

## **TERMINATION OF COVERAGE**

Coverage under the Trustees and Former Trustees benefit category terminates at age 80, or when benefit payments cease.

## **MISCELLANEOUS**

**Change in Dependent Status:** Please notify the Fund office when you marry or have children (or if there is any change to who would qualify as a covered dependent).

**Common-Law Spouse:** To establish such a relationship your common-law spouse must have been residing with you for at least one year.

**Beneficiary:** A beneficiary should be named for all plans involving a death benefit. If you have not named a beneficiary, benefits will be paid to your Estate.

**Co-ordination of Benefits:** The Canadian Life & Health Insurance Association guidelines dictate that for families with coverage under more than one benefit plan, each spouse must submit their own claims first to their own benefit plan for reimbursement. If there is any amount left unpaid, the remainder may then be submitted to the spouse's benefit plan. Claims for dependent children must first be submitted to the benefit plan of the parent whose birthday occurs earliest in the year.

**PLEASE SEE YOUR BOOKLET FOR MORE DETAILED INFORMATION**

*For further information contact:*

**Funds Administrative Service Inc.**  
9TH FLOOR, 9707 - 110 STREET  
EDMONTON, ALBERTA  
T5K 3T4

PH: (780) 452-5161  
FAX: (780) 452-5388

1-800-770-2998

For more information on the benefit plan,  
or to download required forms, consult:  
**[www.fasadmin.com](http://www.fasadmin.com)**



**LOCAL 720 & LOCAL 725**

**IRONWORKERS HEALTH & WELFARE  
TRUST FUND OF WESTERN CANADA**

**BENEFITS-AT-A-GLANCE**

**Trustees and Former Trustees**

**@ June 1, 2009**

	Member Life	Member AD&D	Dependent Life	Supplementary Health Care	Vision Care	Dental Care	Temporary Disability	Member Assistance Program
Coverage Details	<p>\$100,000</p> <p>Death benefit paid to named Beneficiary</p> <p><u>Optional Life:</u> Member coverage is available in units of \$10,000, subject to a maximum benefit of \$100,000. Coverage available to dependents is 10% of member's benefit to a maximum of \$10,000 for your spouse and 5% of member's benefit to a maximum of \$5,000 for each of your dependent children. Contact your Union office or the Fund office to apply for additional coverage.</p>	<p>\$100,000</p> <p>Payable for accidental death and dismemberment, including loss/loss of use of limbs, sight, speech, hearing and for Quadriplegia, Paraplegia and Hemiplegia.</p>	<p>Spouse: \$40,000</p> <p>Child: \$10,000</p>	<p>100% coverage of eligible expenses to a lifetime maximum of \$100,000</p> <p>Prescription Drugs payable at 100% to generic (lower cost alternative) price:</p> <ul style="list-style-type: none"> <li>➤ Maximum dispensing fee \$4 per prescription</li> <li>➤ Limited list of over-the-counter drugs covered</li> <li>➤ Erectile dysfunction: \$60 per month to \$720 per calendar year</li> <li>➤ Smoking Cessation Aids \$1,000 per lifetime</li> </ul> <p>Private Hospital</p> <p>Hearing aids: \$4,000/5 years</p> <p>Prescribed custom fitted ear plugs: \$400/5 years</p> <p>Sleep Apnea treatment devices: \$2,500/5 years</p> <p>Acupuncturist, Christian Science Practitioner, Osteopath, Podiatrist \$35/visit to \$840/year</p> <p>Chiropractor \$45/visit to \$900/year</p> <p>Naturopath, Masseur, Speech Therapist \$60/visit to \$840/year</p> <p>Physiotherapist \$60/visit to \$900/year</p> <p>Psychologist \$100/hour to \$1,000/year</p> <p>Worldwide Travel Assistance – hospital and medical coverage on an <u>emergency</u> basis only, to a maximum of \$1,000,000 per lifetime</p>	<p>\$450 every 2 calendar years for adults and every calendar year for children</p> <p>Eye exams: \$70 per exam (outside of vision care maximum)</p> <p>Corrective Eye Surgery: \$2,000 per lifetime (vision care offset for 6 years)</p> <p>Safety Glasses: \$300 every 24 months (Members only)</p>	<p>90% for Minor procedures</p> <p>70% for Major procedures</p> <p>Dental implants covered under Major</p> <p>Combined Minor &amp; Major maximum of \$3,000/year</p> <p>Recall frequency: once every 6 months</p> <p>Fluoride coverage for children only under 16 years of age</p> <p>75% for Orthodontics to a lifetime maximum of \$6,000</p> <p>Coverage based on the Manulife Financial Dental Fee Guide</p>	<p><u>No coverage</u></p>	<p>Up to 12 hours of confidential professional assessment, referral or treatment provided for Members and their families.</p> <p>Coverage is provided through the Construction Employee &amp; Family Assistance Program (CEFAP) for bargaining unit Members. Effective August 1, 2009, coverage for voluntary (non CLR-A) Members provided through Solareh.</p>
Claiming	<p>Notify Fund office immediately.</p> <p>Submit within 36 months from date of death.</p>	<p>Notify Fund office immediately.</p> <p>Submit within 12 months of accident.</p>	<p>Notify Fund office immediately.</p> <p>Submit within 36 months.</p>	<p>Use ClaimSecure electronic drug card at pharmacies (immediate reimbursement); for other receipts use Medical Supplies Statement (<u>forms can be obtained from Union office or Fund office</u>). Submit within 18 months of purchase.</p>	<p>Use Vision Care Statement. Submit within 18 months of purchase.</p>	<p>Use Dental Care Statement. Submit claim within 18 months of date the services were incurred.</p>		<p>Contact Human Solutions at 1-800-663-1142. Contact Solareh at 1-800-668-0193.</p>

## WHO IS ELIGIBLE?

Trustees and their dependents are eligible for benefit coverage under the Trustees and Former Trustees benefit category.

Eligible dependents include:

- Spouse (legal or common-law)
- Unmarried children under age 21, or under age 25, if attending full-time school; or any children dependent on the Member due to physical or mental disability, regardless of age.

## WHEN AM I ELIGIBLE?

You and your eligible dependents will become insured for all coverages (except Life Insurance\*) on the first day of the second month following a period of not more than 3 consecutive calendar months during which you have accumulated at least 200 hours in your reserve account.

For each month worked, hours will be credited to your reserve account; 100 hours will be deducted for each month of coverage. You will continue to be covered as long as you have at least 100 hours in your account. You can credit a maximum of 600 hours to your reserve account.

A Trustee or Former Trustee has the opportunity of contributing the necessary amount of money so that he may continue to be insured on a monthly basis.

*\*Life & AD&D coverage of \$10,000 is provided from the 1<sup>st</sup> hour worked.*

## WHAT COVERAGE DO I HAVE IF DISABLED?

If, after 6 months of disability, you qualify for the Waiver of Premium under your Life Insurance benefit, your Life, Dependent Life and AD&D coverage will be continued by the Insurer until you reach age 65 or until you qualify for a pension benefit.