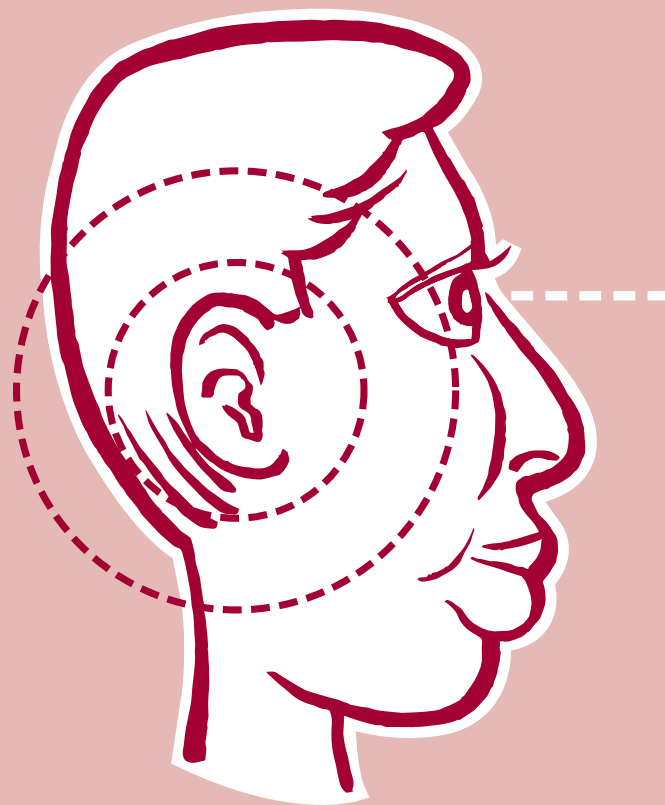


Vision and Hearing Plan



**URBAN POSTAL OPERATIONS
& RURAL AND SUBURBAN MAIL**

FEBRUARY 2022

This benefit booklet

This booklet is one of six booklets about benefits. In each one, we have summarized what's covered under a particular plan and explained how to use the benefit.

Here is a list of the booklets, along with who is eligible for the different plans.

- Extended Health Care Plan (Urban Postal Operations and Rural and Suburban Mail Carriers)
- Vision and Hearing Plan (Urban Postal Operations, and Rural and Suburban Mail Carriers)
- Dental Care Plan (Urban Postal Operations and Rural and Suburban Mail Carriers)
- CPC Basic Life Insurance Plan and Paid Death Benefit (Urban Postal Operations and Rural and Suburban Mail Carriers)
- Disability Insurance Plan (Urban Postal Operations and Rural and Suburban Mail Carriers)
- CUPW Life Insurance Plan (all members in good standing of CUPW)

For more information, talk to your steward or a local officer. Or contact Canada Life formerly called Great-West Life, or AccessHR

This booklet is not a legal document

This booklet summarizes the group benefits to which you are entitled. Its purpose is to provide information about your plan. It is not a legal document. In the event of a question or dispute, the terms and entitlements of plan document number 51392 will prevail.

Do you have suggestions?

Please let us know if you found these booklets useful. More important, be sure to let us know how you think they could be improved. Is there additional information that you think should be included, or a question you think a particular booklet should answer?

If you have any questions or suggestions on how to improve these publications, please send them to:

Benefits Booklets
Canadian Union of Postal Workers
377 Bank Street
Ottawa, ON
K2P 1Y3

Or, send an e-mail to: feedback@cupw-sttp.org. Please include the word "benefits" in the subject line.

Acknowledgements

Thanks to all the people at the CUPW national and regional offices and in the locals who read the drafts and made helpful suggestions.

Illustrations and graphic design by Tony Biddle

© Canadian Union of Postal Workers, 2022.

Contents



Introduction to this plan	1
What is it?	1
Who is eligible for coverage under this plan?	1
Enrolment	2
Other coverage issues	3
Where to get forms and what to do with them	4
What do I do if my family status changes?	5
What are the costs?	5



Overview of the plan	6
What expenses/services does this plan cover?	6
A very important four-year calendar	7
What's NOT covered?	7



Using this benefit	8
How do I use this benefit?	8
Tips for using this benefit	9
Some examples of using this benefit	9
Coordination of benefits	11
Common questions and problems	14
When will I get my cheque from Canada Life?	15
How long do I have to send in my claim form?	15
What do I do if I think Canada Life made a mistake?	15
What premiums do I pay if I am on Leave Without Pay?	16



The fine print _____ **17**



Dictionary _____ **18**



Contact information _____ **22**

Canadian Union of Postal Workers (CUPW) _____ **22**

Canada Post Corporation (CPC) _____ **23**

AccessHR _____ **23**

Canada Life _____ **24**



Introduction to this plan



What is it?

