

Adding A New Employee

As the Plan Administrator, you are responsible for adding new employees to your existing Group Benefits Plan on the [RWAM Plan Administrator Services](#) website.

Any employee who has previously been employed and enrolled in your Group Benefits Plan cannot be added as a new employee. Refer to planadministrator.rwam.com/resources for tutorials on how to reinstate an employee.

→ To begin, log into your Plan Administrator Account at: <https://planadministrator.rwam.com>



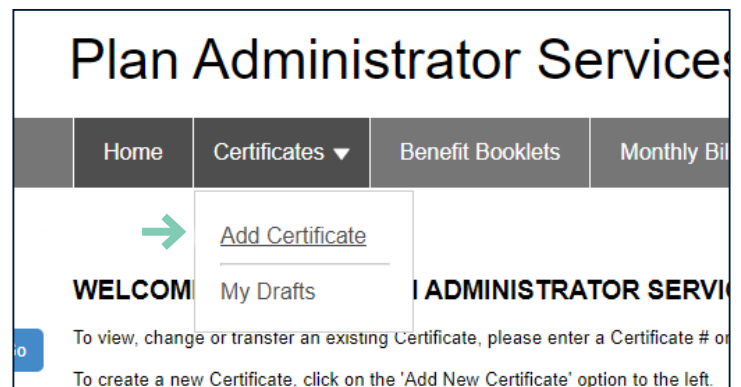
STEP 1

- In the top menu select Certificates and click Add Certificate.

STEP 2

- Select the correct Group, Division, and Class from the options provided.
- Click Next.

NOTE: You cannot return to change an error in the Division or Class fields. Be sure you are selecting accurate information.



Certificate Information

→ [Next >>](#)

ADD NEW CERTIFICATE

Group* ←

Division* ←

Class* ←

[Privacy Statement](#)

BEFORE YOU START

If your employees' benefits require a beneficiary designation, the original hard copy enrolment/beneficiary change forms can either be mailed to RWAM or retained in your files. The employee's signature must be in ink if the original is requested at time of a Life or Disability claim. The employee should complete an enrolment form/beneficiary form or you can print an Enrolment Confirmation on-line for their signature.

[Save Certificate](#) [Save as Draft](#) [Cancel](#)

* indicates required information

Helpful Hint

If at any time you do not know or understand the required information, click Save as Draft to save and return to the certificate later. We encourage you to save your work between each step. You will not be able to select Save Certificate until you reach the final page.

STEP 3

- Complete the necessary information for your employee.
- Enter the Date Employed Full Time.
- If applicable, select Waive the Waiting Period.
- This will take you to their plan details / certificate information.

NOTE: You will only see the option to Waive the Waiting Period if you are within 31 days of the full time employment date. If you intended to waive the waiting period, and are outside of 31 days of the full time employment date, please contact RWAM to request to waive the waiting period. For more information about Waiving the Waiting Period, refer to the [Plan Administrator Manual](#).

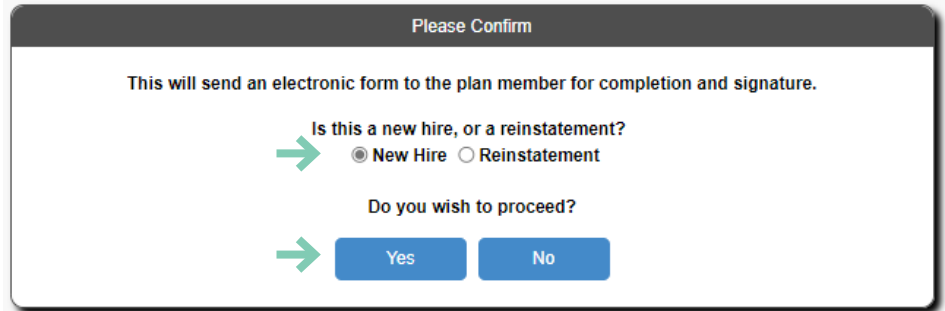
- Select the Occupation Code; refer to the occupation code document found online on [the resource section of the RWAM Plan Administrator Services website](#).
- If you do not know the information required, click Save as Draft to save your progress and contact RWAM directly at csr-groupadmin@rwam.com for assistance.
- Enter the employee's Occupation, Earnings, and Hours Worked per Week.

