

2023 Benefits Open Enrolment

User Guide for [AECOMBenefitsOnline.com](https://www.aecom.com/benefits)

Your first visit to AECOMBenefitsOnline.com



Login

Access ID


Password:

[Log In](#)

[First Time User?](#) | [Forgot Password](#)

First Time User?

- Please note that the password is case sensitive.



Need Help?

Contact the AECOM Benefits Service Centre 1-833-411-5520

Secure

Your information is safe with us. Use your Access ID and password to login.

Learn More

Log in to research plan options and easily locate information about existing coverage and benefits

First visit? Click on "First Time User."

[Note Before You Begin](#)

Step 1: You provide information

Enter your **Access ID**
(available on your Sun Life ID card)
Access ID = Workday ID

Then, click "Next."

The screenshot shows a three-step process: 1. Provide Information, 2. Confirm Identity, and 3. Set New Password. The first step is active. Below the progress bar, it says "Employees will need to provide their Access ID in order to proceed" and includes an illustration of three people. The form contains an "Access ID" input field, a CAPTCHA image with the characters "bTDYHl", a "Characters:" input field, and "Back to Login" and "Next" buttons. Two callout boxes with arrows point to the "Access ID" field and the "Next" button.

1 Provide Information > 2 Confirm Identity > 3 Set New Password

Employees will need to provide their Access ID in order to proceed

Access ID

To continue, type the characters you see in the picture

Characters:


Back to Login Next

Step 2: You confirm your identity

Enter this information to confirm your identity.

1 Provide Information > 2 **Confirm Identity** > 3 Set New Password

First time users will be required to submit the following information:



Date Of Birth mm/dd/yyyy

Home City

Home Postal Code A1A1A1

[Back to Login](#) [Next: Set New Password](#)

NEED HELP?

Contact the AECOM
Benefits Service Centre
1-833-411-5520

Then, click "Next: Set New Password."

Step 3: You choose your security questions ...



We take data security very seriously, and have taken precautions to prevent unauthorized access to your information. To keep your information safe, we need to ask you a few questions to establish your identity. We also ask that you create a new Password, which you will use when accessing this site in the future.

Answer Security Questions

We ask you to answer a series of questions that you can answer, but that someone pretending to be you should not be able to answer. Should you forget your Password, answers to these questions will be used to confirm your identity.

Please answer any five security questions.

Where were you born?

What is the country of your ultimate dream vacation?

What is your father or mother's middle name?

What was the name of your first school?

What was the name of your first pet?

What is your best friend's last name?

Choose five questions and type in the answers.

Step 3: ... and set your password



We take data security very seriously, and have taken precautions to prevent unauthorized access to your information. To keep your information safe, we need to ask you a few questions to establish your identity. We also ask that you create a new Password, which you will use when accessing this site in the future.

Answer Security Questions

We ask you to answer a series of questions that you can answer, but that someone pretending to be you should not be able to answer. Should you forget your Password, answers to these questions will be used to confirm your identity.

Please answer any five security questions.

Where w

What is t
vacation?

What is y

What wa

What wa

What is y

Create a new Password

Password should be at least 8 characters long and contain a combination of upper and lower case characters, and should include at least one number and at least one special character (ex. ! @ # \$ % ^ & *)

New Password:

Confirm Password

[Back to Login](#)

[Save](#)

Then, create and confirm your own password and click "Save."

Now you can log in to AECOMBenefitsOnline.com



Forgot Access ID? Click "Access ID Reminder" for help.

Login

Access ID

Password:

[Log In](#)

[First Time User?](#) | [Forgot Password](#)

First Time User?

- Please note that the password is case sensitive.

Need Help?

Contact the AECOM Benefits Service Centre 1-833-411-5520

Secure

Your information is safe with us. Use your Access ID and password to login.

Learn More

Log in to research plan options and easily locate information about existing coverage and benefits

Returning? Enter Access ID and password. Then click "Log In."

[Note Before You Begin](#)

Welcome to the home page ... find info and resources on the top menu

Go to “My Plans” to review the Benefits Guide and other benefits brochures, print your Benefits Statement or request a copy via email or mail or change beneficiaries during the year.

Go to “Useful Links” to find helpful benefits and government resource websites.

