



About RSB

If you are 55 or older when you retire or leave your employment at UBC, you can choose to participate in the Retirement & Survivor Benefits (RSB) Program. The RSB Program provides benefits to eligible surviving family of UBC faculty and staff. Extended health benefits, dental benefits, as well as the Employee and Family Assistance Program are included. If you choose to enrol in Extended Health, you must ensure that you are also covered under a provincial health plan (such as MSP).

For more information about the RSB Program, please visit our website at www.hr.ubc.ca/rsb.

Enrolling in the RSB Plan

You should enrol in the Retirement & Survivor Benefits (RSB) Program **at least four weeks before you want your coverage to begin** to avoid delays in processing your form. To enrol:

1. Complete the RSB Program Application Form (see Page 2)
2. Attach a void cheque to the application form (see the * note below)
3. Send your completed and signed application form to:

Rohini Grover

RSB Administrator

Email: rohini.grover@ubc.ca or Mail:

Human Resources

600 – 6190 Agronomy Road

Vancouver, BC V6T 1Z3

* Note: If you continue to receive a salary from UBC while you are enrolled in the RSB Program, the void cheque you provide for the RSB Program must match the bank account that Payroll has on file.

Enrolment deadline

To enrol in the RSB Program, you must do so within 31 days of:

- your active UBC benefits ending; and/or
- the end of your coverage under the UBC Benefit plans if you are a surviving dependent of a UBC employee.

Please note: If you do not enrol in the RSB Program within this time frame, you will not be able to join at a later date.

When do my benefits begin?

The first day of your retirement benefits is determined by your last working day at UBC. Your retirement benefits must begin immediately after your active benefits expire.

For further information, please visit our Leaving UBC page at <http://www.hr.ubc.ca/wellbeing-benefits/life-events/leaving-ubc/>

Questions?

Please contact Rohini Grover, RSB Administrator at rohini.grover@ubc.ca or 604-822-4580.



Retirement & Survivor Benefits (RSB) Program Application Form (2020)

Section A – Member Information:

Name:			last name	first name	middle initial
Home Address:			number	street	city province postal code
Primary Phone Number:			Secondary Phone Number: (optional)		
Email Address: (required for all important communications about the program)			Date of Birth: day month year		
Retirement Date: day month year			Social Insurance Number:		
UBC Employee ID: (if you are a survivor, you may leave this blank)			Provincial Health Number (PHN): (required for the extended health plan)		
Member Type: Staff <input type="checkbox"/>			Faculty <input type="checkbox"/>		Survivor <input type="checkbox"/>

Section B – Dependent Information

Complete this section if you are enrolling dependents under your plan. Eligible dependents include your spouse; common-law spouse; same-sex partner; and/or dependent children who are single, supported by you, and up to age 19 or up to age 25 if in full-time attendance at a school or university. For the benefits programs listed here, eligible dependents include children of any age with a disability and satisfy the eligibility requirements for disabled dependents.

Last name, First name and PHN (required for the extended health plan)	Relationship of dependent to you	Date of birth D/M/Y	Gender (M/F)	For current students: school name, location (if studying abroad), and study end date	Disability (Yes/No)
Name: _____ PHN: _____					
Name: _____ PHN: _____					
Name: _____ PHN: _____					

Section C – Benefit Plan Election

Make your benefit plan selections by checking the appropriate box(es). Leave blank the benefit(s) you are not enrolling for.

- Select any or all of the three UBC benefit plans (EHB, DEN, or EFAP). Rates are current but subject to change.
- If you choose to enrol in Extended Health, you must ensure that you are also covered under a provincial health plan (such as MSP) as well.
- Your total monthly premium will be the sum of your individual benefit selections (from 1 – 3) below.

1) Extended Health Benefit

Lifetime maximum of \$200,000 per person. \$1,000 annual deductible per single or family (January – December). Members residing in Ontario or Quebec are subject to provincial retail sales tax on Extended Health premiums (8% ON, 9% QC).

Coverage	Monthly Premium	
Single	\$ 70.26	<input type="checkbox"/>
Couple	\$ 140.52	<input type="checkbox"/>
Family	\$ 140.52	<input type="checkbox"/>