If you already have a completed enrolment form, skip to Step 6.

Important: If you click Send to Send Form for Signing, the employee will be emailed an enrolment package to complete. This is only required if you are sending a new electronic enrolment form.

STEP 4

- After you click Send to Send Form for Signing, your certificate progress will be automatically saved.
- You will see a pop-up asking you to confirm your intentions.
- Select New Hire, then click Yes to proceed.
- The employee will be sent an online form to their provided email.

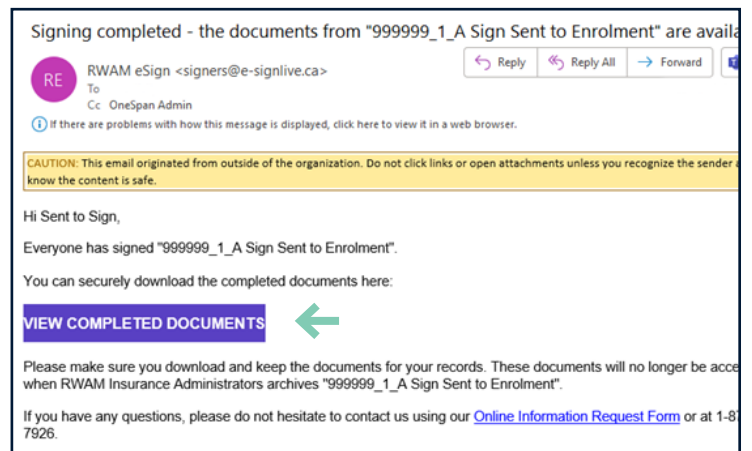


You can now safely log out of your account or complete another task.

The Employee Has Completed Their Digital Enrolment. Now What?

STEP 5

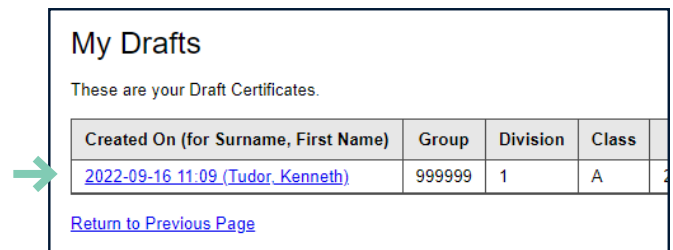
- Once your employee has completed their digital enrolment, you will receive an email with a digital copy.
- Click the link provided in the email to open/download the completed form.
- You may wish to print this form as you will need it handy for the following steps. You will be required to retain a copy of this document for your records.
- Return to the [Plan Administrator Services](#) website homepage.



If you already have a completed enrolment form, continue here.

STEP 6

- Click Certificates, then My Drafts.
- Select the employee's file.
- Complete and review the information in Employee Information against the completed enrolment form from the employee.
- Click Next.



Certificate Information

Name: Kenneth Tudor Certificate #: Status: Draft
 Group: 999999 - THE ABC COMPANY INC. Division: 1 - ABC TESTING GROUP INC. Class: A - MANAGEMENT

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EMPLOYEE INFORMATION

Surname* First Name*

STEP 7

- Complete the Beneficiary Information section.
- If there are more than one beneficiary listed, separate each full name with a comma. Include percentages as indicated on the enrolment form.
- List all relationships in the same order as the names on the Life Relationship field.
- Click Next.

NOTE: If you see optional fields not indicated with a red asterisk, they are not applicable or are not required for this Class or Group.

STEP 8

- Using the dropdown menu, Send Claims Payment to select where payment for claims will be sent to.
- An email address is required if you select **Direct Deposit**.
- A mailing address is required if you select **Home**.
- All mail will be sent to the word address if you select **Work**.
- Enter the employee's banking information and mailing address as applicable.
- Click Next.

* indicates required information

STEP 9

- Complete the Coordination of Benefits (COB) section if applicable.
- The Effective Date will be the employee's Status Date.
- Click Next.