Go to “Forms & Documents” to find and print claim forms and access benefits guides.

The screenshot shows the AECOM Benefits website home page. At the top left is the AECOM logo. Below it is a navigation bar with icons and labels for Home, My Plans, Useful Links, Forms & Documents, Charitable Contributions, FAQ, and Action Needed. The main content area features several promotional tiles: a blue tile for designating beneficiaries, a white tile for assistance with service center and chat, a blue tile for enrolling in Sun Life accounts, and a blue tile for enrolling in Well-Being at AECOM. Below the main content are two white boxes: one for AECOM Benefits Pay and another for a welcome message with links to the benefits website and new hire checklists.

Go to “Charitable contributions” if you wish to donate to AECOM’s charities by payroll deduction.

Single sign-on to your Sun Life Account.

Now you are ready to start

AECOM

Home | My Plans | Useful Links | Forms & Documents | Charitable Contributions | FAQ | Action Needed

Has your life changed? You have 31 days to update your coverage.
[Find out more about your Benefits Plan...](#)

Need assistance? We're here to help.
AECOM Benefits Service Centre: 1-833-411-5520.
[AECOM Benefits Service Chat](#)

Click below to go directly to the following accounts.
[My Sun Life](#)
[Well-Being at AECOM](#)

Only 24 days remain to submit your changes!
Enrol
[Make Life Event Changes by clicking here!!](#)
Change Optional Life, AD&D and Critical Illness Benefit Coverage
Enroll

Ready to review your benefits and enrol?
Click "Enrol."

Check your personal information

Home My Plans Useful Links Forms & Documents Charitable Contributions FAQ

Annual Enrolment

1 Verify Information 2 Choose Benefits 3 Confirm Choices

Back Next: Choose Benefits

Review your personal and employment information below. Should any corrections or updates be needed, please contact your HR representative.

Personal	
Employee No:	Last Name:
First Name:	Birth Date:
Middle Name:	Gender:

Contact		Edit
Home Address Line 1:	Personal Phone:	
Home Address Line 2:	Personal Email:	
Town/City:	Work Phone:	
Country:	Work Email:	
Postal Code:		

Work	
Date of Hire:	Salary Base Amount:
Job Status:	Salary Base Frequency:

Dependents				Add Dependent
Name:	Gender:	Birth Date:	Relationship:	Edit
Name:	Gender:	Birth Date:	Relationship:	Edit

Back Next: Choose Benefits

Want notifications to your work or your personal email? Click "Edit."

Enrolling a family member? Click "Add Dependent."

Annual Enrolment

- 1 Verify Information
- 2 Choose Benefits
- 3 Confirm Choices

[Back](#) [Cancel](#) [Next: Choose Benefits](#)

Review your personal and employment information below. Should any corrections or updates be needed, please contact your HR representative.

Personal

Employee No

First Name:

Middle Name:

Contact

Home Address:

Home Address:

Town/City:

Country:

Postal Code:

Authorize for

Work

Date of Hire:

Job Status:

Dependents

[Add Dependent](#)

[Edit](#)

Add Dependent ✕

Please fill in the fields below for the dependent you are adding.

* First Name:

Initial:

* Last Name:

* Relationship:

* Gender:

* Birth Date: mm/dd/yyyy

[Save](#) [Cancel](#)

Enter your dependent's details, click "Save" and then click "Next: Choose Benefits."

Ready to move on?

All OK and no dependents to add or remove? Click "Next: Choose Benefits."

Annual Enrolment

1 Verify Information > 2 Choose Benefits > 3 Confirm Choices

[Back](#) [Cancel](#) [Next: Choose Benefits](#)

Review your personal and employment information below. Should any corrections or updates be needed, please contact your HR representative.

Personal	
Employee No:	Last Name:
First Name:	Birth Date:
Middle Name:	Gender:

Contact		Edit
Home Address Line 1:	Personal Phone:	
Home Address Line 2:	Personal Email:	
Town/City:	Work Phone:	
Country:	Work Email:	
Postal Code:		

Work	
Date of Hire:	Salary Base Amount:
Job Status: Active	Salary Base Frequency: Annual

Dependents	Add Dependent
------------	---------------

Use this menu to make your selections.