The Vision and Hearing Plan pays for eye examinations, prescription glasses, contact lenses, and hearing aids (with certain maximums). It's called "Vision and Hearing Plan (V/H) no. 51392" and the company that looks after it is Canada Life.

It's under Clause 30.05 in the urban postal workers' contract and under Clause 22.02 in the rural and suburban mail carriers' (RSMC) contract.



Who is eligible for coverage under this plan?

✓ Eligible	✗ NOT eligible
<ul style="list-style-type: none"> ▪ Urban operations bargaining unit: Regular employees are eligible from the date they were hired as regular employees, or become regular employees. A regular employee is a permanent employee, full-time or part-time. Temporary employees working in Group 3 (maintenance) positions are eligible. ▪ Rural and Suburban Mail Carriers: RSMCs, Route Holders and Permanent Relief, are eligible from the date they were hired, or the date they began working in an eligible position. 	<ul style="list-style-type: none"> ▪ Temporary employees, except for those working in Group 3 (maintenance) positions, are not eligible. ▪ RSMC helpers and On Call Relief are not eligible. Retirees are not eligible.



Introduction to this plan



If I am covered by this plan, who else is covered?

The Vision and Hearing Plan covers you, your partner and your children.

Your **spouse/partner** is defined as:

- the person to whom you are married and with whom you live with , or
- the person to whom you were (or are) legally married and whom you support, or
- the person with whom you have been living in a common-law relationship for at least one year



Note: The one-year requirement does not apply to common-law relationships where a child is born or adopted of the relationship.



Note: Same-sex couples are included under this definition of spouse/partner.

Children must be unmarried and financially dependent on you for support and (unless they are full-time students) under the age of 22. A child who is a full-time student is covered up to the age of 25. There is no age limit for offspring who are disabled and unable to support themselves, provided they were disabled and covered (as children under age 21, or as full-time students under age 25) when coverage would otherwise have ended.



Note: Children are covered under the Dental and Vision/Hearing Plans until they are age 22. The Extended Health Care Plan covers children up to the age of 21. Full-time students are covered up to age 25 on all three plans, with the exception of orthodontic coverage on the Dental Plan, which only continues until age 22.



Enrolment

Is this plan mandatory? Do I need to enroll (sign up)?

You are automatically enrolled in this plan, which is mandatory. You do not have to fill out an enrolment form. Eligible employees are automatically covered on the first day of the month following their date of hire, or on the first day of the month following the date on which they become eligible.

However, you do need to put your dependents on the plan and can do this by filling out a Dependent Information Form and sending it to Canada Life or go online on Canada Life's Groupnet web site.



Introduction to this plan

Canada Life administers the Extended Health Care, Vision/Hearing and Dental Plans. The company uses the same Dependent Information Form for all three plans, so you only need to fill out one form.



Other coverage issues

When does coverage start?

Coverage begins on the first of the month following the date you are hired as an eligible employee, or become eligible. For example, if you are hired on June 12, coverage begins on July 1.

When does coverage end?

Coverage for you, your partner and your children ends on the date in which the following occurs:

- when your employment ends
- when you retire
- when you are on strike
- when you die
- your last day at work, when you go on leave of absence without pay for more than 30 calendar days (except for maternity, parental, adoption, sick leave or compassionate care)



Note: Your partner or child may lose coverage earlier than you do if they are no longer eligible.

