

**Schedule 4.1(af) – Employees**

**APPENDIX A – Benefits under the Association of Management, Administrative and Professional Crown Employees of Ontario Contract**

**[SEE ATTACHED]**

**Physician (Doctor):** A person who legally practices medicine surgery or both. The physician must be licensed by the licensing authority of the jurisdiction where the treatment is given.

**Premium:** Money paid to the insurance company for insurance coverage.

**Prescription drugs and medicine:** Prescription drugs must be:

- \* necessary;
- \* prescribed by a physician or dentist for the treatment of an injury or illness (includes in the case of human chorionic gonadotropin injections for treatment of infertility);
- \* dispensed by a licensed pharmacist, physician, dentist, or surgeon legally allowed to dispense such drugs;
- \* registered under a Drug Identification Number.

**Note:** Over-the-counter drugs such as Pepto-Bismol are not covered by this plan, even though they may be prescribed.

**Pro-rated Entitlement or Cost:** An entitlement or cost determined by the ratio of your part-time schedule compared to a full-time employee schedule.

**Psychiatric treatment:** Treatment by a specialist in neurology or psychiatry, as well as treatment by any other legally licensed physician for a condition caused by a nervous disorder.

**Reasonable and Customary:** Standard medically approved treatments and procedures which are normally applied in the treatment of a particular illness or condition and are provided at costs equivalent to the average charged for such treatment in the location where such treatment is provided.

**Retroactive change:** A backdated change. For example, if you have an increase in pay in March that is retroactive to January, you will be paid the increase for January and February, as well as all the time after that, provided you worked in January.

**Spouse:** A spouse is a person who is:

- \* legally married to the employee; or

- \* although not legally married to the insured employee, cohabits with the employee as husband and wife or as lesbian or gay partners.

**Total disability:** Continuous inability, caused by illness or injury, to do the essential duties of:

- \* the employee's normal job during the first 30 months after the date of the disability;
- \* any job which the employee is reasonably fitted for by education, training, or experience, after the 30 month period.

To be considered totally disabled, the person must be undergoing treatment by a physician, and must not be employed for wages (except for Rehabilitative Employment, as discussed in Section B of this guide).

For Part-time employees, you are covered for the same kinds of benefits as full-time employees however, since you work on a part-time basis (i.e. at less than a full-time employee schedule) there are some differences in the entitlements and procedures related to some of your benefits. See each benefits section for details.

For Seasonal employees, you are covered by the same kinds of benefits as classified employees, but there are some differences. See each benefits section for details.

#### Waiting period before eligibility for benefits occurs

Upon joining the OPS, you are eligible for:

Canada Pension Plan (benefits usually begin at age 65 or earlier if you become disabled).

Unemployment Insurance (partial benefits after 10-19 weeks of employment, full benefits after 20 weeks).

Workers' Compensation (benefits begin after the WCB determines that the accident/illness is job-related).

Vacation (credits are earned immediately, though vacation can only be taken after completing six months of continuous service).

Leaves of absence.

For the following plans you must be employed for at least two months of continuous service before coverage begins:

Life Insurance Plans;

Long Term Income Protection;

Supplementary Health and Hospital Plan;

Dental Plan.

Coverage begins on the first of the month coinciding with or following your two months of continuous service.

#### Other waiting periods:

- \* Short-term Sickness: after 20 consecutive days of work;
- \* Termination Payments: You must have worked continuously for:
  - at least one (1) full year in order to be eligible for termination pay benefits upon retirement at age 65, disability, lay-off or death;
  - five (5) consecutive years to be eligible for termination pay benefits upon termination for any reason other than dismissal for cause or abandonment of position.

#### Effective date of coverage if ill

The effective date of coverage will be delayed until after you have returned to work for at least one full day.

#### Benefits during a leave of absence

It depends on whether you are on a leave with or without pay. If you are on a leave with pay (vacation, WCB, short-term sickness), your coverage will stay the same. If you are on a leave without pay for one calendar month or more (except when you are on pregnancy or parental leave), you must pay the whole monthly premium yourself to keep your coverage.

#### How to make a claim

Just fill out a claim form, which is available from your benefits coordinator, and send it with proof of expenditure (explained in the form) to:

Great-West Life Assurance Co.  
Toronto Benefit Payments  
P.O. Box 4083, Station A  
Toronto, Ontario  
M5W 1M8

## SECTION B: HEALTH INSURANCE BENEFITS

### 1. Dental Insurance Plan

#### Overview

#### Your plan pays:

- 85% of basic dental care costs;
- 50% of denture costs for you and your dependents, with a lifetime maximum of \$3,000;
- 50% of orthodontic costs for children aged 6-18, and up to \$3,000 per child, per lifetime;
- 50% of costs for major restorations, up to \$2,000 a year for you and each dependent.

Premiums for the Dental Plan are paid fully by the OPS. Your coverage is based on the current fee rates set out by the Ontario Dental Association (ODA) for General Practitioners at the time the dental work was done. If your dentist charges more than those rates, you must pay the rest yourself.

#### Basic Dental Care Services

#### These include:

- Dental check-ups: complete check-ups every three years, and recall check-ups every six months;
- X-rays: bite-wing x-rays every six months; complete full mouth x-rays every two years; panoramic x-rays every three years;
- Preventative services: teeth cleaning and instructions on good dental care every six months; fluoride treatments;

- Restoration: amalgam, silicate, acrylic, and composite fillings; retentive pins, in conjunction with minor restorations;
- Surgical work: removal of erupted teeth; surgical removal of teeth;
- Related general services: denture repairs, re-lines and re-bases; in-office drugs and injections; general anaesthesia; professional advice and visits;
- Prosthodontic services and repairs: in-office lab charges;
- Limited endodontic services: pulp capping, pulpotomy, root canal therapy, apexification, periapical services, root amputation; hemisection; bleaching; intentional removal and apical filling;
- Limited bridgework: repairs to existing bridgework, not earlier than three months after it was put in;
- Periodontal work: surgical, non-surgical, and related periodontal services.

#### Denture services

#### These services include:

- Complete dentures or overdentures, upper and lower, once every three years;
- Partial dentures, once every three years;
- In-office lab charges and diagnostic costs, if related to the work covered by the dental plan.
- Replacement of existing dentures provided the existing dentures are at least three (3) years old.

### When to Submit a treatment plan

You should submit a treatment plan if the dental work will cost more than \$200 or if you are unsure of the extent of coverage. The insurance company will then consider the Treatment Plan as if it were a claim, and will tell you how much you would be paid. You then will know how much you have to pay for yourself, and can decide whether to go ahead with the treatment. If you do not begin treatment within 90 days after the company has written back to you, you must send in a new Treatment Plan.