Get ready to choose your benefits

Annual Enrolment

1 Verify Information > 2 **Choose Benefits** > 3 Confirm Choices

Back Cancel Assign Spending Credits

Benefits Summary

Summary

Health Care Modules
Please review your current Module options to ensure you have the appropriate selections for you and/or your family.
Note: Movement within Module options is only permitted during a New Hire Event or valid Life Event.

Your Benefits
Coverage Effective Dates :
Start : January 01, 2023 End : December 31, 2023

Health Care Modules		Annual Price Tag	Payroll Deductions	
			Annual	Per Pay
Health care benefits Module C	Employee + 2 or more	\$8,666.88	\$2,077.44	\$79.90
	Medical Care (Most coverage)			
	Dental Care (Most coverage)			

Benefit	Coverage Level	Annual Price Tag	Payroll Deductions	
			Annual	Per Pay
Employee Basic Life Insurance	1 X Base Salary	\$221.08	\$0.00	\$0.00

Choose your health module

Click "Health Care Modules."

Annual Enrolment

1 Verify Information > 2 **Choose Benefits** > 3 Confirm Choices

[Back](#) [Cancel](#) [Assign Spending Credits](#)

Elected Coverage Effective Date : 1/1/2023 to 12/31/2023
Module C
Employee + 2 or more
Review and select your coverage below.

Option	Category	Price
	Employee	\$0.00
Module A	Employee + 1	\$0.00
	Employee + 2 or more	\$0.00
Medical Care (Basic Coverage) Dental Care (No coverage)		
Select This Option		
	Employee	\$412.92
Module B	Employee + 1	\$834.60
	Employee + 2 or more	\$1,106.88
Medical Care (More coverage) Dental Care (More coverage)		

- Summary
- Health Care Modules**
- Employee Optional Life Insurance
- Child Optional Life Insurance
- Employee Optional AD&D Insurance
- Child Optional AD&D Insurance
- Short Term Disability
- Long Term Disability
- Employee Optional Critical Illness

Check out the employee contributions for Modules A, B and C (and Module D in Quebec).

Your cost depends on how many people you want to cover.

When you are ready to decide, click "Select This Option."

Choose your coverage level

Indicate if your dependents are covered under your plan or another plan.

See your employee contributions (this example shows Module B).

Your Dependents

Category : Employee Price : \$412.92

Dependant	Covered Under Your Plan	Covered Under Another Plan	Other Plan Holder's DOB
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You have not specified any dependants

Cancel

Save

Everything OK? Click "Save."

Option	Category	Price
	Employee	\$0.00
Module A	Employee + 1	\$0.00
	Employee + 2 or more	\$0.00
Medical Care (Basic Coverage)		
Dental Care (No coverage)		
Select This Option		
	Employee	\$412.92
Module B	Employee + 1	\$834.80
	Employee + 2 or more	\$1,108.88

Choose your optional life insurance

Step 1: Click “Employee Optional Life Insurance.”

Step 2: Declare your non-smoker / smoker status and click “Save.”

The screenshot shows a web interface for selecting benefits. At the top, there are navigation steps: 2. Choose Benefits and 3. Confirm Choices. A 'Back' button is visible. The main content area is titled 'Employee Optional Life Insurance' and includes a 'Summary' section. A modal dialog is open, asking the user to 'Select Category' and declare their smoker status. The modal text reads: 'Please review and update your smoker status if necessary.' with radio buttons for 'Non-Smoker' (selected) and 'Smoker'. Below this is a red warning: 'I hereby declare that the insured has not smoked any form of tobacco or cannabis product within the past 12 months.' and 'Cancel' and 'Save' buttons. In the background, a table lists optional life insurance options with columns for 'Options', 'Category', 'Price', and 'Per Pay Cost'. A 'Select This Option' button is highlighted for the first option.

Options	Category	Price	Per Pay Cost
Option 1			
\$0.00	Non-Smoker	\$0.00	\$0.00
	Smoker	\$0.00	\$0.00
Option 2			
\$10,000.00	Non-Smoker	\$11.04	\$0.42
	Smoker	\$16.68	\$0.64

Step 3: Choose how much coverage you want and click “Select This Option.”

