

Benefits At A Glance



De Havilland Aircraft of Canada
Class KU3: Union Local 673 Employees

Benefits Plan Eligibility

New Employees: The plan is mandatory participation; your coverage will begin the 1st of the month following 6 months of full-time services.

All eligible employees must reside in Canada and be considered Permanent Full-Time (non-seasonal) Employees, working a minimum of 37.5 hours per week. Your Dependents are eligible for coverage on the date you become eligible or the date you gain an eligible Dependent, whichever is later. Dependents include:

- Spouse
- Common-law spouse after 12 months of living together
- Children up to age 21 or 25 if in full-time attendance at post-secondary

Your Benefits Package Includes:

- **Basic Life / Accidental Death & Dismemberment Insurance** (*Optional Life Coverage available for Employee, Spouse & Child*)
- **Short-Term Disability**
- **Long-Term Disability**
- **Extended Health Care**
- **Dental Care**
- **Employee & Family Assistance Program**

Note: All benefit premiums, excluding Optional Life Benefits (if elected), are 100% Employer paid.

Group Life and Accidental Death & Dismemberment

Manulife	COVERAGE
Group Life Benefit Amount	\$85,000
Group AD&D Benefit Amount	\$37,500
Termination	Retirement

Optional Life Insurance (Employee & Spouse)

Manulife	COVERAGE
Schedule	Available in increments of \$10,000 for employee/spouse. Proof of health required for carrier approval.
Maximum	\$400,000
Termination	Employee: Employee's age 70 or earlier retirement. Spousal Coverage: Employee's or Spouse's Age 70 or employee's retirement, whichever is earlier

Optional Life Insurance (Child)

Manulife	COVERAGE
Schedule	Available in increments of \$10,000 Proof of health not required.
Maximum	\$50,000
Termination	The earlier of Employee's Age 70, retirement or Child's Age 21

Short-Term Disability Coverage

Manulife	COVERAGE
Benefit Amount	\$850 per week
Benefit Tax Status	Taxable as the employer pays premiums.
Waiting Period for Benefits	7 days for Illness / 0 days for Accident / 0 days Hospitalization
Maximum Benefit Period	Employees under age 65 – 52 weeks Employees aged 65 and up – 26 weeks following 65 th birthday
Termination	Retirement

Long-Term Disability Coverage

Manulife	COVERAGE
Benefit Amount	\$1,800 per month
Waiting Period	52 weeks
Maximum Benefit Period	The earlier of length of seniority less 12 months or the end of the month Employee reaches Age 65
Definition of Disability	Two Year Own Occupation; Any Occupation thereafter
Benefit Tax Status	Taxable as the employer pays 100% of the premiums
Termination	Age 65 less waiting period, or earlier retirement

Extended Health Care (EHC)

EHC claims are subject to insurance carrier's Reasonable & Customary (R&C) limits.

Manulife Policy# 37843

COVERAGE

Deductible	\$35 – Single / \$60 – Family (not applicable to hospital, drugs, vision and paramedical practitioners except physiotherapy/psychology/psychotherapy, medical services and supplies – physician fees, cancer antigen (CA125), prostate-specific antigen tests, ambulance, and hearing aids, and Out of Country emergency medical expenses)
Overall Plan Maximum	\$35,000 Lifetime maximum for medical expenses excluding hospital, drugs, vision and paramedical practitioners (except physiotherapy/psychology/psychotherapy), and medical services and supplies – physician fees, cancer antigen (CA125), prostate-specific antigen tests, ambulance, and hearing aids.

Prescription Drugs (Manulife's Managed Formulary) – Pay Direct Drug (PDD) card

Reimbursement defaults to mandatory generic pricing (lowest cost alternative drug). If a brand name drug is prescribed and there is a generic equivalent available, the plan will only reimburse the lowest cost equivalent, which is typically a "generic" drug. You have the option to purchase the brand name drug, but you will be responsible for paying the difference in price. (Except for where adverse drug reactions occur. Manulife review and approval required.)