### Transfer of Dental Records When Changing Dentists:

Make sure you have your dental records transferred when you change your dentist. This can save you money. Remember that time limits apply to some of the dental services covered under the plan (for example, the plan will cover complete check-ups performed once every 36 months). If you have your records transferred, your new dentist can confirm when last you received a particular service and ensure that the same service is not repeated within the applicable time frame.

You are responsible for the full cost of services performed more often than is allowed under the time frames stated in the Dental plan.

### End of dental insurance plan coverage

Dental plan insurance ends on the date of your resignation or termination of employment.

## 2. Supplementary Health and Hospital Plan (SH&H)

### Overview

The SH&H covers almost all kinds of expenses not included under OHIP: drugs, hospital care, out-patient treatment, nurse care, psychological treatment, artificial limbs, hospital equipment rentals, ambulance services, hearing aids, glasses and vision care, and more.

If you are no longer insured under OHIP because you do not live in Ontario for at least 183 consecutive days in each calendar year, SH&H will pay your expenses as if you were covered by OHIP.

### Amount of drugs covered by SH&H

SH&H will pay 90% of the cost of all necessary drugs prescribed by a doctor, for the treatment of a diagnosed injury or illness, including insulin for diabetes. Drugs and vaccines prescribed for preventative purposes are not covered under the plan.

### Expenses covered

- \* Hospital care: for private or semi-private room and board, up to \$100 a day over the cost of standard ward care.
- \* For employees age 65 and over, charges for private or semi-private room and board in a licensed chronic care or convalescent hospital: up to \$35.00 per day and limited to 120 days per calendar year.
- \* Out-patient treatment: charges made by an approved hospital for out-patient treatment and not covered by OHIP (except for doctors, and special nursing fees).
- \* Registered nurse care: charges for nursing in your home by a registered nurse or nursing assistant by a person who is not a member of your family. A physician must prescribe this service as being medically necessary and indicate that the minimum level of care required is that of a registered nurse or registered nursing assistant.
- \* Being taken by ambulance to the nearest hospital, except what is covered by OHIP, in accordance with the schedule established by the Ontario Medical Association.
- \* Diagnostic procedures, radiology, blood transfusions, oxygen and its administration.
- \* There is limit of \$25,000. per lifetime for the costs of organ transplants.

- Jobs! burn garments when prescribed for burn treatments
- 25% of the cost of Apnea Monitors prescribed for infants who are considered to be at risk from Sudden Infant Death Syndrome provided such monitors are approved under the Assistive Devices Program in Ontario
- Touch Vacuum Constrictors up to a maximum of \$500 during the entire time the person is insured

- \* One pair of eyeglasses due to an accidental injury
- \* 75% of the cost of corrective inserts to children's shoes when the growth of feet precludes the availability of specially constructed shoes or orthotic devices

The following limited expenses are also covered:

- \* Chiropractor, osteopath, chiropodist, naturopath, podiatrist, and speech, massage, or physiotherapist: up to \$12 per visit if you have used up your OHIP benefits to cover services from these specialists.

OHIP covers part of the costs for services provided by the above mentioned specialists up to an annual maximum. Patients must pay the balance. Insurance companies are prohibited, by law, from paying the costs for such services if part of the cost is being paid for by OHIP. Under the Health Insurance Act, insurance companies can help with a claimant's expenses only after OHIP has paid the annual maximum. Insurance companies can then pay up to the limits set by their policies (e.g. \$12 per visit under the OPS plan with Great-West Life).

- \* Out-of-hospital psychological treatment: SH&H will cover charges for the services of a psychologist up to \$16 per half hour for individual psychotherapy and/or testing, and \$12 per visit for all other visits.

- \* Custom-made orthopaedic shoes as prescribed by a physician:

- 75% of the cost of three pairs of shoes or boots in any calendar year; or

- \* Off-the-shell orthopaedic shoes (factory custom) as prescribed by a physician:

- 75% of the cost of customized stock shoes, modified to accommodate the person's particular medical needs, as prescribed by a doctor (up to three pairs a calendar year).

- \* Corrective shoe inserts - 75% of the cost (up to three pairs a calendar year, if necessary and prescribed by a doctor).

- \* Podiatry (foot surgery): Surgery performed by a podiatrist in his or her office is covered up to \$100 in a calendar year.

- \* Vision (Eye) Care:

- SH&H will pay up to \$200 per person in a 2 year period, which begins the day you make a purchase. This expense includes the cost of repairs and purchase of prescription sunglasses.

- If you need contact lenses or glasses after cataract surgery, you will get up to \$50 per eye.

- If you need glasses due to an injury, SH&H will pay 100% of the first pair.

- \* Hearing aids:

- Some of the cost of hearing aids is covered by the Ministry of Health Assistive Devices program. The rest of the cost is covered by SH&H, with a lifetime limit of \$200. SH&H will pay 100% of the first hearing aid needed due to an injury.

There is a \$10 deductible each calendar year for vision care and hearing aid coverage. For families, the deductible is \$10 per person, but no more than \$20 altogether. Your employer pays 60% of the monthly premiums for these two benefits, and you pay the other 40% out of your pay. You have to apply for the vision care and hearing aid coverage.

### 3. Sick Leave Insurance Plans

#### Types of sick leave plans

There are four ends to sick leave coverage:

- Short-term Sickness Plan (STSP),
- Long-term Income Protection (LTIP),
- Unemployment Insurance (UI)
- Canada Pension Plan Disability Benefit (CPP)
- Workers' Compensation (WC)

#### STSP BENEFITS

##### Sick and unable to work

If you cannot work because of sickness or injury, STSP pays your income for up to six months of time away (continuous or not) for each calendar year. STSP will pay all of your salary for the first six days, and 75% of your salary for the next 124 days.

##### "Top Up" of the 75% STSP benefit

You can use credits (attendance, vacation, MCO, etc.) to top up your STSP benefit to 100% of your salary. Once LTIP benefits begin, you can stop using your attendance credits. But it may be to your financial advantage to use your credits day by day, and put off the start of the LTIP payments. That way you will be paid at 100% of your pay until your credits are exhausted.

##### Absence into the next calendar year

You will be paid what is left of your STSP benefits from the last year. You will not be eligible for a full year's benefits until you have worked for 20 consecutive days.

- any drug or item which does not have a drug identification number as defined by Canadian legislation or that is registered under Division 10 of the Regulations to the Food and Drugs Act, Canada;

- services or supplies needed for sports or recreation.