Choose your optional life insurance

This example shows coverage and costs for Option 3. To continue, click "Save."

The screenshot displays the 'Annual Enrolment' interface. A modal window titled 'Pending Coverage' is open, showing details for 'Option 3'. The modal includes a close button (X) in the top right corner. Below the title, it lists 'Annual Cost' as \$22.08 and 'Per Pay Cost' as \$0.85. It also specifies 'Non-Smoker' status and 'Coverage: \$20,000.00'. A note states 'Evidence of Insurability Pending: \$20,000.00'. At the bottom of the modal, it says 'To confirm please choose Save or Cancel below' and provides 'Save' and 'Cancel' buttons. In the background, the 'Choose Benefits' step is active, showing a table of insurance options. The table has columns for 'Options', 'Category', 'Price', 'Per Pay Cost', and 'Evidence Required'. 'Option 1' is visible with a 'Non-Smoker' category, a price of \$0.00, and a per pay cost of \$0.00. A 'Select This Option' button is present below the table. The 'Effective Date' is shown as 1/1/2023 to 12/31/2023.

Options	Category	Price	Per Pay Cost	Evidence Required
Option 1	Non-Smoker	\$0.00	\$0.00	No
	Smoker	\$0.00	\$0.00	No

Choose disability plan coverage

Step 1: From the menu, select “Short Term Disability.”

The screenshot shows the 'Annual Enrolment' process at the 'Choose Benefits' stage. A progress bar at the top indicates three steps: 1. Verify Information, 2. Choose Benefits (current), and 3. Confirm Choices. A sidebar on the left lists various insurance options, with 'Short Term Disability' selected. The main content area displays 'Short Term Disability' coverage details, including an 'Elected Coverage' section for 'Option 1' with an annual cost of \$923.20 and a per pay cost of \$35.51. Below this is a table of available options.

Options	Annual Cost	Per Pay Cost
Option 1 Basic Select This Option	\$923.20	\$35.51
Option 2 Enhanced Select This Option	\$1,158.17	\$44.55

Buttons for 'Back', 'Cancel', 'Assign Spending Credits', and 'Confirm' are visible.

Step 2: Choose Option 1 or Option 2, then click “Select This Option.”

Step 3: Repeat these steps to choose coverage for long term disability and optional critical illness insurance.

Assign your spending account credits

Home My Plans Useful Links Forms & Documents Charitable contributions Action Needed

Enrol

1 Verify Information 2 Choose Benefits 3 Confirm Choices

Back Cancel Assign Spending Credits

Benefits Summary

Summary

Health Care Modules

Please review your current Module options to ensure you have the appropriate selections for you and/or your family.
Note: Movement within Module options is only permitted during a New Hire Event or valid Life Event.

Next, click "Assign Spending Credits."

Assign your spending account credits

Home My Plans Useful Links Forms & Documents Charitable contributions

1 Verify Information 2 Choose Benefits 3 Confirm Choices

Assign

You have \$150.00 in spending account credits. You need to assign all of these dollars before you can complete your enrolment.

Spending Account Credits	\$	150.00
Deposit to Health Spending Account	\$	0.00
Deposit to Personal Spending Account	\$	0.00
Total:	\$	0.00

Back Finish

Step 1: Allocate your spending account credits to your HSA, PSA, or both.

Step 2: Click "Finish" to complete spending account credit allocation and move on to the next step.

Check the Benefits Summary

Your Benefits

Coverage Effective Dates :

Start : January 01, 2023

End : December 31, 2023

Health Care Modules	Annual Price Tag	Payroll Deductions	
		Annual	Per Pay
Health care benefits Module C	\$8,666.88	\$2,077.44	\$79.90
Employee + 2 or more			
Medical Care (Most coverage)			
Dental Care (Most coverage)			

