



Covenant Health

Out of Scope Employees (OOS or Exempt)

Make the most of your benefits

This is a quick reference guide to the Covenant Health Benefit Plan for Exempt/Out of Scope Employees. A detailed description of the benefit plans and additional information can be accessed by employees at [My Benefits | CompassionNET | Covenant Health](#).

The Covenant Health Exempt/Out of Scope Benefit Plan 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 \$750,000 for Basic Life. Your Life coverage provides a benefit for your beneficiary if you die while covered. Your dependant's Life coverage provides a benefit if one of your dependants die while covered.

Premiums paid via payroll deduction.

Basic Life Insurance

- Coverage is mandatory
- Basic life is 2X your annual basic salary
- 100% 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 \$500,000
- (both employee and spouse)
- Employee and spousal coverage up to age 70

Voluntary Dependant Life for Children

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

Accidental Death and Dismemberment (AD&D) Insurance

Benefit Provider: Industrial Alliance, Special Markets Solutions

Your AD&D benefit is 2X your basic annual earnings up to a maximum of \$750,000. Premiums paid via payroll deduction.

Basic AD&D Insurance

- Coverage is mandatory
- Basic AD&D is 2X your annual basic salary
- 100% employer paid premiums
- 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
- 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 paid via payroll deduction.

Disability coverage(continued)

Bridging Benefit

- 66 2/3% of your regular salary bridges sick time to a maximum of 24 weeks from initial date of disability
- 100% employer paid income replacement benefit
- No premiums

Long Term Disability (LTD)

- Coverage is mandatory
- 100% employee paid premiums
- Proof of claim must be submitted for approval
- Once approved, LTD benefit is up to 72% of your net salary payable by the insurer
- LTD benefits continue after 24 months only if you are deemed totally disabled by the insurer
- The benefit is non-taxable when received
- coverage up to age 65

Basic Critical Illness

- Coverage is mandatory
- 100% employer paid premiums
- \$25,000 employee coverage(no medical evident required)
- Employee coverage up to age 65

Optional Critical Illness coverage (employee and spouse)

- Coverage is optional
- 100% employee paid premiums
- Sold in units of \$10,000 to a maximum of \$250,000
- Health statement must be completed and approved for amounts higher than \$30,000
- Employee and spousal 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 or a temporary employee working 30 hours or more with a pre-determined end date of one year or greater
- Employee and employer paid contributions
- 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

Participation is optional.

Group RRSP (RBC)

- 100% employee paid
- Payroll contributions available for immediate tax savings
- Invest in a choice of funds or GIC terms
- If you wish to contribute to an RRSP, you must open an account (group # 2546) 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](#). Premiums paid via payroll deductions

- 100% employer paid premiums
- Benefit year: April 1 to March 31
- Reasonable and customary charges, no deductible

Prescription drugs

- 80% Generic pricing
- 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

- Vision coverage—\$250 per plan member every 24 months (12 months if dependant child)
- Optical exams—\$100 every 24 months for plan members between 19 and 64 years of age
- Ground and air ambulance
- Accidental dental
- Blood testing monitors and diabetic equipment & supplies
- Cervical collars, traction kits, splints, trusses, crutches, casts, and canes
- Permanent braces and repairs
- Home nursing care
- Foot orthotics and Orthopedic shoes
- mastectomy prosthesis and supporting brassier
- Surgical stockings
- Respiratory equipment and supplies
- Hearing aids
- Ileostomy, colostomy supplies, and urinary catheters
- Ancillary Services
- Paramedical practitioners including chiroprapist, chiropractor, massage therapist, osteopath, physiotherapist, podiatrist and speech language pathologist
- Prosthetic appliances
- Wigs and hairpieces
- Psychologist, master social worker, and addictions counselor
- Medical durable equipment

Out of province/country emergency health

- 100% employer 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](#). Premiums Paid via payroll deductions.

- 100% employer paid premiums
- Benefit year: April 1 to March 31
- Current *Alberta Blue Cross Dental Schedule*

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, denture services
- Periodontics—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
- Complete and partial dentures, denture adjustments and major 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 employee group / 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).

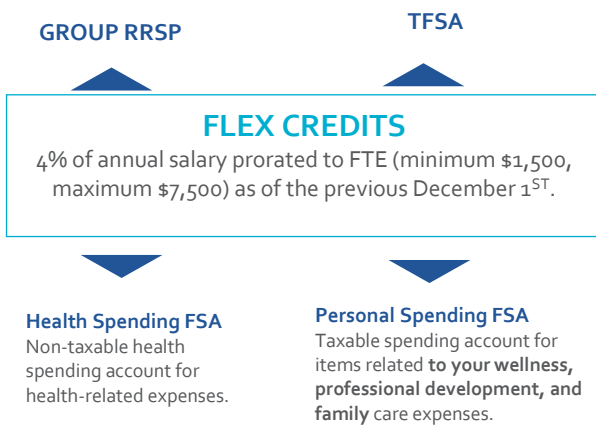
Flexible Spending Account (FSA)

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 Terms and Conditions. Prorated credits, based on the number of full months remaining in the calendar year, will be applied for new employees after January 1.



FSA – Continued



General benefit plan provisions

Waiting Period

- Health, Dental and Flexible Spending Account coverage commences on the first day of the month following 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
- Basic Critical Illness
- 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.
- Regular and temporary part-time employees working less than 15 hours per week are eligible to participate in Health/Dental/Vision/Travel benefits only.
- You must normally reside in Canada

Termination of Benefits while on Disability/WCB

Your employee benefit plans continue 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 an optional plan 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:

- 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)
www.ab.bluecross.ca

All benefits

The HR Contact Centre

1-877-511-4455 or the HR Contact Centre portal in your e-People 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