#### End of coverage

Coverage ends on either:

- the last day of the month in which you cease employment for reasons other than total disability;
- the date you join the armed forces of any country on a full time basis;
- the last day of the month in which you are no longer an employee, as defined;
- the day you are on an approved leave of absence without pay over 30 days and choose not to pay the required premium;
- the day you die.

#### Total disability when SH&H coverage ends

If you are totally disabled when your SH&H coverage terminates, benefits for such disability will be payable, as long as you remain disabled, up to a maximum period of six months after termination.

If one of your covered dependents is hospitalized when your insurance terminates, benefits will be payable in the same manner as your own, or until your dependent is discharged from the hospital, whichever is earlier.

Payment will be made for pregnancy-related eligible expenses if you or your dependent are pregnant on the date coverage would normally cease, up to the date the baby is delivered.

Extension of your health care benefits will cease if the Policy should terminate.

- \* the scheduled duration of any lay-off or leave of absence including maternity leave. Maternity leave is considered to begin on the earlier of the date agreed upon by you and your employer or the date of birth;
- \* intentional self-inflicted injuries causing disability, whether you are judged sane or insane at time of such self inflicted injury;
- \* disability or injury as a result of an act of war, civil commotion, or participation in a riot, unless you are performing the normal duties of your job in accordance with the employer's instructions.

**NOTE to female employees:** LTIP Benefits are not paid for any disability during any period of time in which you are on pregnancy leave and receiving U.I. benefits.

#### Status of other benefits when receiving LTIP benefits

Your other benefits will stay the same, as long as you are totally disabled. You will be refunded any Basic or Supplementary Life premiums you paid between the day you became disabled and the start of LTIP benefits.

#### Affect of other benefits on LTIP payments?

The amounts received in disability related benefit payments from the following plans will be deducted from your LTIP payments.

- \* CPP disability benefit payments, including benefits for your dependents but excluding benefits paid directly to such dependents;
- \* WC benefits, excluding benefits payable for an unrelated disability;
- \* Public Service Pension Fund benefits;
- \* early retirement benefits payable from the CPP or the Quebec Pension Plan;

- \* earnings recovered through legal action against another person or corporation, in accordance with Third Party liability provisions.

#### Third Party Liability provisions

If you have a cause of action against a Third Party for income lost as a result of your disability, the LTIP benefit will be payable as specified. However, prior to the commencement of payments, you will be required to complete a Reimbursement Agreement/Direction form, agreeing to reimburse Great-West Life. The amount to be reimbursed will not exceed the amount of benefits paid by Great-West Life.

Full details concerning terms and calculation of reimbursement are as set out in the Agreement.

Please contact your ministry's benefits coordinator for full details and assistance.

#### Recurrence of disability after LTIP benefits end

If your disability comes back within three months, and if it is due to the same or a related cause, your benefits will start again right away.

#### Payment for doing rehabilitative work while receiving LTIP benefits

It is permitted to receive payment for rehabilitative work and still get some of your LTIP benefits provided you were already getting LTIP benefits, or were approved to get LTIP benefits. But talk to your benefits coordinator, since there are some other rules about this.

#### End of coverage

Coverage ends on the earliest of the following events:

- \* on the last day of the month in which you cease employment;
- \* on the date you join the armed forces of any country on a full time basis;



## receiving a WC award

If you receive a WC award within six months, you should make a claim for LTIP. If you are approved for LTIP, you will not have to pay your portion of the premiums for an, SH&H and pension contributions.

## Continuous service

The period of absence is included in your continuous service.

The period of absence after the first day of absence is included in your continuous service unless you are awarded the award.

## Injury or illness caused by someone other than you

called a "Third Party Claim".

If you take the WC award or sue the person you decide to sue, you will not be paid by the WCB. You must seek professional advice before making a claim.

If your employer has the right to sue the person you decide to sue, and wins more money than the WCB, you must sue the employer. You must sue the employer within the time limit. You must sue the employer within the time limit. You must sue the employer within the time limit.

# SECTION D - LEAVES OF ABSENCE

## Entitlement on joining the OPS

You are immediately entitled to three types of leaves with pay:

- \* Statutory holidays;
- \* Bereavement Leave;
- \* Special and Compassionate Leave.

## Statutory Holidays

There are 11 statutory holidays each year: New Year's Day, Good Friday, Easter Monday, Victoria Day, Canada Day, Civic Holiday, Labour Day, Thanksgiving Day, Remembrance Day, Christmas Day, and Boxing Day.

## Bereavement Leave

You are allowed up to three days leave with pay after the death of an immediate family member. These are: spouse, mother, father, mother-in-law, father-in-law, son, daughter, step-son, step-daughter, brother, sister, son-in-law, daughter-in-law, brother-in-law, sister-in-law, grandparent, grandchild, ward, or guardian.

You are allowed a one day leave with pay in the event of death and to attend the funeral of an uncle, aunt, niece, or nephew, if you would otherwise have been at work.

If the funeral is 800 or more kilometres from home you are allowed up to two days leave without pay for travel time.

## How to apply for Special Or Compassionate Leave

You must send a letter to the Deputy Minister or designee, explaining why you need the leave.

- \* You may get a leave with pay for up to three days.
- \* In some special cases, you can get a leave with pay for up to six months.

### Information on funds in the Plan

TD Bank will provide you with quarterly statements showing your contributions and interest earned to the statement date.

### Payment of monies deferred when taking my leave of absence

The Toronto-Dominion Bank will make bi-weekly direct deposits to your bank/trust company account or you may withdraw the money in a lump sum.

### Withdrawal from the Plan

You may withdraw from the Plan only under the following exceptional circumstances:

- \* extreme financial hardship
- \* total or permanent disability as defined under the provision for Long-Term Income Protection
- \* lay off
- \* death

When withdrawal is approved, TD Bank will refund your contributions and interest earnings after deducting the required taxes.

### Employment during leave period

You may work, but not with the O.P.S.

### Insured benefits during the leave

If you choose to continue your insured benefits coverage during the leave, your ministry will pay the employer portion of the premiums. However, you must arrange to pay the employee portion of premium payments through your ministry Human Resources Branch.

### Earning of pension credit while on leave

Under pension plan rules, you cannot contribute to the pension plan while on unpaid leave. Therefore, you do not earn pension credit for the leave. However, you can arrange to "buy-back" pension credit for the leave once you return to work. Your ministry benefits co-ordinator or Human Resources Branch will help you with the "buy-back" arrangements if you choose this option after you return to work.

### Return to the OPS after the leave

Under the Income Tax Act (which provides authority for the leave) you are required to return to the OPS for a period of time equal to the leave period.