Benefit	Coverage Level	Annual Price Tag	Payroll Deductions	
			Annual	Per Pay
Employee Basic Life Insurance	1 X Base Salary \$151,000.00	\$221.06	\$0.00	\$0.00
Employee Optional Life Insurance* Non-Smoker	Option 1 \$0.00	\$0.00	\$0.00	\$0.00
Child Optional Life Insurance	Option 6 \$25,000.00	\$65.70	\$65.70	\$2.63
Employee Basic AD&D Insurance	1 X Base Salary \$151,000.00	\$21.74	\$0.00	\$0.00
Employee Optional AD&D Insurance	Option 11 \$100,000.00	\$16.80	\$16.80	\$0.65
Child Optional AD&D Insurance	Option 21 \$100,000.00	\$16.80	\$16.80	\$0.65
Short Term Disability	Option 1	\$923.20	\$923.20	\$35.51
Long Term Disability	Option 1 \$6,276.00	\$1,230.60	\$1,230.60	\$47.33
Employee Optional Critical Illness* Non-Smoker	Option 13 \$60,000.00	\$165.02	\$165.02	\$6.35
Employee Family Assistance Program	Core	\$0.00	\$0.00	\$0.00
Business Travel Benefits	Core	\$0.00	\$0.00	\$0.00
Totals:		\$11,327.80	\$4,495.56	\$172.92
Sales Tax:			\$404.60	\$15.56
Grand Totals:		\$11,327.80	\$4,900.16	\$188.48

* Note: This option has been assigned to you pending approval of your Evidence of Insurability form(s)

The Benefits Summary shows your annual and per pay costs.

You can see the total in taxes at the bottom of the statement. The amounts per year and per pay above are before taxes.

Check the Benefits Summary

Benefit	Coverage Level	Annual Price Tag	Payroll Deductions	
			Annual	Per Pay
Employee Basic Life Insurance	1 X Base Salary \$151,000.00	\$221.06	\$0.00	\$0.00
Employee Optional Life Insurance * Non-Smoker	Option 1 \$0.00	\$0.00	\$0.00	\$0.00
Child Optional Life Insurance	Option 6 \$25,000.00	\$65.70	\$65.70	\$2.53
Employee Basic AD&D Insurance	1 X Base Salary \$151,000.00	\$21.74	\$0.00	\$0.00
Employee Optional AD&D Insurance	Option 11 \$100,000.00	\$16.80	\$16.80	\$0.65
Child Optional AD&D Insurance	Option 21 \$100,000.00	\$16.80	\$16.80	\$0.65
Short Term Disability	Option 1	\$923.20	\$923.20	\$35.51
Long Term Disability	Option 1 \$6,276.00	\$1,230.60	\$1,230.60	\$47.33
Employee Optional Critical Illness * Non-Smoker	Option 13 \$80,000.00	\$165.02	\$165.02	\$6.35
Employee Family Assistance Program	Core	\$0.00	\$0.00	\$0.00
Business Travel Benefits	Core	\$0.00	\$0.00	\$0.00
Totals:		\$11,327.80	\$4,495.56	\$172.92

The Benefits Summary also shows your spending account allocation and your dependents.

Your Spending Account Credits

You have \$175.00 in spending account credits. You need to assign all of these dollars before you can complete your enrollment.

Health Spending Account	\$0.00
Personal Spending Account	\$175.00

Choose your beneficiary

Home My Plans Useful Links Forms & Documents Charitable contributions Action Needed

1 Verify Information 2 Choose Benefits 3 Confirm Choices

Back Cancel Next: Choose Beneficiary

Benefit Summary

Review your benefit choices, and the dependents you have elected to cover. If you are satisfied with your choices, click on "Next: Choose Beneficiary". If you would like to make changes, click on "Back" to return to previous screens. Please note, you will be required to reassign your personal spending credits after you make changes.

If you want to make more changes, click "Back."

If everything on the Benefits Summary is correct, click "Next: Choose Beneficiary."

To complete enrolment and submit your choices, you must go through the beneficiary section.

Add or change a beneficiary

To add or change beneficiaries, click “Need to make a change?”

[Back](#) [Cancel](#) [Next: Summary](#)

Update Beneficiary

Currently In effect

You may remove, edit and view your Beneficiaries below. Please note that you cannot remove a beneficiary that has been allocated to a benefit with greater than 0%.

Need to make a change?

If any of the information is incorrect, please contact the AECOM Benefits Service Centre at 1-833-411-5520

Note: If you enter beneficiaries on the site, you must complete a new beneficiary authorization form.

You will need to sign and return the form for your choices to take effect.

