



Covenant
Health

International Union of Operating
Engineers (IUOE)

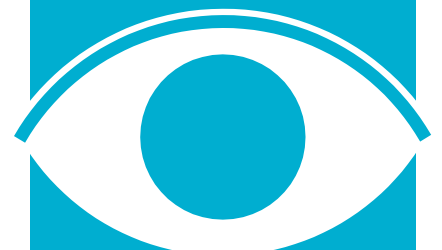
Make the most of your benefits

This is a quick reference guide to the Covenant Health Benefit Plan for International Union of Operating Engineers (IUOE). A detailed description of the benefit plans and additional information can be accessed by employees at [My Benefits | CompassionNET | Covenant Health](#)

The Covenant Health Benefit Plan for IUOE offers core coverage as well as a Flexible Spending Account. Employer-provided credits in the Flexible Spending Account are allocated at initial eligibility and annually in January. Alberta Blue Cross is available to assist employees at 1-800-661-6995.

If there is a question of interpretation between this summary and the official plan documents, the terms of the formal policies and official plan documents shall prevail.

YOUR
BENEFITS
AT A
GLANCE



Core benefits and core options

Life Insurance

Benefit Provider: Sun Life Financial

Maximum \$500,000 for Basic Life and Optional Life combined. Premiums paid via payroll deduction.

Basic Life Insurance

- Coverage is mandatory
- Basic coverage is 1X your annual basic salary
- 75% employer paid premiums
- Employee coverage up to age 80

Optional Life Insurance

- Coverage is optional
- Optional life coverage is 1X your annual basic salary
- 75% employer paid premiums
- Employee coverage up to age 80

Voluntary Employee and Spousal Life

- Coverage is optional
- 100% employee paid premiums
- You may select the amount of coverage in units of \$10,000 to a maximum of \$200,000 (both employee and spouse)
- Employee and spousal coverage up to age 70

Voluntary Dependant Life

- Coverage is optional
- 100% employee paid premiums
- Spouse \$10,000
- Each eligible child \$5,000
- Dependant children covered until they turn 21 or, if they are a full-time student, until they turn 25
- Spousal coverage up to age 70

Accidental Death and Dismemberment (AD&D) Insurance

Benefit Provider: Industrial Alliance, Special Markets Solutions

Maximum of \$500,000 for Basic AD&D and Optional AD&D combined. Premiums paid via payroll deduction.

Basic AD&D Insurance

- Coverage is mandatory
- Basic AD&D is 1X your annual basic salary
- 75% employer paid premiums
- Employee coverage up to age 80

Optional AD&D Insurance

- Coverage is optional
- Optional AD&D is 1X your annual basic salary
- 75% employer paid premiums
- If Optional Life insurance is selected, additional Optional AD&D insurance must be selected as well.
- Employee coverage up to age 80

Voluntary AD&D Insurance

- Coverage is optional
- 100% employee paid premiums
- You may select coverage in units of \$10,000 to a maximum of \$350,000
- If you choose the family plan, your spouse is insured at 50% of your coverage if there are no dependant children or 40% if there are dependant children
- Each dependant child will be insured for 10% of your benefit if you have a spouse or 15% if you do not

Voluntary AD&D Insurance (continued)

- Dependant children covered until they turn 21 or, if they are a full-time student, until they turn 25

Disability coverage

Benefit Provider: Sun Life Financial

Coverage is mandatory. Premiums are paid via payroll deduction.

Short Term Disability (STD)

- Coverage is mandatory
- 75% employer paid premiums
- 66 2/3% of your regular salary payable after the expiration of sick leave for a maximum of 24 weeks from the date of disability
- If you have enough sick leave credits to satisfy the LTD elimination period, STD will not be initiated—you will go directly to an LTD claim upon approval from insurer
- The benefit is taxable when received

Long Term Disability (LTD)

- Coverage is mandatory
- 75% employer paid premiums
- 66 2/3% of your regular salary payable after 24 weeks of disability
- LTD benefits continue after 24 months only if you are deemed totally disabled by the insurer
- The benefit is taxable when received
- Employee coverage up to age 65

Pension Plan

Local Authorities Pension Plan (LAPP)

The Local Authorities Pension Plan is a defined benefit pension plan designed for employees of the provincial health system, school boards, colleges and technical institutes in Alberta.