### Other kinds of leave

Other leaves include:

- \* **Court witness or Jury Duty leave:** If you are subpoenaed to be a witness in a trial or selected to serve on a jury, you can:
  - keep the money paid you for being a witness or juror and count your time away from work as leave without pay;
  - keep the fee and count the time as vacation or M.C.O.;
  - pay the fee to your employer and count the time away as leave with pay.
- \* **Foreign/Intergovernmental Employment Leave:** You may be given up to one year, with or without pay, to work in another country, for that government or for the Canadian government. Discuss your benefits coverage during leave with your benefits co-ordinator.
- \* **Canadian Forces Reserve Training:** You may be given up to one week of leave with pay, and one week without pay during a fiscal year. To find out more, talk to your benefits co-ordinator.

You also have the flexibility to extend your leave. If requested in writing, at least two weeks prior to the expiry of your pregnancy leave, you are entitled to a leave of absence without pay but with accumulation of credit for up to six months (26 weeks). The first 18 weeks of the extended leave will be 'parental leave' (see the section on parental leave for more information).

### Nature of pregnancy leave

Pregnancy leave is a "leave without pay". However, Unemployment Insurance (UI) will provide benefits during your leave if you have been working and paying UI premiums for at least 20 weeks. Up to 15 weeks of benefits is payable during this period under UI's pregnancy provision.

In addition, if you qualify for UI benefits, the employer will pay a Supplementary Unemployment Benefit (SUB) allowance.

### The SUB Allowance - How it works

This allowance plus the UI benefit will pay you 93% of your weekly salary for each of the 17 weeks of pregnancy leave.

Your employer will pay 93% of your weekly salary for the first two weeks of your leave, before the UI benefits begin. After that, you will get UI benefits for 15 weeks of pregnancy leave and a SUB allowance. The SUB allowance will be added to the UI benefits (and any other earnings you receive) so that the two together make up 93% of your salary.

**NOTE:** If you receive UI benefits during a taxation year in which your annual income is more than 1 1/2 x the maximum yearly insurable earnings, you must pay back a portion of the UI benefits received to Revenue Canada. This is required under the Federal Government's Unemployment Insurance Act.

This will mostly affect employees who earn high salaries i.e. at least \$55,380 for the 1992 taxation year. Please check with your benefits coordinator for more details and to find out if this UI provision will affect you.

### Benefits when on pregnancy leave

Your basic life insurance will be paid as if you were at work, but, if you want, you can choose to stop your supplementary and dependent life insurance benefits.

Income tax and Canada Pension Plan (CPP) contributions will be taken off your cheque, but will be based on the amount of your allowance and not your salary.

The following premiums will be deducted from your SUB allowance as if you were still at work:

- \* vision care/hearing aid premiums (if you have this coverage);
- \* LTIP

You will not have to pay unemployment insurance

Let your benefits coordinator know if you want to have deductions made from your cheque to maintain benefits or services e.g. the life insurance options, pension plan contributions, credit union assignments, parking, charitable donations, etc.

### Vacation and M.C.O. credits

You continue to earn vacation and M.C.O. credits and service during the 17 weeks of pregnancy leave.

### **2. Adoption Leave (see also Parental Leave):**

Eligibility for adoption leave

Any employee who has worked with the OPS for at least 13 weeks is eligible for adoption leave.

To apply you must send a letter to your supervisor with legal documents proving that you are adopting a child.

**NOTE:** Unemployment Insurance now refers to adoption leave as "parental leave". This leave is described in more detail in the next section on "Parental Leave".

## SECTION 1 LIFE INSURANCE PLANS

### Kinds of plans available through the OPS

There are three kinds of plans available:

- Basic Life Insurance (standard for all OPS employees);
- Supplementary Life Insurance (optional);
- Dependent Life Insurance (optional).

Under all these plans, a benefit is paid in the event of death to the person named as beneficiary. The beneficiary may be changed at any time. If a beneficiary is not named, the money will be paid to your estate.

Please let your benefits coordinator know about any changes that might affect these plans, such as marriage, divorce, birth/adoption of a child, or a death.

### 1. BASIC LIFE INSURANCE

#### Benefits provided

This insurance covers you for 100% of your annual earnings from regularly scheduled work. It will not pay less than \$10,000, even if that is more than 100% of your salary.

#### Commencement of coverage

Coverage begins on the first day of the month coinciding with or following two months of continuous service from the date of your appointment. If you are absent due to illness or injury on the date coverage is to take effect you do not become insured until you return to work on a full-time basis for at least one regular working day.

### Payment of insurance premiums

Your employer pays the full amount of the premiums.

### Coverage while on leave

If you are on a leave with pay, you will be covered just as if you were working.

If you are on leave without pay (except when you are on pregnancy or parental leave) for more than a calendar month, you may maintain coverage by paying the full premiums yourself.

### Status of insurance if totally disabled

If you become totally disabled before your 65th birthday for a continuous period of 6 months, coverage continues until:

- your recovery, the end of the month you turn 65, or death, whichever comes first.

### Status of coverage after retirement or age 65

If you are getting a PSPP pension based on at least 10 years of pensionable service, your coverage will be reduced to \$2,000 for the rest of your life.

### Conversion of insurance policy on retirement or resignation

If you retire or resign, you can convert your policy to an individual policy with Great-West Life Assurance Company. You will be covered for the amount of your Life Insurance less the \$2,000 you may be eligible for when you retire. You can convert at a premium rate as if you were buying an individual policy, and without needing to prove that you are insurable (in good health), if you apply within 31 days of separation.

### Conversion of policy

Upon resignation or retirement, you may convert your insurance coverage to an individual policy providing coverage up to the amount for which you were insured before ending employment (subject to a combined maximum with Basic Life of \$200,000). You do not need to provide proof of insurability. To apply for the conversion you must submit a letter stating your request to the insurance company within 31 days of the end of coverage.

### End of coverage

This insurance coverage will end at the earlier of the following:

- (a) the end of the calendar month in which you terminate your employment; or
- (b) on the first day of October following your 65th birthday, if you continue your employment past that birthday, except where coverage is provided under total disability provisions. See your benefit coordinator for details.

However, coverage remains in force for a 31-day grace period to give you enough time to set up another life insurance policy.

## 3. DEPENDENT LIFE INSURANCE

### Overview

Like Supplementary Life Insurance this is another optional benefit. You may purchase insurance for dependents in amounts of either:

\$1,000 on your spouse and/or \$500 on each dependent child;  
or

\$2,000 on your spouse and/or \$1000 on each dependent child.

