

YOUR BENEFITS PROGRAM AT-A-GLANCE

This summary provides an overview of the main provisions of the **group insurance program** for associated employees who are considered full & part-time 50% or greater. This program is governed by the official documents, such as the insurance contracts, as well as by applicable legislation. In the event of any inconsistency between this summary and the official documents, the latter will prevail. **It is imperative to provide the appropriate application and documentation within 60 days of your hire date to ensure coverage is in place.**

HEALTH AND TRAVEL

***Provincial health coverage is required.**

Cost sharing

Reimbursement*

- Mandatory Generic Substitution
- Tier 1
- Tier 2
- Limitations
- Nicotine patches
- Drug card
- Hospital care
- Vision care
 - Eye examination, glasses and contacts
- Enhanced mental health services
 - Psychologist, social worker, counselling therapist, psychotherapist, psychoeducator, internet cognitive behavioural therapy (iCBT)
- Paramedical services
 - Chiropractor, osteopath, podiatrist/chiroprapist, and physiotherapist
- Private duty nursing
- Medical supplies and prostheses
- Glucose monitoring systems
- Other eligible expenses
 - Accidental dental
 - Ambulance services
 - Hearing aids
 - Orthopedic shoes
- Emergency travel insurance
- Termination of coverage

Health care and travel

- 60% paid by Associated Employer
- 40% paid by you

Rx Choices Drug Formulary
 100% after you pay dispensing fee
 60%

Lowest cost interchangeable drug
 50% with a \$200 maximum per lifetime

Pay-direct

100% Semi-private

80%
 \$100 maximum per insured person every
 24 months
 (12 months for children under age 19)

80%
 Combined maximum
 of \$1500 per year

80%
 Combined maximum
 of \$500 per year

80% of first \$10,000, 50% thereafter
 \$13,000 maximum per year

80%

100%
 \$4,000 per year

80%
 Treatment within 6 months of accident
 To nearest hospital
 \$200 every 7 years
 \$160 per year

100%; First 180 days of trip

Upon termination of employment

* Expenses are reimbursed based on Medavie Blue Cross' assessment of reasonable and customary fees.

LIFE INSURANCE

	Basic	Optional
Cost sharing	<ul style="list-style-type: none"> 100% paid by Associated Employer 	<ul style="list-style-type: none"> 100% paid by you
Insured persons	<ul style="list-style-type: none"> You only 	<ul style="list-style-type: none"> You and your eligible dependents
Coverage	<ul style="list-style-type: none"> 3 x salary Maximum: \$300,000 	<p>You:</p> <ul style="list-style-type: none"> In units of \$10,000 Maximum: \$200,000 <p>Spouse:</p> <ul style="list-style-type: none"> In units of \$10,000 Maximum: \$200,000 <p>Dependent children:</p> <ul style="list-style-type: none"> \$10,000 per child
Maximum coverage without evidence of insurability	<ul style="list-style-type: none"> \$300,000 	<ul style="list-style-type: none"> \$50,000 (during initial enrolment only)
Coverage reduction	<ul style="list-style-type: none"> \$20,000 at each July 1 from ages 61 to 65 \$30,000 at each July 1 from ages 66 to 69 	<ul style="list-style-type: none"> None
Termination of coverage	<ul style="list-style-type: none"> Upon termination of employment, or age 70 	<ul style="list-style-type: none"> Upon termination of employment, or age 70

ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE (AD&D)

	Basic	Voluntary
Cost sharing	<ul style="list-style-type: none"> 100% paid by Associated Employer 	<ul style="list-style-type: none"> 100% paid by you
Insured persons	<ul style="list-style-type: none"> You only 	<ul style="list-style-type: none"> You and your family
Coverage	<ul style="list-style-type: none"> 3 x salary Maximum: \$300,000 	<p>You:</p> <ul style="list-style-type: none"> In units of \$10,000 Maximum: \$300,000 <p>Spouse:</p> <ul style="list-style-type: none"> 50% of your coverage <p>Dependent children:</p> <ul style="list-style-type: none"> 10% of your coverage per child
Evidence of insurability	<ul style="list-style-type: none"> Not required 	<ul style="list-style-type: none"> Not required
Coverage reduction	<ul style="list-style-type: none"> \$20,000 at each July 1 from ages 61 to 65 \$30,000 at each July 1 from ages 66 to 69 	<ul style="list-style-type: none"> None
Termination of coverage	<ul style="list-style-type: none"> Upon termination of employment, or age 70 	<ul style="list-style-type: none"> Upon termination of employment, or age 70

If you die as a result of an accident, your beneficiary receives 100% of the coverage. In case of an accidental injury, the amount paid to you is based on the nature of the injury.