- Reimbursement:** 100%
- Drug Deductible:** \$5 per prescription
- Dispensing Fee Maximum:** \$9 per prescription
- Drug Maximum:** Sexual Dysfunction - \$1,000 per calendar year, Over-the-counter Life Sustaining Drugs - \$300 per calendar year, All other eligible drug expenses: Unlimited
- Coordination of Benefits (insured members and spouses over age 65):** Provincial plan is first payor

Included: Drugs that legally require a prescription including oral contraceptives, intrauterine devices and diaphragms; preventative vaccines and medicines (oral or injected); and standard syringes, needles and diagnostic aids, required for the treatment of diabetes.
Excluded: Fertility drugs, anti-smoking drugs, administration of injectable drugs.

Paramedical Practitioners

- Physiotherapist 80% - \$160 initial visit, \$100 subsequent visit up to maximum 24 visits per cal year
 - Psychologist/Psychotherapist* 80% - combined maximum of 24 visits per cal year
 - Registered Massage* 100% - \$500 per cal year
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- Chiropractor
 - Naturopath
 - Homeopath
 - Speech Therapist 100% - \$650 combined maximum per calendar year for practitioners listed.
 - Osteopath
 - Podiatrist
 - Acupuncture

*Doctor's referral required for physiotherapy, psychology and registered massage.

Hospital 100% coverage for Semi-private Room – Maximum of \$250 per day

Medical Services & Supplies

- Stock Item Ortho Shoes
 - Custom-Made Shoes 80% - \$400 combined maximum every 18 months (prescription required)
 - Orthotic Foot Appliance
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- Hearing Aids \$400 maximum every 24 month (excluding batteries).

Vision Care

- Eye Exams One eye exam up to \$75 maximum every 12 months (under age 18), every 24 months (over age 18)
 - Glasses, Contact Lenses \$300 Contacts
\$300 Single Lenses
\$300 Bifocals
\$315 Trifocals
- Coverage per 12 months (under age 14), every 24 months (over age 14)
- Laser Vision Correction \$300 lifetime maximum
 - Visual Training \$200 lifetime maximum

Emergency Out of Province / Country 100% coverage for 180-day trip duration; included in the \$35,000 Lifetime maximum. 90-day stability before departure

Termination

Death

The information provided herein is intended to provide only a summary of the principal benefits provided by your employer. The group policy is the governing document. For a detailed description of benefits, please refer to your insurance policy. If there are variations between the information provided here and the provisions of the policy, the policy will prevail.

Dental Care

Manulife	COVERAGE
Basic Services	80% - Preventative Scaling 50% - Sealants only 100% - All other Basic services
Major Services	50%
Orthodontic	50% (Child dependents under age 19)
Maximums:	
Basic & Major Combined:	\$2,500 per calendar year
Orthodontics:	\$2,500 lifetime
Fee Guide	Current Provincial
Recall Exam	Every 6 months
Fluoride Treatment	1 per 6 months
Scaling	8 units per calendar year
Termination	Retirement

Contact Details

HEALTH & DENTAL CLAIMS QUERIES

Manulife Customer Service Centre

- Coverage and Claims queries **1.800.268.6195** (8AM-8PM EST/ M-F)

Dehoney Administration Services

- Your support for *escalated* claims queries **TPA@dehoney.com**

CHANGES TO YOUR COVERAGE, SUCH AS DEPENDENT & BENEFICIARY UPDATES & ADDRESS CHANGES

benefits@dehavilland.com

For Disability (STD & LTD) claim submission, please contact your HR team for claim forms. Once completed, disability claim forms can be submitted directly to Manulife at: group_disability_claims@manulife.ca

Homewood Pathfinder

Employee & Family Assistance Program

Your Employee and Family Assistance Program (EFAP) is provided by Homewood Health.

There is no additional cost to plan members and you can access confidential support when you need it most, in a way that works best for you.

- Assistance with stress, divorce, family mental health, weight and smoking cessation.
- Depression Care and Trauma Care
- Lifestyle and Specialty Coaching



Assistance is available
24/7/365

at

1-866-644-0326 (ENGLISH)
1-866-361-4853 (FRENCH)