(See Definitions section at the front of this guide for the definition of "dependent child".)

### Commencement of coverage

The commencement of coverage is on the same basis as for Supplementary Life Insurance coverage. Refer to that explanation in this section for information.

### Premium payment

You pay the full premium. The money is taken off your pay.

### Coverage if on a leave without pay

If you are on leave for more than one calendar month and want to keep your coverage, you can arrange to pay the premiums. Please see your ministry benefits coordinator for details.

### Proof of insurability of spouse or child

If you buy the insurance within 31 days after you are hired, married or birth/adoption of child, you do not need to prove insurability. If you buy the insurance later, you must do so.

### Conversion of policy

If you retire, resign, or die, the insurance on your spouse can be converted into an individual policy, just as with Basic Life Insurance. You cannot convert the insurance on your children.

### End of dependent life insurance coverage

Coverage ends at the earlier of the following:

- \* the end of the calendar month in which you terminate your employment;
- \* the first day of October following your 65th birthday, if you continue working past your 65th birthday;
- \* the date a dependent ceases to be an eligible dependent.

**Schedule 4.1(af) – Employees**

APPENDIX B – Benefits under the Ontario Public Service Employees Unions Contract  
[SEE ATTACHED]

## DEFINITIONS

**Benefits:** Money or services that you have a right to receive from an insurance company or other benefit plan.

**Calendar Month:** Starting from the first day of the month and ending the last day of the month.

**Calendar Year:** A year starting from January 1 and ending December 31.

**Claim:** Demand for money from your insurance company for payment of benefits.

**Consecutive months:** One month following after another with no breaks in between.

**Convert:** To change your insurance from a group policy with the OPS into your own individual policy.

**Coordination of benefits:** A group health insurance policy designed to enable payment of benefits, usually to 100% of cost, when you are insured under two plans; i.e. you and your spouse both have family coverage.

**Coverage:** Protection by insurance.

**Deductible:** Amount of money below which the insurance company will not pay. For example, if you have a \$200 deductible, you must pay for anything less than \$200 yourself. If the expense is more than \$200, you pay \$200 and the insurance company pays the rest.

**Dentist:** A person who legally practices dentistry, dental surgery, or both. The dentist must be licensed by the licensing authority of the jurisdiction where the treatment is given.

### Dependant:

The child must

- a natural
- a child of
- a child of
- a child of  
is your guardian

The child must be a full-time student. Dependant is Full-time student after the age of 18 up to self-sustaining.

These benefits

- already in
- foster care
- living in full-time
- working full-time student

### Eligibility re

Employee:

**Modified Orthopaedic Shoes (factory custom):** off-the-shelf shoes which have had some additional changes made to fit the employee's particular medical needs as prescribed by a doctor.

**Physician (Doctor):**

A person who legally practises medicine, surgery, or both.

The physician must be licensed by the licensing authority of the jurisdiction where the treatment is given.

**Premium:** Money paid to the insurance company for insurance coverage.

**Prescription drugs and medicine:**

Prescription drugs must be:

- necessary;
- prescribed by a physician or dentist for the treatment of an injury or illness;
- dispensed by a licensed pharmacist, physician, dentist, or surgeon legally allowed to dispense such drugs;
- registered under a Drug Identification Number.

**Note:** Over-the-counter drugs such as Pepto Bismol are not covered by this plan, even though they may be prescribed.

**Pro-rated**

**Entitlement or Cost:** An entitlement or cost determined by the ratio of your part-time schedule compared to a full-time employee schedule.

**Psychiatric treatment:**

Treatment by a specialist in neurology or psychiatry, as well as treatment by any other legally licensed physician for a condition caused by a nervous disorder.

**Retroactive change:** A backdated change. For example, if you have an increase in pay in March that is retroactive to January, you will be paid the increase for January and February, as well as all the time after that, provided you worked in January.

**Spouse:**

A spouse is a person who is:

- legally married to the employee; or
- although not legally married to the insured employee, cohabits with the employee as husband and wife or as lesbian or gay partners.

**Total disability:**

Continuous inability, caused by illness or injury, to do the essential duties of:

- the employee's normal job during the first 30 months after the date of the disability;
- any job which the employee is reasonably fitted for by education, training, or experience, after the 30 month period.

To be considered totally disabled, the person must be undergoing treatment by a physician, and must not be employed for wages (except for Rehabilitative Employment, as discussed in Section B of this guide).



For Part-time employees, you are covered for the same kinds of benefits as full-time employees however, since you work on a part-time basis (i.e. at less than a full-time employee schedule) there are some differences in the entitlements and procedures related to some of your benefits. See each benefit section for details.

For Seasonal employees, you are covered by the same kinds of benefits as classified employees in the bargaining unit, but there are some differences. See each benefit section for details.

Which benefits need a waiting period before I am eligible?

For the following plans you must be employed for at least two months of continuous service before coverage begins:

- Life Insurance Plans;
- Long Term Income Protection;
- Supplementary Health and Hospital Plan;
- Dental Plan.

Coverage begins on the first of the month, whether it coincides with or follows your two months of continuous service.

What happens if I am ill when coverage is supposed to take effect?

The effective date of coverage will be delayed until after you have returned to work for at least one full day.

Other waiting periods:

- Short-term Sickness: after 20 consecutive days of work;
- Termination Payments: You must have worked continuously for:
  - at least one (1) full year in order to be eligible for termination pay benefits upon retirement at age 65, disability, lay-off, or death;

- five (5) consecutive years to be eligible for termination pay benefits upon termination for any reason other than dismissal for cause or abandonment of position.

What happens to my benefits when I take a leave of absence?

It depends on whether you are on a leave with or without pay. If you are on a leave with pay (vacation, WCB, short-term sickness), your coverage will stay the same. If you are on a leave without pay for one calendar month or more (except when you are on pregnancy or parental leave), you must pay the whole monthly premium yourself to keep your coverage.

How do I make a claim?

Just fill out a claim form and send it with proof (explained in the form) to the insurance company. The claim forms are available from your benefits coordinator.

For dental claims:

Great West Life Assurance Co.  
P.O. Box 4083, Station A  
Toronto, Ontario  
M5W 1M8

For other claims:

Confederation Life Insurance Co.  
321 Bloor Street East  
Toronto, Ontario  
M4W 1H1

Does it matter how long I wait to make a claim?