DENTAL - VOLUNTARY

***Provincial health coverage is required.**

	Dental care
Cost sharing	<ul style="list-style-type: none"> 100% paid by you
Reimbursement	
<ul style="list-style-type: none"> Basic care <ul style="list-style-type: none"> Diagnostic and preventative care (e.g., cleaning and scaling of teeth) Periodontal and endodontic care (e.g., gum treatments, root canal therapy, fillings) 	100%
<ul style="list-style-type: none"> Major care (e.g., removable dentures, crowns and bridges) 	70% \$1,000 maximum per year
<ul style="list-style-type: none"> Recall examination 	Once per year
<ul style="list-style-type: none"> Dental fee guide* 	Current year
<ul style="list-style-type: none"> Termination of coverage 	Upon termination of employment

* The dental fee guide is published each year by the dental association of your province and is used by your dentist as a reference for setting the costs for dental treatments.

DISABILITY - VOLUNTARY

	Long-term disability
Cost sharing	<ul style="list-style-type: none"> 100% paid by you
Benefits paid	<ul style="list-style-type: none"> 60% of your monthly salary
Maximum payment	<ul style="list-style-type: none"> \$6,000 per month
Evidence of insurability	<ul style="list-style-type: none"> Required if applying 31 days after hire date
Waiting period	<ul style="list-style-type: none"> Associated - 90 calendar days
Duration of benefits	<ul style="list-style-type: none"> Until June 30 following when you reach age 65, recovery, retirement or death, whichever comes first
Benefits taxable	<ul style="list-style-type: none"> Payments from the plan are non-taxable
Indexation	<ul style="list-style-type: none"> CPI* or 4% per year, whichever is less
Definition of disability	<ul style="list-style-type: none"> During first 24 months of disability: inability to perform the essential duties of your own occupation After 24 months of disability: inability to perform any occupation for which you are or may become reasonably qualified by education, training or experience
Termination of coverage	<ul style="list-style-type: none"> Upon termination of employment, or as of July 1 on or following when you reach age 65

* CPI: Consumer Price Index

EMPLOYEES AND FAMILY ASSISTANCE PROGRAM (EFAP)

How it works

The EFAP is a Dalhousie University-paid confidential service available to you and your dependents as part of your benefits program. Provided through Morneau Shepell, the EFAP offers support for a full range of personal and family issues or life events. Services include expert counseling and crisis support services, access to research and education, referrals for child and elder care, and legal and financial assistance. There is no cost to access the EFAP.

ELIGIBILITY

You are eligible for benefits provided you are an associated full-time or part-time employee (50% or greater) who is employed for at least eight months. Your spouse and children are eligible for coverage provided they meet the definitions of spouse and children as follows:

Spouse

The person who:

- is legally married to you,
- has been living with you in a marital relationship for at least one year,
- is a resident of Canada and is eligible for benefits under the provincial plan.

Children

Your unmarried natural or adopted children, or those of your spouse, who are wholly dependent on you or your spouse, for financial support, and are:

- under age 21,
- age 21 or older but under age 25, if they are full-time students at an educational institution,
- handicapped and incapable of financial self-support regardless of age, provided their disability began before the above age limits and while they were covered under the program,
- is a resident of Canada and is eligible for benefits under the provincial plan.

WHERE TO GET ANSWERS

People and Culture

For questions about your benefits, including adding or removing dependents

- Email: benefits@dal.ca
- Phone: 902-494-1122
- 8:30 a.m. – 4:30 p.m. (Monday to Friday)
- Website: <https://dal.sharepoint.com/sites/hr/SitePages/employee-benefits.aspx>

Medavie Blue Cross

For questions about your health and dental claims and coverage

- Phone: 1-800-667-4511
- Member website: <https://www.medaviebc.ca/en/>