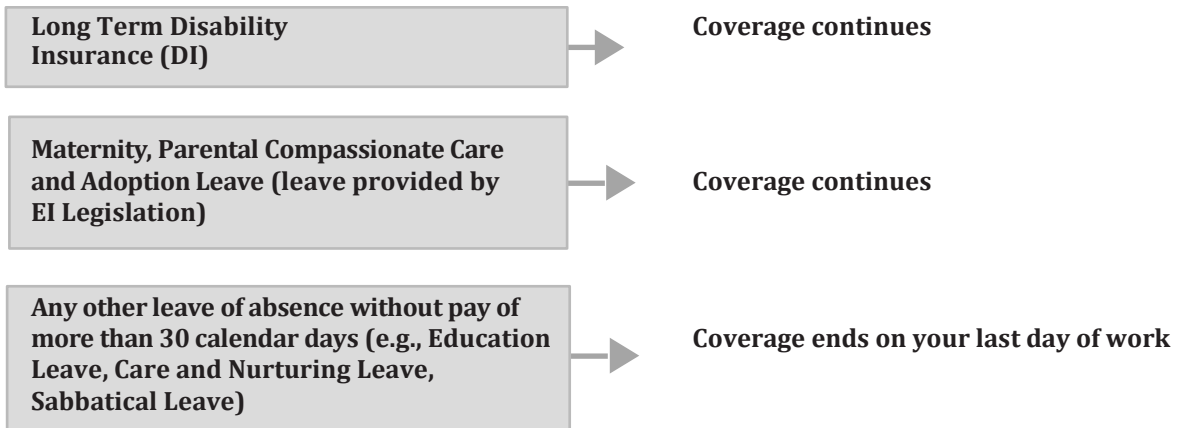


Does my coverage continue when I am off work (on leave without pay)?*

As you can see from the chart below, your coverage continues when you are on some types of leave, but not others.



Introduction to this plan



* The Union’s position is that all article 30 benefit plans are maintained as long as you are an employee and reserves the right to grieve or otherwise contest the eligibility requirements and administration of the benefit plans



Can I continue my coverage after retirement?

No, retirees are not eligible for this benefit.



Where to get forms and what to do with them

At work	➔ If you need forms for CUPW-CPC benefits, ask your supervisor leadhand, Local Area Manager or steward. Forms are available in most Canada Post workplaces — you just have to find out where they are kept.
On-line	➔ You can download forms from the CUPW website, from the Canada Post ESS (SAP) website or fill out the form on Canada Life – Group Net.
By phone	➔ If you are not at work, you can get forms mailed to you by calling AccessHR. Be sure to have your Canada Post employee number (HRID number) on hand when you call. 1-877-807-9090



Introduction to this plan



For more information: See the *Contact information* section at the end of this booklet for telephone numbers, street addresses and Internet addresses.



What do I do with the forms?

You should **mail** the Dependent Information Form to Canada Life. The address is on the form and at the end of this booklet. You also can submit the application by mail or online.



Note: This form goes to a different P.O. box than the one to which you send claims.

New baby? Death in the family? Kids going to college?

Keep your dependent information up-to-date. For example, if you have a new baby, or someone covered under the plan dies, be sure to fill out a new **Dependent Information Form** and send it to Canada Life. You can also fill it out online through Canada Life website.



Important: You need to let Canada Life know if you have children over age 21 covered under your plans who are full-time students. You need to sign them up on a new Dependent Information Form **EACH** year: if you don't, Canada Life will remove them from your plans. Student coverage ends at age 25.



What do I do if my family status changes?

If your status changes from single to family (or from family to single), you need to notify:

- **Canada Life** — Fill out a Dependent Information Form, as described above.
- **Canada Post** — Tell AccessHR, or make the change on-line on ESS (SAP).
- **Your provincial or territorial health care plan** — Once you notify CPC of your change of status, AccessHR will send you a letter reminding you to update your provincial or territorial coverage.



What are the costs?

This plan is 100% paid by Canada Post. You pay no premiums or deductibles.




Overview of the plan




What expenses/services does this plan cover?

Vision and hearing expenses covered under the plan

VISION	HEARING
<p>A maximum of \$300 for each covered person every four calendar years for:</p> <ul style="list-style-type: none"> • prescription glasses or contact lenses • medically required contact lenses • visual training or therapy • repairs to glasses • Laser Surgery lifetime maximum \$300 <p>Covered under the plan, but not part of the \$300 vision care maximum:</p> <ul style="list-style-type: none"> • eye examinations 	<p>A maximum of \$750 for each covered person in any 60-month (five-year) period for:</p> <ul style="list-style-type: none"> • purchase of hearing aids when medically required and prescribed by an ear, nose and throat specialist • repairs to hearing aids <p>Covered under the plan, but not part of the \$750 hearing care maximum:</p> <ul style="list-style-type: none"> • batteries for hearing aids covered only at time of purchase of hearing aid

 **Note:** Hearing tests are not covered. For a complete list of exclusions (things not covered under this benefit), see *The fine print* on page 16.

 **Note:** If you live in a province or territory that offers funding for hearing aids, you must apply for your provincial or territorial benefits first.