There are time limits about when to make a claim. These are:

- by the end of the calendar year following the year of the expense for all health expenses;
- 90 days for SH&H and dental claims, if you ended your coverage (because of resignation, death, transfer from bargaining unit to management, etc.);

## **SECTION B: HEALTH INSURANCE BENEFITS**

### **1. Dental Insurance Plan**

Your plan pays:

- 85% of basic dental care costs;
- 50% of denture costs for you and your dependants, with a lifetime maximum of \$3,000;
- 50% of orthodontic costs for children only (aged 6-18); up to \$3,000 per child, per lifetime;
- 40% of costs for major restorations, up to \$1,000 a year for you and each dependant.

Premiums for the Dental Plan are paid fully by the OPS. Your coverage is based on the current fee rates set out by the Ontario Dental Association (ODA) at the time the dental work was done. If your dentist charges more than those rates, you must pay the rest yourself.

#### **What do Basic Dental Care Services Include?**

- Dental check-ups: complete check-ups every three years, and recall check-ups every six months;
- X-rays: bite-wing x-rays every six months; complete full mouth x-rays every two years; panoramic x-rays every three years;
- Preventative services: teeth cleaning, fluoride treatment, and instructions on good dental care every six months;
- Restoration: amalgam, silicate, acrylic, and composite fillings; retentive pins, in conjunction with minor restorations;
- Surgical work: removal of erupted teeth; surgical removal of teeth;

- Related general services: denture repairs, re-linings and re-bases; in-office drugs and injections; general anaesthesia; professional advice and visits;
- Prosthodontic services and repairs: in-office lab charges;
- Limited endodontic services: pulp capping, pulpotomy, root canal therapy, apexification, periapical services, root amputation; hemisection; bleaching; intentional removal and apical filling;
- Limited bridgework: repairs to existing bridgework, not earlier than three months after it was put in;
- Periodontal work: surgical, non-surgical, and related periodontal services.

#### **What do denture services include?**

- Complete dentures or overdentures, upper and lower, once every three years;
- Partial dentures, once every three years;
- In-office lab charges and diagnostic costs, if related to the work covered by the dental plan.
- Replacement of existing dentures provided the existing dentures are at least three (3) years old.

#### **What do Major Restorative Services include?**

- Gold foil and metal inlay restorations;
- Retentive pins in conjunction with major services;
- Inlay, porcelain;
- Crowns;
- Metal transfer coping;
- Post and core;
- Bridgework (fixed, once every three years): evaluation, pontics, retainers (inlay/onlay), repairs, splinting, retentive pins

- For 70 years age 65 and over, charges for semi-private or private accommodation in a licensed chronic or convalescent hospital, up to \$25 per day and limited to 120 days per calendar year.
- Out-patient treatment: charges made by an approved hospital for out-patient treatment and not covered by OHIP (except for doctors, and special nursing fees).
- Registered nurse care: charges for nursing in your home by a registered nurse or nursing assistant by a person not normally living in your home, so long as the care can only be properly given by a nurse or nursing assistant. The service must be approved by a physician as necessary to the employee or dependant's health care.
- Being taken by ambulance to the nearest hospital, except what is covered by OHIP, in accordance with the schedule established by the Ontario Medical Association.
- Diagnostic procedures, radiology, blood transfusions, oxygen and its administration.
- Purchase of a wheelchair provided the attending physician has recommended and approved the purchase and if the rental cost would exceed the purchase price.
- Rental of wheelchair, hospital bed, or respirator/ventilator, for temporary use.
- Wheelchair repairs and modifications: 50% of the cost, up to \$500 for each repair.
- Artificial limbs and eyes.
- Crutches, splints, casts, trusses, and braces.
- There is a limit of \$25,000 per lifetime for the costs of organ transplants.
- Dental services and supplies: charges made by a dental surgeon within 24 months after an accident. This includes replacing natural teeth, (as long as they were in good condition before the accident), and setting a fractured or dislocated jaw.

- 25% of the cost of an "Apnea Monitor" if it has been purchased in advance under the Assistive Devices Program for individuals at risk of Sudden Infant Death Syndrome.
- Treatment by a physician, surgeon or specialist (Doctor's charges) when provided outside Ontario for any expense in excess of the amount covered by OHIP, according to the OMA fee schedule.

The following limited expenses are also covered:

- Chiropractor, osteopath, naturopath, podiatrist, and speech, massage, or physiotherapist: up to \$12 per visit if you have used up your OHIP benefits to cover services from these specialists.
- Out-of-hospital psychological treatment: SH&H will cover charges for the services of a psychologist up to \$16 per half hour for individual psychotherapy and/or testing, and \$12 per visit for all other visits.
- Custom-made orthopaedic shoes as prescribed by a physician:
  - 75% of the cost of three pairs of shoes or boots in any calendar year; or
  - 75% of the cost of inserts (up to three pairs per calendar year).
- Off-the-shelf orthopaedic shoes (factory custom) as prescribed by a physician:
  - 75% of the cost of customized stock shoes, modified to accommodate the person's particular medical needs (up to three pairs a calendar year);
  - 75% of the cost of corrective shoe inserts (up to three pairs a calendar year).
- Podiatry (foot surgery): Surgery performed by a podiatrist in his or her office is covered up to \$100 in a calendar year.
- Vision (Eye) Care:
  - SH&H will pay up to \$200 per person in a 2 year period, which begins the day you make a purchase. This

- cost of delivery of prescription drugs;
- services or supplies needed for sports or recreation.

#### When does this coverage end?

Coverage ends on either:

- the last day of the month in which you cease employment for reasons other than total disability;
- the date you join the armed forces of any country on a full time basis;
- the last day of the month in which you are no longer an employee, as defined;
- the day you are on an approved leave of absence without pay over 30 days and choose not to pay the required premium;
- the day you die.

#### What happens if I'm totally disabled when my SH&H coverage ends?

If you are totally disabled when your SH&H coverage terminates, benefits for such disability will be payable, as long as you remain disabled, up to a maximum period of six months after termination.

If one of your covered dependants is hospitalized when your insurance terminates, benefits will be payable in the same manner as your own, or until your dependant is discharged from the hospital, whichever is earlier.

Payment will be made for pregnancy-related eligible expenses if you or your dependant are pregnant on the date coverage would normally cease, up to the date of delivery.

Extension of your health care benefits will cease if the Policy should terminate.

### 3. Sick Leave Insurance Plans

#### What kinds of sick leave are there?

There are five kinds of sick leave coverage:

- Short-term Sickness Plan (STSP)
- Long-term Income Protection (LTIP)
- Unemployment Insurance (UI)
- Canada Pension Plan Disability Benefit (CPP)
- Workers' Compensation (WC)

#### STSP BENEFITS

#### What happens if I am sick and cannot come to work?

If you cannot work because of sickness or injury, STSP pays your income for up to six months of time away (continuous or not) for each calendar year. STSP will pay all of your salary for the first six days, and 75% of your salary for the next 124 days.

