

WELCOME TO Benefits

Employees are eligible for both Pension and Insurances upon the date of hire or end of probationary period (depending on employment contract)

CBBenefits Retirement & Savings program

- ❖ **Canadian Baptist Pension Plan (CBPP)** is a Defined Contribution (DC) Pension Plan where the 6% deducted from your payroll is matched by the employer and the total 12% is remitted monthly to Canada Life, the pension record keeper. The employee may also make additional voluntary contributions to their pension although that is not matched by the employer.
- ❖ **Tax-Free Savings Account** is also available for the member, spouse and dependents to open..

CBBenefits Group Insurance Plan

- ❖ **Canada Life**
 - Basic Life Insurance - \$60,000 (reduces to \$5,000 at 65 and \$2,500 at 70)
 - Dependent Life Insurance - \$20,000 spouse, \$8,000 child (reduces to \$5,000 at 65)
 - Long Term Disability – 67% of your **reported** income after 6 months waiting period.
 - Employee and Family Assistance Program – FREE confidential counselling
 - Medical Dental Plan – **This portion can be put on hold IF your spouse has medical dental coverage through his/her employment. All other insurances still apply.**
- ❖ **CHUBB**
 - Accidental Death & Dismemberment - \$25,000
- ❖ Booklets can be found under the insurance tab on our website: [Pension & Benefits - CBAC \(atlanticbaptist.ca\)](http://atlanticbaptist.ca/Pension%20%26%20Benefits)

YOUR BENEFITS.... YOUR RESPONSIBILITY

Members have 31 **days** to notify karen.gunn@baptist-atlantic.ca when life changes happen:

- a) Married – to add spouse to plan and to change name (if needed)
- b) Beneficiary changes for any reason
- c) Spouse loses medical dental coverage
- d) Death of spouse or dependent child
- e) Birth or adoption of a child
- f) Move – address changes

These situations are the **Members Responsibility** and need your immediate attention when they arise.

Once these forms have been returned to karen.gunn@baptist-atlantic.ca

- You will receive two emails from Canada Life to complete your enrolment into the benefits: one for Medical Dental (Policy 57198 & 160885) and the other for Life insurance, Long Term Disability and Employee and Family Assistance Plan (Policy 156241).
- Karen Gunn or your treasurer will provide you with an access ID & password to access www.mycanadalifeatwork.com to enrol into the pension plan.
- **Once enrolled, you can access all your benefits on www.mycanadalifeatwork.com**

EMPLOYEE INFORMATION SUMMARY SHEET

EMPLOYEE NAME: _____

AND STREET NAME: _____

City, Province & Postal Code _____

EMPLOYEE EMAIL ADDRESS: _____

HOME PHONE NUMBER: _____ CELL PHONE NUMBER _____

SOCIAL INSURANCE NUMBER: _____ DATE OF BIRTH: _____ MALE: ☐ FEMALE: ☐

NAME OF CHURCH/ CAMP _____

OCCUPATION TITLE: _____ Pastoral position: ☐ Support position: ☐

Are you: Full-time: ☐ Part-time: ☐ NUMBER OF HOURS A WEEK: _____ (minimum 20hrs/week)

ANNUAL SALARY: _____ DATE OF EMPLOYMENT: _____

EFFECTIVE DATE OF COVERAGE:(after probationary period, if applicable) _____

MARITAL STATUS: ☐ Married, spouse name _____ ☐ Single ☐ Single with Dependents

Applying for Group Insurance: ☐ Yes, all coverage (**must work a minimum of 20 hours/week**)
☐ Yes, but spouse has Med/Dental (**Life, LTD, EFAP, AD&D still apply**)
☐ No, Waiver Form is required (I don't want any insurances)
☐ Not Eligible, I do not work more than 20 hours/week

Applying for Canadian Baptist Pension Plan: ☐ Yes. Online enrolment by treasurer ☐ or CBAC ☐
☐ NO, WAIVER FORM REQUIRED

DATE: _____

APPROVED BY:

CHURCH TREASURER NAME: _____

CHURCH TREASURER EMAIL: _____

Church Treasurer Phone: _____

CONFIDENTIAL INFORMATION SHEET

Long Term Disability and Pension Calculations

Employee's Name: _____ ID#: _____

(last 6 digits of S.I.N.)

Effective Date of Salary: _____

TOTAL GROSS SALARY, which includes either:

- Basic Salary PLUS Housing Allowance OR
- Basic Salary PLUS Fair Rental Value of Parsonage AND utilities,
if paid by the church on behalf of the member

A. \$ _____

OF PAY PERIODS (Weekly=52, Bi-weekly=26, Semi-monthly=24, Monthly=12)

B. _____

PENSION CONTRIBUTION PER PAY PERIOD

- Employee portion -6% deducted from employee. (A divided by B x 6%)
- Employer portion - 6% matched by the employer. (A divided by B x 6%)

C. \$ _____

D. \$ _____

TOTAL Pension Contribution per Pay Period: (C + D)

E. \$ _____

NOTE: Send in the number of pay periods each month. Ex: If there are 3 pay periods in a month, send in 3 x E.

Pension Contributions are calculated by the Treasurer and sent in **monthly** to the Record Keeper, Canada Life, by the end of the month. It is the record keepers' job to ensure they receive a monthly amount for each member. Canada Life does not verify whether the amount is accurate or not.

Long Term Disability (LTD) Monthly premiums are determined by Canada Life however premiums can roughly be calculated using the following: Total Salary / 12 x .67 x .02788

TREASURER

Church: _____

Treasurer: _____

Email: _____

Phone No: _____ Date: _____

**Please complete this form and submit to CBAC whenever there is a change in salary
or if you have a new employee.**

IMPORTANT: Please return to: Karen Gunn, Pension and Benefits Manager
By email: karen.gunn@baptist-atlantic.ca
Or by mail: PO Box 6003, Moncton, NB E1C 0V7