Overview of the plan



A very important four - year calendar

You get reimbursed (paid back) based on four year periods. These four- year periods are measured in calendar (January to December) years. Here they are:

January 1, 2019 — December 31, 2022

January 1, 2023— December 31, 2026

January 1, 2027 — December 31, 2030



Example: If you buy glasses in June 2020, this purchase falls within the January 1, 2019 to December 31, 2022 four-year period. The Vision/Hearing Plan will reimburse you a maximum of \$300 during this period. You must wait for the NEXT four-year period (January 1, 2023 to December 31, 2026) for another \$300 maximum to kick in under this plan.

But that's not all....

You have more vision and hearing coverage under the Extended Health Care Plan! If you are covered by the Extended Health Care Plan, you can claim benefits under both plans.



For more information: See *Some examples of using this benefit*, on page 9.



What's NOT covered?

There are a lot of exclusions (things not covered by this benefit). See the complete list under *The fine print* towards the end of this booklet.



Using this benefit



How do I use this benefit?

Your purchase or service must be authorized by the appropriate health professional. An ear, nose and throat specialist must prescribe the hearing aids. An optometrist or ophthalmologist must prescribe the glasses/contact lenses.

You must pay up front for the service and/or item and apply to be paid back under the plan. You need a receipt and a claim form.

The claim form you need is the Extended Health Care/Vision and Hearing Care Expense Statement Form. See *Where to get forms and what to do with them* on page 4.

You should take the claim form with you to your appointment for vision or hearing care and get the doctor's staff to fill out their portion.

Fill out the rest of the form. Be sure to write your Canada Post employee number (HRID number) on it and sign it.

Be sure to fill out the Coordination of Benefits section if you are covered by more than one plan; you'll get more money back. Highlight the fact you have coordination of benefits on the form.

Mail the form to Canada Life, along with the receipt. Be sure to **make a copy** of everything you send. The address is on the form and also at the end of this booklet.



Using this benefit



Tips for using this benefit

- ◆ **DON'T** buy new glasses until you've checked to see that the plan will cover them: you get reimbursed every four calendar years as listed in this booklet, on page 7. You can check to see when it's OK to buy glasses for you or a family member by phoning Canada Life. You can also check your account on the Canada Life website. You can log in using the number of the plan and your HRID no. (Canada Post employee number). You can find Canada Life's telephone numbers and Internet address at the end of this booklet.
- ◆ **DO** send in your claim as soon as possible. Claims more than a year old (i.e., received more than 12 months from the date of the expense) will be rejected.



Some examples of using this benefit

The examples of Farid and Jane, below, assume that the members do not have coverage under the Extended Health Care Plan.



Farid buys glasses

Farid has single coverage under the Vision/Hearing Plan. Farid spends \$80 for an eye exam, an expense not covered by their provincial health plan. Farid spends \$160 for a pair of glasses. Farid fills out an Extended Health Care/Vision and Hearing Care Expense Statement Form and sends it to Canada Life, along with a receipt.

FARID'S CASE

Purchase or service	Cost	What the Vision/Hearing Plan pays
Eye examination	\$80	\$80
Glasses	\$160	\$160

Farid will be reimbursed the full cost of the eye exam, \$80 in this case. Farid will get \$160 back for the glasses. As Farid has not spent the maximum in the plan, if Farid buys contact lenses or a second pair of prescription glasses, the plan will pay \$140 towards their cost. (\$160 + \$140 = \$300) Farid must also wait two years to have the cost of another eye exam covered. See *A very important four-year calendar*, on page 7.



Note: Canada Life will pay the full cost of the eye exam, as long as the amount is what's considered reasonable for eye exams in the province.



Using this benefit

Jane, Jeff and Joey go to the eye doctor; Jeff gets hearing aids

Jane has family coverage on the Vision/Hearing Plan. Each person covered by the plan can claim a maximum \$300 every four years towards the cost of prescription glasses and contact lenses. The family of three (Jane, Jeff and Joey) go to the eye doctor. Then Jeff goes to an ear, nose and throat specialist and gets a prescription for hearing aids.