Please note that you may have previously completed an 'Irrevocable' beneficiary designation that is not indicated below, if so, you are restrained from designating another beneficiary unless the consent of the previously irrevocable beneficiary is obtained and filed with the administrator; which consent must be given by a person who is the age of majority. It is your responsibility to obtain and send in the written consent from your irrevocable beneficiary waiving his/her rights before any other designations will be considered valid. Please access the waiver form from the 'Forms' section on the homepage. You understand that the effect of designating a beneficiary irrevocable is that while the beneficiary is living, You may not alter or revoke the designation without the consent of the beneficiary.

If you have any questions or your situation has changed (for example due to divorce), please contact the AECOM Benefits Service Centre at 1-833-411-5520.

Need to Make a Change?

- 1) Click on 'Add Beneficiary' to add a new beneficiary.
- 2) Next click on 'Make a Change' to indicate allocations and status assigned to each beneficiary.

[Add Beneficiary](#)

[Make a Change](#)

Add or change a beneficiary

Home My Plans Useful Links Forms & Documents Charitable Contributions FAQ Action Needed

Back Cancel Next: Summary

Update Beneficiary

Currently In effect You may remove, edit and view your Beneficiaries below. Please note that you cannot remove a beneficiary that has been allocated to a benefit with greater than 0%.
If any of the information is incorrect, please contact the AECOM Benefits Service Centre at 1-833-411-5520

Need to make a change?

Note: If you enter beneficiaries on the site, you must complete a new beneficiary authorization form.

You will need to sign and return the form for your choices to take effect.

Please note that you may have previously completed an 'Irrevocable' beneficiary designation that is not indicated below, if so, you are restrained from designating another beneficiary unless the consent of the previously irrevocable beneficiary is obtained and filed with the administrator; which consent must be given by a person who is the age of majority. It is your responsibility to obtain and send in the written consent from your irrevocable beneficiary waiving his/her rights before any other designations will be considered valid. Please access the waiver form from the 'Forms' section on the homepage. You understand that the effect of designating a beneficiary irrevocable is that while the beneficiary is living, You may not alter or revoke the designation without the consent of the beneficiary.

If you have any questions or your situation has changed (for example due to divorce), please contact the AECOM Benefits Service Centre at 1-833-411-5520.

Need to Make a Change?

- 1) Click on 'Add Beneficiary' to add a new beneficiary.
- 2) Next click on 'Make a Change' to indicate allocations and status assigned to each beneficiary.

[Add Beneficiary](#)

[Make a Change](#)

Click "Add Beneficiary."

Add or edit beneficiary information

AECOM

Home My Plans Useful

Back

Update Beneficiary

Currently In effect

You may remove, with greater than If any of the inform

Change?

Add/Edit Beneficiary

Beneficiary Type

First Name:

Last Name:

Initial:

Relationship

Trustee

Birth Date:

Action Needed

Beneficiary that has been allocated to a benefit

11-5520

Note: If you enter beneficiaries on the site, you must complete a new beneficiary authorization form.

You will need to sign and return the form for your choices to take effect.

Please note that you may have previously completed an 'Irrevocable' beneficiary designation that is not indicated below, if so, you are restrained from designating another beneficiary unless the consent of the previously irrevocable beneficiary is obtained and filed with the administrator; which consent must be given by a person who is the age of majority. It is your responsibility to obtain and send in the written consent from your irrevocable beneficiary waiving his/her rights before any other designations will be considered valid. Please access the waiver form from the 'Forms' section on the homepage. You understand that the effect of designating a beneficiary irrevocable is that while the beneficiary is living, You may not alter or revoke the designation without the consent of the beneficiary.

If you have any questions or your situation has changed (for example due to divorce), please contact the AECOM Benefits Service Centre at 1-833-411-5520.

Need to Make a Change?

- 1) Click on 'Add Beneficiary' to add a new beneficiary.
- 2) Next click on 'Make a Change' to indicate allocations and status assigned to each beneficiary.

Add or edit your beneficiary information and click "Save."

To describe each beneficiary's status, click "Make a Change."