#### Can I "Top Up" the 75% STSP benefit?

You can use credits (attendance, vacation, etc.) to top up your STSP benefit to 100% of your salary. Once LTIP benefits begin, you can stop using your attendance credits. But it may be to your financial advantage to use your credits day by day, and put off the start of the LTIP payments. That way you will be paid at 100% of your pay until your credits are exhausted.

#### What happens if I am absent into the next calendar year?

You will be paid what is left of your STSP benefits from the last year. You will not be eligible for a full year's benefits until you have worked for 20 consecutive days. Each year your benefits will be renewed so long as you have worked the 20 consecutive days.

### What happens to my other benefits when I get LTIP benefits?

Your other benefits will stay the same, as long as you are totally disabled until you turn 65. You will be refunded any basic or supplementary life premiums you paid between the day you became disabled and the start of LTIP benefits.

### Will the other benefits I get affect my LTIP payments?

The amounts received in disability related benefit payments from the following plans will be deducted from your LTIP payments.

- CPP disability benefit payments, including benefits for your dependants but excluding benefits paid directly to such dependants;
- WC benefits, excluding benefits payable for an unrelated disability;
- Public Service Pension Fund benefits;
- early retirement benefits payable from the CPP or the Quebec Pension Plan;
- earnings recovered through legal action against another person or corporation, in accord with Third Party liability provisions;
- disability benefits payable under any other government plan excluding UIC;
- Income replacement indemnity payable under any automobile insurance plan or policy;
- earnings or payments from any employer.

### What are the Third Party Liability provisions?

If you have a cause of action against a Third Party for income lost as a result of your disability, the LTIP benefit will be payable as specified. However, prior to the commencement of payments, you will be required to complete a Reimbursement Agreement/Direction form, agreeing to reimburse Confederation Life. The amount to be reimbursed will not exceed the amount of benefits paid by Confederation Life.

Full details concerning terms and calculation of reimbursement are as set out in the Agreement.

Please contact your ministry benefits coordinator for details and assistance.

### What happens if my disability comes back after my LTIP benefits end?

If you cease to be totally disabled at any time during the qualifying period and become disabled again, due to the same cause, within 2 weeks, the qualifying period will be extended by the number of days during which you cease to be disabled.

If you have been receiving benefits and your disability comes back within three months of returning to full-time work, and if it is due to the same or a related cause, your benefits will start again right away.

### Can I be paid for doing rehabilitative work and still get some of my LTIP benefits?

Yes, if you were already getting LTIP benefits, or were approved to get LTIP benefits. But talk to your benefits coordinator, since there are some other rules about this.

### When does this coverage end?

Coverage ends on the earliest of the following events:

- on the last day of the month in which you cease employment;
- on the date you join the armed forces of any country on a full time basis;
- on the last day of the month in which you are no longer an employee, as defined;
- on the day you are on an approved leave of absence without pay for more than 30 days and choose not to pay the required premium;
- when you reach the age 64 years and 6 months of age;
- on the day you die.

## UI BENEFITS

### What are UI's benefits for sickness?

UI will give you up to 15 weeks of benefits if you are absent from work because of sickness. But you must have used up your

## **SECTION D: LEAVES OF ABSENCE**

### What kind of leaves am I entitled to as soon as I join the OPS?

You are immediately entitled to three types of leaves with pay:

- Statutory holidays;
- Bereavement Leave;
- Special and Compassionate Leave.

### What are the Statutory Holidays?

There are 11 statutory holidays each year: New Year's Day, Good Friday, Easter Monday, Victoria Day, Canada Day, Civic Holiday, Labour Day, Thanksgiving Day, Remembrance Day, Christmas Day, and Boxing Day.

### What is Bereavement Leave?

You are allowed up to three days leave with pay after the death of an immediate family member. These are: spouse, mother, father, mother-in-law, father-in-law, son, daughter, step-son, step-daughter, brother, sister, son-in-law, daughter-in-law, brother-in-law, sister-in-law, grandparent, grandchild, ward, or guardian.

You are allowed a one day leave with pay in the event of death and to attend the funeral of an uncle, aunt, niece, or nephew if you would otherwise have been at work.

If the funeral of a family member listed above is 800 or more kilometres from home you are allowed up to two days leave without pay for travel time.

### How do I apply for Special Or Compassionate Leave?

You must send a letter to the Deputy Minister or designee, explaining why you need the leave.

- You may get a leave with pay for up to three days.

- In some special cases, you can get a leave with pay for up to six months.
- You may get a leave with pay for over six months if it is certified by the Civil Service Commission and if it is approved by the Lieutenant Governor in Council.
- You may get a leave without pay.

### How much Vacation time do I get?

Your vacation time depends on how long you have been in the OPS. These are the rates:

- for the first 8 years of continuous service -- 15 days a year;
- after 8 years of continuous service -- 20 days a year;
- after 15 years of continuous service -- 25 days a year;
- after 26 years of continuous service -- 30 days a year;

As well, after you have worked for the OPS for 25 years, you will be given an extra five days of vacation credits in that year only.

If you have worked for the OPS for 25 years, on or before the month you turn 64, you will be given five days of leave with pay for the year between your 64<sup>th</sup> and 65<sup>th</sup> birthday. This is called pre-retirement leave.

You cannot take a vacation until you have been working for six consecutive months. But, you begin to earn vacation credits as soon as you begin work.

### Can I carry over or bank my unused vacation credits from one year to the following year?

Yes. You can carry over up to twice your earned vacation credits. However, you must reduce your banked vacation credits to a maximum of one year's accrual by December 31 each year.

### Self-funded leave

The Self-funded Leave Plan allows employees to plan and self-finance a leave of absence for a minimum period of six months

Do I earn pension credit while I am on leave?

Under pension plan rules, you cannot contribute to the pension plan while on leave. Therefore, you do not earn pension credit for the leave. However, you can arrange to "buy-back" pension credit for the leave once you return to work. Your ministry benefits co-ordinator of Human Resources Branch will help you with the "buy-back" arrangements if you choose this option after you return to work.

Do I have to return to the OPS after the leave?

Under the Income Tax Act (which provides authority for the leave), you are required to return to the OPS for a period of time equal to the leave period.

What other kinds of leave are there?