- Participation in the plan is mandatory for regular full-time or regular part-time employees working 30 or more hours per week
- Participation in the plan is optional as a regular part-time employee working 14 to 29 hours per week and a temporary employee working 30 hours or more with a pre-determined end date of one year or greater
- Employee and employer paid premiums
- Contribution rates are reviewed each year and are set by the LAPP Board
- Additional LAPP information is available on the LAPP web site at www.lapp.ca

Additional optional benefits

Group RRSP (RBC)

- Annual contributions available using employer-funded flex credits
- Payroll contributions available for immediate tax savings (100% employee paid)
- Invest in a choice of funds or GIC terms
- No employer matching contributions
- If you wish to contribute to an RRSP, you must open an account through RBC at 1-888-769-2566

Supplementary Health

Benefit Provider: Alberta Blue Cross Coverage is mandatory unless you are covered under another group plan. Employees may view coverage levels, exclusions and premium rates in detail on [CompassionNET](#).



Supplementary Health (continued)

- 75% employer paid premiums
- Benefit year: April 1 to March 31
- Reasonable and customary charges, no deductible
- Premiums paid via payroll deduction

Prescription drugs

- 80%
- Covers prescription drugs listed on the *Alberta Blue Cross Drug Benefit List (ABCDBL)* that are dispensed by a pharmacist
- Vaccines

Hospital services

- Hospital charges for a private or semi-private room in a public, general active treatment hospital in Canada are subject to a usual and customary reasonable daily maximum as determined by Alberta Blue Cross
- Treatment received in an auxiliary hospital up to a maximum of \$360 per insured each benefit year

Other health services

- Optical exams—\$40 every 24 months for plan members between 19 and 64 years of age
- Ambulance
- Accidental dental
- Blood testing monitors
- Braces
- Home nursing care
- Foot orthotics
- Hearing aids
- Ileostomy, colostomy supplies and urinary catheters
- Diabetic Supplies (*some exclusions apply such as Freestyle)
- Mastectomy prosthesis
- Orthopaedic shoes
- Oxygen and administration
- Paramedical practitioners including chiroprapist, chiropractor, massage therapist, osteopath, physiotherapist, podiatrist and speech language pathologist
- Prosthetic appliances
- Psychology services

Out of province/country emergency health

- Coverage is optional
- 100% employee paid premiums
- Coverage is available if you are enrolled in Supplementary Health
- Maximum benefit \$5,000,000 per covered person per incident
- Covers 100% of reasonable and customary charges for most emergency expenses including physician, diagnostic, prescription, paramedical, dental, hospital services, medical aids, medical evacuation, incidental expenses, repatriation and travel assistance for the insured and covered dependants
- 90-day travel maximum per trip
- Out of Province Emergency Travel Benefits terminate on the last day of the month in which the employee retires, terminates employment or reaches 70 years of age

Dental

Benefit Provider: [Alberta Blue Cross](#)

Coverage is mandatory unless you are covered under another group plan. Employees may view coverage levels, exclusions and premium rates in detail on [CompassionNET](#).

Dental (continued)

- 75% employer paid premiums
- Benefit year: April 1 to March 31
- Current *Alberta Blue Cross Dental Schedule*
- Premiums are paid via payroll deduction

Basic dental services

- 80%, no maximum
- Recall exams—once every six months per plan member
- Bitewing X-rays and polishing—once every six months per plan member
- Fluoride treatments once every six months per plan member
- Preventative and restorative services, oral surgery, endodontics—scaling and root planning—10 units per person in a 12-month period

Extensive dental services

- 50%, maximum \$3,000 per person per benefit year
- Crowns, bridges, veneers, posts and cores, bridge repairs
- Complete and partial dentures and denture repairs

Orthodontic services

- 50%, maximum of \$3,000 per person per lifetime
- Orthodontic examination, cephalograms, facial and intraoral photographs, diagnostic models, consultation and case presentation
- Habit-breaking appliances

Coordination of Benefits

- Coordination allows employees with more than one group benefit plan to maximize their coverage.
- Upon initial benefit eligibility through Covenant Health you will make your decision to coordinate your plans, or to opt out of one of the group plans.
- If you have opted out of Covenant Health's group coverage due to other group coverage, your decision will remain in effect as long as you are in a benefits eligible position with the same bargaining unit.
- However, if you experience a loss of coverage from the alternate group plan, you must opt in (you will be asked to provide proof of loss of coverage)