Confirm your beneficiaries

Home My Plans Useful Links Forms & Documents Charitable contributions Action Needed

Back Cancel Next: Summary

Update Beneficiary

Currently In effect Need to make a

Change Beneficiary

1 Confirm Existing Beneficiary 2 Add Primary Beneficiary 3 Add Secondary Beneficiary 4 Complete

Below are the beneficiaries you currently have on file.
To **remove** any beneficiaries, simply click on 'Remove'.
To **add** any additional beneficiaries click on "Cancel" to return to the Main Beneficiaries screen and then click on Add Beneficiary. Once a beneficiary is added, again click on Make a Change to assign the Primary, Secondary and Designation status.

Beneficiary	Relationship	
Kim Lee	Friend	Remove
Eldon Monster	Spouse	Remove
Animal Rescue	Charity	Remove

If you are satisfied with your list of existing beneficiaries, click on Next to move to Step 2 to assign Primary beneficiary allocations.

Add Beneficiary Make a Change Cancel Next

Want to change your current beneficiary? Click "Cancel" to go back to the previous screen.

On the previous screen,

Click "Add Beneficiary" to add the new beneficiary's information, and click "Save."

Click "Make a Change" to review the information and make sure your newly added beneficiary is listed.

Are these beneficiaries OK?
Click "Next."

Allocate primary beneficiaries

Home My Plans Useful Links Forms & Documents Charitable Contributions FAQ Action Needed

Back Cancel Next: Summary

Change Beneficiary

1 Confirm Existing Beneficiary 2 Add Primary Beneficiary 3 Add Secondary Beneficiary 4 Complete

Each of your benefits must have at least one assigned Primary beneficiary. All Primary Beneficiaries must sum to 100%.

Name	Employee Basic Life Insurance	Employee Optional AD&D Insurance	Employee Basic AD&D Insurance	Business Travel Benefits
	✓	✓	✓	✓
Spouse	Primary <input type="text" value="100"/> %	Primary <input type="text" value="100"/> %	Primary <input type="text" value="100"/> %	Primary <input type="text" value="100"/> %
Estate	Primary <input type="text" value="0"/> %	Primary <input type="text" value="0"/> %	Primary <input type="text" value="0"/> %	Primary <input type="text" value="0"/> %
Total	Primary 100%	Primary 100%	Primary 100%	Primary 100%

Back Cancel Next

1) Click on 'Add Beneficiary' to add a new beneficiary.
2) Next click on 'Make a Change' to indicate allocations and status assigned to each beneficiary.

Add Beneficiary
Make a Change

For each of your optional benefits, choose how you would want to share the insurance between your primary beneficiaries.

Satisfied? Click "Next."

Allocate secondary beneficiaries

✕

Change Beneficiary

1

2

3

4

Confirm Existing Beneficiary
Add Primary Beneficiary
Add Secondary Beneficiary
Complete

Secondary or Contingent beneficiaries: only take effect if your primary beneficiary dies before you.
Electing contingent beneficiaries is optional.
You may indicate a Contingent beneficiary below or you can simply click on Next to go to the next step.

Name	Employee Basic Life Insurance	Employee Optional AD&D Insurance	Employee Basic AD&D Insurance	Business Travel Benefits
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Contingent <input type="text" value="0"/> % †	Contingent <input type="text" value="0"/> % †	Contingent <input type="text" value="0"/> % †	Contingent <input type="text" value="0"/> % †
Estate	Contingent <input type="text" value="0"/> %	Contingent <input type="text" value="0"/> %	Contingent <input type="text" value="0"/> %	Contingent <input type="text" value="0"/> %
Total	Contingent 0%	Contingent 0%	Contingent 0%	Contingent 0%

†This Beneficiary has already been assigned as a Primary beneficiary.

Back
Cancel
Next

2) Next click on 'Make a Change' to indicate allocations and status assigned to each

You can choose secondary (“contingent”) beneficiaries in case your primary beneficiary dies before you do. This is optional. Satisfied? Click “Next.”