Other leaves include:

- **Court witness or Jury Duty leave:** If you are subpoenaed to be a witness in a trial or selected to serve on a jury, you can:
  - keep the money paid you for being a witness or juror and count your time away from work as leave without pay;
  - keep the fee and count the time as vacation or compensating leave;
  - pay the fee to your employer and count the time away as leave with pay.
- **Foreign/Intergovernmental Employment Leave:** You may be given up to one year, with or without pay, to work in another country, for that government or for the Canadian government. Discuss your benefits coverage during leave with your benefits coordinator.
- **Canadian Forces Reserve Training:** You may be given up to one week of leave with pay, and one week without pay during a fiscal year. To find out more, talk to your benefits coordinator.

**SECTION E: PREGNANCY,  
ADOPTION & PARENTAL LEAVE**

**1. Pregnancy Leave:**

Who can get pregnancy leave?

Any woman who has worked for the OPS for at least 13 weeks.

How do I apply?

You must send a letter to your supervisor with a statement signed by a physician. The letter must say that you are pregnant and when the baby is due.

When can the leave begin?

You can begin your pregnancy leave 17 weeks before the baby is due.

**Note:** If you qualify for Unemployment Insurance benefits, UI will only begin paying these benefits as early as 8 weeks before the baby is due. Therefore, if you start your pregnancy leave 17 weeks early, you will not get UI benefits for the first 9 weeks of leave. Please see your ministry benefits co-ordinator or human resources branch for more details.

How long is the leave?

If you are entitled to parental leave (see section on parental leave), your pregnancy leave will end 17 weeks after it began.

If you are not entitled to parental leave, your pregnancy leave will end 17 weeks after it began, or six weeks after the birth, still birth, or miscarriage, whichever is later.

If you wish, you can end your leave earlier by giving your employer at least four weeks written notice of the date you want

### **3. Parental Leave:**

#### **What is parental leave?**

Parental leave is an 18 week unpaid leave for the purpose of child care. UI provides 10 weeks of benefits to either parent for care of a newborn or newly adopted child. UI may pay an additional five weeks of benefits if the child is over six months old and suffers from a physical, psychological or emotional condition that requires longer parental care.

The adopting parents may share the UI parental benefits. Your insured benefits continue as if at work for the 18 weeks of this leave unless you state in writing that you do not want this. You also continue to earn seniority and vacation credits.

#### **Who can get parental leave?**

Any employee who has worked with the OPS for at least 13 weeks, and who is:

- a natural parent (mother or father);
- an adoptive parent (mother or father); or
- a person in a permanent relationship with the parent of a child, and who intends to treat the child as his/her own.

#### **When does parental leave begin?**

- A natural mother must take the leave immediately after her 17 weeks pregnancy leave, and the parental leave is part of the six month extended leave. A natural father must take the leave within 35 weeks of the birth.
- For adopting parents, leave must begin either on the day the child comes into their custody, care and control for the first time, or within 35 weeks of that date.
- An employee who is in a permanent relationship with the parent of a child (e.g. a step-parent) and who intends to treat the child as his/her own must begin the leave within 35 weeks of the child coming into custody, care and control for the first time.

#### **When does the parental leave end?**

The leave ends 18 weeks after it begins. However, if you are an adoptive parent, or in a permanent relationship with the parent of a child you intend to treat as your own, you have the flexibility to extend your leave. If requested in writing at least two weeks before the parental leave ends, you are entitled to an additional 25 weeks of leave without pay but with accumulation of credits.

#### **Do I get a SUB allowance during parental leave?**

Only if the leave is related to adoption. If you qualify, the SUB allowance plus UI benefits will provide 93% of weekly salary for 12 weeks.

Like pregnancy leave, parental leave is a leave without pay. However, UI provides 10 weeks of benefits. The SUB allowance will pay 93% of salary for the first two weeks of parental leave, before the UI benefits begin. After that, the SUB allowance will top-up the 10 weeks of UI benefits and any other earnings you receive, to give you 93% of your weekly salary.

You do not receive any pay or benefit (SUB or UI) during the last six weeks of the 18 weeks parental leave except under the following conditions.

UI may pay you an additional five weeks benefits if the newly adopted child has a physical, psychological or emotional condition and requires longer parental care. If you provide your employer with proof that you are receiving the additional five weeks of UI benefits, then you will receive an additional five weeks of SUB allowance payments.

The SUB allowance will be paid to the adoptive parent (mother or father) who is receiving the UI parental benefits.



### When does coverage end?

Coverage ends on the last day of the calendar month in which you terminate employment. However, coverage remains in force for a 31-day "period of grace" following the date of termination.

## SUPPLEMENTARY LIFE INSURANCE

### What is it?

Supplementary Life Insurance is an optional benefit. You decide whether you wish to join. Under this option you can buy additional insurance of up to three times your yearly salary.

### When does coverage begin?

If you decide to buy this insurance when you are first appointed to the civil service, coverage begins on the first day of the calendar month coinciding with or following two months of continuous service.

If you apply to buy or increase the insurance within 31 days of marriage or the birth/adoption of a child, coverage becomes effective the first of the month following application, providing you have completed two months of continuous service.

Otherwise, coverage becomes effective on the first of the month following approval by the insurance company.

If you are absent from work due to illness or injury on the day coverage is to begin, coverage does not become effective until you return to work for at least one regular working day.

### Who pays the monthly premium?

You pay the entire monthly premium deduction, which is based on your age and how much insurance you buy. The money is taken off your pay.

### What happens if my salary changes?

The amount of your insurance coverage adjusts with changes in

your salary from either the date the increase is approved or the effective date, whichever is later.

If you are absent from work due to sickness or injury on the date your increased coverage would have occurred, the increase will not take effect until you have returned to work for at least one working day.

If your salary is reduced, you may choose to maintain the insurance at the former higher level by applying through your benefits coordinator.

### What happens if I become totally disabled?

- Total disability must commence prior to age 64 years and 6 months.
- Total disability must have existed continuously for at least 9 months.
- Proof of disability must be submitted within 24 months after the commencement of disability.
- If you are getting LTIP, your insurance coverage remains in force, but you will not have to pay premiums. You will be covered as long as you are disabled (as it is defined in the insurance policy), or until you turn 65, whichever is earlier.

### Do I need to prove that I am insurable (in good health)?

If you buy Supplementary Life Insurance within 31 days after appointment, upon marriage or on the birth/adoption of a child, you do not need to prove that you are insurable. If you apply later, you must prove your insurability.

### Can I convert my policy?

Upon resignation or retirement, you may convert your insurance coverage to an individual policy providing coverage up to the amount for which you were insured before ending employment (subject to a combined maximum with Basic Life of \$200,000). You do not need to provide proof of insurability. To apply for the conversion you must submit a letter stating your request to the insurance company within 31 days of the end of coverage.