Flexible Spending Account (FSA)

This 100% employer-paid plan provides you with flex credits annually to allocate among your choice of Health Spending, Personal Spending, Registered Retirement Savings Plan (RRSP) Group number: 2546 and Tax Free Savings Account (TFSA) Group number: 18271. The benefit year is January 1 to December 31. Every January 1, eligible employees are provided with new credits, which are deposited into their FSA per the collective agreement. Prorated credits, based on the number of full months remaining in the calendar year, will be applied for new employees commencing employment after January 1.



General benefit plan provisions

Waiting period (for regular employees)

- Health, Dental and Flexible Spending Account coverage commences on the first of the month following the date of hire or on becoming benefit eligible.
- Life and Disability coverage becomes effective three months from the date of hire or on becoming benefit eligible.

Enrolment

You have 31 days from your benefits eligibility date to enroll in the benefit plan. If you have eligible dependants you must be enrolled in family Supplementary Health & Dental coverage unless you opted out due to alternate group coverage. If you do not enroll, your coverage will automatically default to the following:

- Supplementary Health and Dental
- Health Spending Account
- Basic Life, and Basic Accidental Death & Dismemberment
- Short Term and Long Term Disability

Eligibility

- Regular full-time or part-time employees regularly scheduled to work at least 15 hours per week on average are eligible to join the plan.
- Temporary employees regularly scheduled to work at least 15 hours per week on average for a minimum of six months are eligible for most benefits.
- Temporary employees are not eligible for the Flexible Spending Account
- You must normally reside in Canada

Termination of Benefits while on Disability/ WCB

Your employee benefit plans continues for a period not exceeding 30 months from the original date of disability/ injury or age 65; whichever is first.

Costs

- Employees may view employer and employee paid premiums on [CompassionNET](#).

Eligible dependants

Eligible dependants are your spouse and dependant children living in Canada.

Spouse: To qualify under the benefit plan, a spouse is a person who is legally married to the employee, or who is not legally married to the employee but has continuously resided with the employee for not less than 12 consecutive months and is represented as common-law.

Dependant children: Your natural, adopted or stepchild; or a natural, adopted or stepchild of your spouse who is in your care and control; or your legally appointed ward.

The child must be unmarried; under age 21, not working more than 30 hours per week; less than 21; or, if 21 but less than 25, they must be attending an accredited educational institution, college or university on a full-time basis (a minimum of three courses or 15 hours per week); or over age 21 but dependent on you due to a physical or mental disability and became totally disabled prior to attaining age 21, and who have been continuously disabled since that time. Unmarried and unemployed children who became totally disabled while attending an accredited education institution, college or university on a full-time basis prior to their

attaining age 25 and have been continuously so disabled since that time shall also qualify as a dependant child.

Changes and life events

Following initial enrolment, if you wish to enroll in optional life or change your coverage under Supplementary Health or Dental, certain conditions or restrictions may apply. Life events that enable changes to Supplementary Health and Dental coverage may include the following:

- Your spouse lost his or her coverage; addition or removal of a legal or common-law spouse; death of a spouse or dependant or addition of a child.
- Your application for benefits changes is required within 31 days of a new life event.
- If eligible dependants are not added within 31 days of eligibility (or status change), 'late applicant' process is applied, where 'Family' coverage and premiums would be retro-active to one year.

Survivor Benefit

In the event of a plan member's death, Alberta Blue Cross will continue Extended Health Benefits and Dental Benefits for the surviving dependants commencing the first day of the month following death and will be effective for a period not exceeding 90 days.



CONTACT

Health, Dental or Flexible Spending Accounts

Alberta Blue Cross Customer Services

1-800-661-6995 (toll free)

Monday to Friday, 8:30 a.m. to 5 p.m.

www.ab.bluecross.ca

All benefits

The HR Contact Centre

1-877-511-4455 or the HR Contact Centre portal in your ePeople profile or via compassionNET link:

<https://www.compassionnet.ca/Page2040.aspx>

Group RRSP

RBC

1-888-769-2566 (toll free)

Local Authorities Pension Plan (LAPP)

Phone: 1-877-649-5277

www.lapp.ca