Confirm your beneficiaries

My Plans Useful Links Forms & Documents Charitable contributions Action Needed

Cancel Next: Summary

Beneficiary

You may remove, edit and view your Beneficiaries below. Please note that you cannot remove a beneficiary that has been allocated to a benefit with greater than 0%.
If any of the information is incorrect, please contact the AECOM Benefits Service Centre at

Change Beneficiary

1 Confirm Existing Beneficiary 2 Add Primary Beneficiary 3 Add Secondary Beneficiary 4 Complete

Outlined below are your beneficiary elections. Click on 'Close' to save your changes and to return to the main Beneficiaries page. From there you can print your beneficiaries, which need to be signed and returned to the Customer Contact Centre. To Make Changes, click 'Back' or 'Cancel'.

Name	Employee Basic Life Insurance	Employee Optional AD&D Insurance	Employee Basic AD&D Insurance	Business Travel Benefits
Kim Lee Friend	Contingent 100%	Primary 50%	Primary 25%	Primary 30%
Eldon Monster Spouse	Primary 100%	Contingent 100%	Primary 50%	Contingent 100%
Animal Rescue Charity	Primary 0%	Primary 50%	Primary 25%	Primary 70%
Total	Primary 100% Contingent 100%	Primary 100% Contingent 100%	Primary 100% Contingent 0%	Primary 100% Contingent 100%

Back Cancel Confirm

Complete your beneficiary designation.

Everything OK? Click "Confirm."

Want more changes? Click "Back" to go back one screen or click "Cancel" to start over.

Add Beneficiary

Make a Change

Process your beneficiary form

The screenshot shows a web interface for updating a beneficiary. At the top, there is a navigation bar with links for Home, My Plans, Useful Links, Forms & Documents, Charitable contributions, and Action Needed. The main heading is 'Update Beneficiary'. Below this, there are two buttons: 'Back' and 'Next: Summary'. A 'Cancel' button is also visible. A 'NEED HELP?' graphic is present, with a callout box pointing to the 'Next: Summary' button. The main content area contains text about removing or changing beneficiaries, with a callout box pointing to the 'Need to make a change?' section. At the bottom, there are buttons for 'Print Beneficiary Form' and 'Mail Beneficiary Form'. A final callout box points to the 'Next: Summary' button.

Home My Plans Useful Links Forms & Documents Charitable contributions Action Needed

Back Cancel Next: Summary

Update Beneficiary

Currently in effect

Need to make a change?

You may remove, edit and view your Beneficiaries below. Please note that you cannot remove a beneficiary that has been allocated to a benefit with greater than 0%. If any of the information is incorrect, please contact the AECOM Benefits Service Centre at 1-833-411-5520

NEED HELP?

Contact the AECOM Benefits Service Centre 1-833-411-5520, from 8 a.m. - 8 p.m. EST, Monday to Friday

Click "Mail Beneficiary Form" to have it mailed home for you to complete OR Click "Print Beneficiary Form," sign and date it, and mail it to the address shown.

Beneficiary instructions do not take effect until the form has been received.

All done? Click "Next: Summary" to go to the Benefits Summary.

Your beneficiary designation is not complete until your form is signed, dated and received.

Print Beneficiary Form Mail Beneficiary Form

Print your forms

The screenshot shows a web interface for an enrollment process. At the top is a navigation bar with the following items: Home (with a house icon), My Plans, Useful Links, Forms & Documents, Charitable Contributions, FAQ, and Action Needed (with an envelope icon). Below the navigation bar, the word "Enrol" is displayed in blue. A progress bar contains three steps: 1. Verify Information, 2. Choose Benefits, and 3. Confirm Choices (which is highlighted in orange). The main content area features the heading "Enrolment is Now Complete!" followed by "Thank you,!" and the message "Your enrolment is now complete! Your elections have been confirmed and submitted." Below this is a blue button labeled "View Confirmation Statement". A red note states: "Note: You have completed your annual enrollment. You can modify or cancel your elections by clicking on the Home button, and choosing Modify or Cancel. If you modify your elections, ensure that you complete the enrollment process through to the Confirm Your Choice button, otherwise your benefit elections will not be saved, and you will be reverted back to the previous year's benefit elections." Below the note, it says "If you would like to review or update your charitable contributions elections, please click below." and provides two blue buttons: "Your charitable contributions" and "Home". A brown callout box with a white background and a brown border points from the "Action Needed" menu item to the text inside the box.

Congratulations! You have completed enrolment. Go to "Action Needed" to print any forms you'll need.