

## Benefits Synopsis - PSSP Bargaining Unit

### Extended Health Benefits (EHB) and Dental Benefits Life Insurance and Accidental Death and Dismemberment Insurance (AD&D) Long Term Disability Insurance (LTD)

The following is a brief summary of the benefits available to members of the Professional Student Services Personnel Bargaining Unit of the Limestone District School Board according to Appendix B of the Collective Agreement. You may call Teresa Marrello at the District Office (546.6985) or Kim Wilson at the Board Office (544.6925 x264) for questions about your benefits.

### Extended Health Benefits (EHB) and Dental Benefits

Extended Health Benefits and Dental Benefits are provided by Manulife Financial. For questions about your EHB and Dental Benefits, please refer to the Summary of Health Benefits. It should be available in your staff room. You can also call Manulife at **1.800.COVERME**. You will need your **group number (2567H)** and your identification number. *There are several exclusions for which Manulife will NOT pay. Please check the Summary of Health Benefits or call Manulife to be sure.* You may sign up to view your benefits online at [www.manulife.ca/groupbenefits/securereserve](http://www.manulife.ca/groupbenefits/securereserve).

<b>General</b>	Premiums: Board pays 100% for full-time Members Deductible: Single - \$10, Family - \$20 per benefit year 100% reimbursement after deductible Unlimited lifetime maximum
<b>Prescription Drugs</b>	Formulary Two - no vitamins (unless injected), no smoking cessation aids, no general public products Birth Control and Maintenance Drugs, maximum drug dispensing fee of \$6.00 Subject to deductible
<b>Hospital Services</b>	Private room (covered only if you have Semi-Private + EHB) No deductible, Unlimited
<b>Private Nursing</b>	90 eight hour shifts per calendar year - prior approval needed
<b>Private Hospital</b>	\$10 / day, lifetime maximum of 120 days
<b>Ambulance Services</b>	Licensed ground and air ambulance services
<b>Accidental Dental</b>	Necessitated by a direct accidental blow to the mouth Treatment must begin within 90 days following the date of the accident and must be completed within one year.
<b>Vision Care</b>	Prescription eyeglasses, contact lenses, and repairs and laser eye surgery \$300 / 24 months, no deductible

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<b>Hearing Aids</b>	Prescription hearing aids and repairs \$500 / 60 months, no deductible
<b>Medical Equipment</b>	Hospital bed, crutches, cane, walker, oxygen set, aerochambers, apnea monitors (infants only), respirators, standard-type wheelchairs and wheelchair repairs
<b>Medical Services &amp; Supplies</b>	Bandages, surgical dressings, blood transfusions, plasma, radium and Radioactive isotope treatments
<b>Prosthetic Appliances</b>	Many appliances covered + repairs Orthopaedic shoes Orthotics—up to two pairs per calendar year/\$375 per pair
<b>Paramedical Services</b>	
Physiotherapist	maximum per treatment is equal to the Provincial Health Plan allowance
Clinical Psychologist	\$35 for initial visit, \$20 for subsequent visits Maximum \$200 / benefit year
Masseur	\$7 / treatment, maximum 12 treatments / benefit year
Speech Pathologist	Maximum \$200 / benefit year
<b>Dental Benefits</b>	
<b>General</b>	Dental Plan 9 No deductible, unlimited lifetime maximum (excluding Rider 3) 100% reimbursement after deductible (excluding Riders 2, 3, 4) Fee guide - current Ontario Dental Association Fee Guide  <i>If a particular treatment is expected to cost over \$500, then a written estimate should be obtained from the attending dentist outlining the procedures and charges. This should be submitted to Manulife for approval prior to the commencement of the treatment.</i>
<b>Dental Plan 9</b>	Every 6 months for children under 18 and every 9 months for adults Recall, examinations, consultations, diagnostic services (x-rays, bitewing films), tests and laboratory exams, preventative services (polishing, fluoride treatment), restorative services, endodontic services (root canals), periodontal services (treatment of gum tissue), denture repairs, surgical services (extractions)
<b>Riders 2, 3, and 4 Rider 2</b>	50% co-payment Prosthetic services - removable (dentures) - once every 5

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years

**Rider 3**

Lifetime maximum - \$1500 / person  
Orthodontic services (casts, space maintainers)

**Rider 4**

Major restorative services (caps, crowns)  
Prosthodontic services - fixed (retainers) - once every 5 years

**Life Insurance and Accidental Death and Dismemberment Insurance (AD&D)**

Board pays 100% of the total premium of the “3 x annual salary” option.

**Optional Life Insurance**

In addition to the basic life insurance, optional life insurance may be purchased in blocks of \$25 000 to a maximum of \$100 000. The employee pays the premiums.

**Dependent Life Insurance**

Coverage is equal to \$10 000 for your spouse and \$5000 for each eligible child. The employee pays the premiums.

**Overage Dependents**

**Dependent children** over 21, but under 25 years of age who are enrolled full-time in an educational institution, can be covered by your Benefits if you complete an **Overage Verification Form**. Forms are available on the Board Forms Hub. The term should be from September 1 to August 31. Forms *must be completed every school year* and returned to Kim Wilson at the Board Office.

**Changing Benefits Coverage**

To change benefits for you or your family, you must complete a **Health Benefit Change Request Form**, found at your school/workplace office, and submit it to Kim Wilson at the Board Office.

The only times in which members can join the plan without a medical certificate are within 31 days after:

- < appointment with the Board (part-time or full-time)
- < becoming a full-time member
- < leaving another plan, e.g. partner’s plan
- < a lifestyle change (e.g. marriage, divorce, separation) which alters your access to health/dental benefits
- < the birth/adoption of a child to enrol that child

**Spouse of a Deceased Member**

The spouse of a deceased member may continue to retain benefits in the PSSP group benefit plan provided he/she pays the full premium cost to maintain such benefits until the earliest of the following:

- The date the Group Contract terminates
  - The end of the 3 month period following the date of the employee’s death
  - The end of the month in which the spouse remarries
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- The date a dependent ceases to qualify as an eligible dependent, or
- The date a dependent becomes eligible for coverage under any other Group Policy

## Long Term Disability Insurance (LTD)

Long term disability insurance is provided through the Ontario Teachers' Insurance Plan (OTIP) and underwritten by Manulife Financial. Our plan and group number is L7027-931. Information about your LTD coverage can be found online at [www.otip.com](http://www.otip.com). The "Schedule of Benefits" is now only available online. To access your group information on this password protected site, click the link to Online **Benefits** and enter your login and password:

Login: **L7027-931-ai**

Password: **1267678**

<b>General</b>	Premiums paid 100% by employee - 2.02% of salary (includes PST) Mandatory for members hired on a full-time basis after September 1, 1998.
<b>Benefits</b>	60% of monthly earnings, non-taxable benefit Pension contributions are waived for disability payments starting on or after September 1, 2001 (TPP) OMERS--must apply for a pension contribution waiver
<b>Waiting Period</b>	60 working days
<b>Termination of Benefits</b>	Earliest of: age 65 or entitlement to a 66% unreduced pension
<b>Recurrence Waiting Period</b>	20 consecutive working days
<b>All Source Maximum</b>	100%