processed without this information.

You may specify as many individuals as you would like, but the total proceeds must equal 100%.

For each beneficiary, you will need to provide:

- Relationship to Member
- Full Legal Name
- Percent of Share of Proceeds
- Social Security Number
- Address
- Phone Number
- Date of Birth

Your beneficiaries can be anyone you desire (i.e., Spouse, children, parents, grandchildren, friends, etc.) Your beneficiary does not need to be a family member. If your beneficiary is not a child, domestic partner, or spouse, simply choose "Other" in the drop-down menu for Relationship to Member.

9) Secondary Beneficiary Designation:

A second beneficiary designation is available, and any individual(s) listed will receive the proceeds, ONLY IF ALL those listed as your primary beneficiaries, are not living at the time of your death. A secondary beneficiary is not paid when any primary beneficiary listed is alive at the time of your death. Proceeds, if divided, must equal 100%.

For each beneficiary, you will need to provide:

- Relationship to Member
- Full Legal Name
- Percent of Share of Proceeds
- Social Security Number
- Address
- Phone Number
- Date of Birth

10) Evidence of Insurability and authorization information:

You only need to submit an Evidence of Insurability Form if:

- You are applying for a higher level of coverage than the maximum guaranteed issue amount during this Modified Open Enrollment.

11) You must enter a signature in the signature box:

You cannot submit an application without a signature. To add a signature, click inside the signature box which will open a white box on top of the application. Use your mouse to create your signature inside the white box. Select apply signature.

12) Print your application:

The PEF Membership Benefits Program recommends that you print a copy of your application for your own records BEFORE you hit the Submit button.

13) Submit your enrollment application:

Please be aware that some fields in the form are Required Fields. If you have not completed a required field(s), your submittal will be unsuccessful, and you will receive a pop-up message. The message will indicate the field(s) that you must complete prior to re-submitting the online form.

If your form submittal is successful, you will receive a message stating such. Also,

- If you receive a phone call or email from the PEF MBP insurance department, be sure to respond as soon as possible as any delay could impact PEF MBP's ability to process your application by midnight, October 31.
- Keep an eye out for any mail from the PEF MBP insurance group, as it may contain important information regarding your application that requires your immediate follow-up.

If your form is submitted successfully, please allow for two (2) payroll cycles, and then check your pay stub where you will see your premium payment deduction.

PLEASE NOTE: The online enrollment form is the fastest process. If you prefer to have a paper enrollment form, we can email or mail one, but the process will be much slower—especially if PEF MBP has questions about your application or if the information is incomplete. The application must be completed and submitted in proper order, no later than midnight, October 31, 2023.