Helpful Hint: Need more information about COB? Follow the [Coordination of Benefits Plan Administrator Tutorial here](#), or learn more about COB from the [Plan Administrator Manual](#).

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CO-ORDINATION OF BENEFITS

Does this person have co-ordination of benefits? Effective Date

EHC * Yes No * YYYYMMDD

Dental * Yes No * YYYYMMDD

Carrier Name

Save Certificate
Save as Draft
Cancel

Send Form for Signing:
Enrolment
Send

* indicates required information

STEP 10

- Complete the Dependent Information section if applicable.
- **Relationship** refers to the dependent's relationship to the employee.
- **Cohabitation Date** refers to the date the dependent started living with the employee. RWAM requires the dependent to have been living with the employee for 1 year (minimum), or according to your plan design.
- Click Add if there is more than 1 dependent to include.
- Once complete, click Next.

NOTE: Do not add a dependent student/child that is over the age of 21 or according to your plan design. Have the employee complete "Declaration of Student Eligibility - RA042" and send to csr-groupadmin@rwam.com for processing.

Helpful Hint
Sections that are greyed out and cannot be interacted with are dictated by the company plan. They cannot be changed on an individual basis.

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DEPENDANT INFORMATION

Please ensure that dependants are added **ONLY IF FAMILY COVERAGE** is selected for applicable benefits.

Co-ordination of Benefits (COB)
WHEN 2 OR MORE BENEFIT PLANS ARE INVOLVED, one plan is considered to be the primary plan. Plan Member claims should be processed through RWAM as primary provider. Any remaining balances can then be processed through the other insurance plan.
 If your spouse has their own group insurance, indicate S (secondary) as RWAM's plan would be secondary payor.
 Claims for dependent children – the plan of the biological parent with the earlier birth date in the calendar year pays 1st. P (primary should be indicated if the Plan Member insured with RWAM has the earlier birth date.)

Surname*	First Name*	Status*	Status Date*	Birth Date*	Relationship*	Cohabitation Date	EHC COB Coverage*	EHC COB Coverage Date*	Dent COB Coverage*	Dental COB Coverage Date*
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input type="text" value="Active"/>	<input style="width: 90%;" type="text" value="20221214"/>	<input style="width: 90%;" type="text"/>	<input type="text" value=""/>	<input style="width: 90%;" type="text" value=""/>	<input type="text" value="None"/>	<input style="width: 90%;" type="text" value=""/>	<input type="text" value="None"/>	<input style="width: 90%;" type="text" value=""/>

Add
Save Certificate
Save as Draft
Cancel

Send Form for Signing:
Enrolment
Send

* indicates required information

STEP 11

- Review the Benefits and Coverage information for accuracy.
- Active** indicates coverages that are applicable.
- Nil** indicates coverage that is not applicable.
- A red asterisk indicates coverage you have access to change.
- Click Save Certificate to complete enrolment.
- If you have successfully saved the certificate, you will see Certificate Saved Successfully at the top of your screen.
- If the plan includes Optional Coverage, click Next to continue to review the coverage details before then clicking Save Certificate to complete enrolment.

Benefit	Effective Date	Coverage	Disability Waiver
Life	20221214	Active	
AD&D	20221214	Active	
Dependant Life*	20221214	Nil	
STD	20221214	Active	
LTD	20221214	Active	
EHC*	20221214	Single	
Dental*	20221214	Single	
Out of Country*	20221214	Single	
EAP*	20221214	Single	
Optional Life	20221214	Nil	
Optional AD&D	20221214	Nil	
Critical Illness - Chubb*	20221214	Single	
Optional Medical Illness	20221214	Nil	

STEP 12

- A new RWAM OneCard and Welcome Letter will be generated automatically and emailed to the employee.
- Any plastic RWAM OneCards will be sent to the Plan Administrator for distribution.

NOTE: You can access the employee's RWAM OneCard and Welcome Letter at any time by using the OneCard tab. To learn more visit planadministrator.rwam.com/resources for tutorials and RWAM Communication documents for Plan Administrators.

Congratulations!

You have successfully added an employee to your group benefits plan on the Plan Administrator Services website.

