

## Your Benefits at a Glance

Policy 172501\_Div 2\_Class 2 and 14  
 CUPE 4705 Outside Employees Under Age 65  
 (effective August 21, 2023)

|  |   |
|--|---|
| <b>Basic Life Insurance</b>  |   |
| Employee Benefit Formula   | 200% of your annual earnings to a maximum of \$500,000  |
| <b>AD&amp;D (Accidental Death &amp; Dismemberment) Insurance</b>   |   |
| Employee Benefit Formula   | 200% of your annual earnings to a maximum of \$500,000  |
| <b>Optional Life Insurance</b>                                     |   |
| Employee Multiple Amount   | \$10,000 to a maximum of \$250,000  |
| Spouse Multiple Amount   | \$10,000 to a maximum of \$250,000  |
| <b>Short Term Disability</b>                                       |   |
| Waiting Period   |   |
| Injury   | No waiting period   |
| Disease  | 3 calendar days<br>If you are hospitalized or have day surgery before the last day of the waiting period, benefits will begin on the day you are hospitalized or the surgery is performed |
| Maximum Benefit Period   | 26 weeks. If you attain age 65 while on STD your maximum benefit period is 15 weeks   |
| Benefit Formula  | 75% of your weekly earnings to the maximum allowable under the Employment Insurance Act or \$2,250, whichever is greater  |
| <b>Long Term Disability</b>  |   |
| Benefit Waiting Period   | 26 weeks  |
| Maximum Benefit Period   | To age 65, retirement or when you hit the 90 factor, whichever is earlier   |
| Benefit Formula  | 75% of your monthly earnings to a maximum of \$12,000   |
| <b>Healthcare</b>  |   |
| <b>Deductibles</b>   | Nil   |
| <b>Reimbursement Level</b>   | 100%  |
| <b>In-Canada Prescription Drugs</b>                                | Included  |
| Deductible   | \$0.35 per prescription   |
| Smoking Cessation (incl. Natural Health Products)                  | \$400 every 36 months   |
| <b>Basic Expense Maximums</b>                                      |   |
| Out-of-Country Emergency Care Expenses (Physician's Services Only) | Included  |
| Private Hospitals  | \$10 per day to a maximum of 120 days lifetime  |
| Home Nursing Care  | 720 hours each calendar year  |
| Dental Accident  | Included  |
| Hearing Aids   | \$750 every 60 months   |
| Blood-glucose Monitoring Machines                                  | 1 every 4 years   |
| Custom-made Shoes and Modified Stock Shoes                         | Included  |
| Custom-made Foot Orthotics   | \$400 per pair to a maximum of 2 pairs each calendar year   |
| Myoelectric Arms   | \$10,000 per prosthesis   |
| Surgical Brassieres  | 6 each calendar year  |
| External Breast Prosthesis   | 1 every 12 months   |
| Leg Orthosis (brace)   | Included  |
| Trusses  | Included  |
| Mechanical or Hydraulic Patient Lifters                            | \$2,000 per lifter once every 5 years   |
| Outdoor Wheelchair Ramps   | \$2,000 lifetime  |
| Extremity Pumps for Lymphedema                                     | Included  |
| Custom-made Compression Hose                                       | 6 pairs each calendar year  |
| Wigs   | 1 lifetime to a maximum of \$500  |
| Incontinence Supplies  | Included  |
| Diagnostic Services  | Included  |

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| Paramedical Practitioners  |   |
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| <b>Employee Coverage</b>   |   |
| Chiropractors  | Combined maximum of \$2,000 per calendar year for each Employee   |
| Massage Therapists   |   |
| Physiotherapists (incl. Athletic Therapists)   |   |
| Osteopaths   |   |
| Podiatrists/Chiropodists   |   |
| Naturopaths  |   |
| Dieticians   |   |
| Counselling Services provided by Psychotherapist, Psychologist, Social Worker with certification | \$2,000 each calendar year  |
| Speech Therapists  | \$418 each calendar year  |
| <b>Dependent Coverage</b>  |   |
| Massage Therapists   | Combined maximum of \$1,000 per calendar year for each Dependant  |
| Physiotherapists (incl. Athletic Therapists)   |   |
| Counselling Services provided by Psychotherapist, Psychologist, Social Worker with certification |   |
| Speech Therapist/Pathologist   |   |
| <b>Visioncare Expense Maximums</b>   |   |
| Eye Examinations   | \$90 every 24 months  |
| Eyeglasses and Contact Lenses  | \$420 every 24 months   |
| <b>Lifetime Healthcare Maximum</b>   | <b>Unlimited</b>  |
| <b>Dentalcare</b>  |   |
| <b>Payment Basis</b>   | The Ontario Dental Association Fee Guide in effect on the date treatment is rendered Payment for denturists' charges is based on denturist fee guides. Payment for charges by hygienists practising independently is based on hygienist fee guides. Specialists' charges are limited to general practitioner fees |
| <b>Deductibles</b>   | Nil   |
| <b>Reimbursement Level</b>   |   |
| Basic  | 100%  |
| <b>Plan Maximum</b>  |   |
| Basic  | Unlimited   |
| <b>Health Care Spending Account (HCSA)</b>   |   |
| Annual Health Care Spending Account  | HCSA of \$200/year<br>Can be used for any medical expense incurred by each eligible employee. Expense(s) must be identified in the Income Tax Act as a tax deductible medical expense.<br>There is no cash value or carry-over and will be pro-rated in any partial year of full-time employment.                 |