JANE, JEFF AND JOEY'S CASE			
	Purchase or service	Cost	What the Vision/Hearing Plan pays
J a n e	Glasses	\$350	\$300
	Eye examination	\$80	\$80
J e f f	Glasses	\$250	\$250
	Hearing test	\$75	\$0 (not covered)
	Hearing aids	\$2,000	\$750
	Hearing aid batteries (bought at time of purchase of hearing aid)	\$15	\$15
J o e y	Eye examination	\$80	\$80
	Contacts	\$90	\$90

Jane's glasses cost \$350, Jeff's cost \$250, and Joey's contact lenses cost \$90. The plan will reimburse \$300 for Jane's \$350 glasses and \$250 for Jeff's \$250 glasses. Joey's \$90 worth of contact lenses will be reimbursed \$90: you can't get back more than 100% of the cost of your claim. In order to be reimbursed, Jane fills out an Extended Health Care/Vision and Hearing Care Expense Statement Form for each claim and sends them to Canada Life, along with the receipts.

They also get the full cost of their eye exams reimbursed if they are not covered by their provincial plan. In this case, both Jeff and Joey get eye exams, which cost \$80 each. There is no maximum for eye exams, but the amount must be what's considered reasonable for eye exams in their province, and the plan will only pay for them every two years.

Jeff's hearing aids cost \$2,000 and is able to get \$750 back, the maximum possible one person can claim for hearing aids under this plan in a five-year period. The \$15 they paid for hearing aid batteries is fully covered by the plan. reimbursed; the cost of hearing aid batteries as long they were purchased at the same time as the hearing aid and is not part of the \$750 maximum.



Note: Before setting off to the eye doctor, Jane checked with Canada Life. Jane made sure that it had been at least four years since anyone had bought glasses or two years since anyone had an eye exam and that no one in the family had used their maximum amount allowed under the plan.



Using this benefit



Maria and Ramon claim both V/H and EHCP benefits

Maria and Ramon are both postal workers in urban operations, but because Ramon is a temporary worker in group 1 Ramon is not entitled to Canada Post benefits coverage.

They are both covered by Maria's Vision/Hearing Plan and Maria's Extended Health Care Plan.

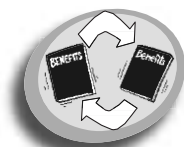
Maria's eye examination cost \$80 and glasses cost \$800. Under the EHCP, Maria is entitled to 80% of \$400(\$320). Maria is reimbursed for the full cost of the eye exam: \$64 from the EHCP and \$16 from the V/H Plan. Maria also gets \$300 from the V/H Plan for the glasses. The benefits from the two plans add up to \$620; Maria gets \$620 towards the \$800 claim.

Ramon buys hearing aids, which cost \$4,000. Ramon is entitled to be reimbursed 80% of \$1,000 (\$800) from the EHCP. Under the V/H Plan they can be reimbursed up to \$750. Ramon has been paid the maximum benefits possible from the two plans, a total of \$1,550. The Vision/Hearing Plan entitles Ramon to be reimbursed the full amount for the hearing aid batteries, \$10, as Ramon bought them at the time they purchased the hearing aid.

	Purchase or service	Cost	What the Extended Health Care Plan pays	What the Vision/Hearing plan pays	Total amount reimbursed (paid) by the two plans
Maria	Eye examination	\$80	80% of \$80 = \$64	\$16	\$80
	Glasses	\$800	80% of \$400 = \$320	\$300	\$620
Ramon	Hearing aids	\$4,000	80% of \$1,000 = \$800	\$750	\$1,550
	Hearing aid batteries	\$10		\$10	\$10



Note: When benefits are paid under both the Extended Health Care Plan and the Vision/Hearing Plan, the EHCP benefits are always paid first.



Coordination of benefits

Martin and Alice are RSMCs. They are on the Vision/Hearing Plan as employees with family coverage.



Using this benefit



Note: Both partners must be on the plan as **employees, with family coverage** to get coordination of benefits. If one partner is an RSMC and the other is a OCRE, they are entitled to coverage under one Vision/Hearing Plan. To get coordination of benefits, (which allows you to claim on two plans), both partners must be on the plan as employees/members, with family coverage.

Martin spends \$80 for an eye exam. Martin buys glasses, which cost \$500. Coordination of benefits on the Vision/Hearing Plan entitles Martin to be reimbursed a maximum of \$300 from Martin's plan and another \$300 from Alice's, for a total of \$600. But they only need \$500 to pay for the glasses. Because it's Martin's claim, the benefits come out of Martin's plan first: \$300 from the plan and then \$200 from Alice's. Martin is also reimbursed the \$80 cost of the eye exam, an expense that is not counted as part of the maximum Martin can spend on vision expenses. In these examples, Martin and Alice are not enrolled in EHCP.

If you have coordination of benefits with the same plan, you don't have to worry about whose plan pays what when you file a claim: Canada Life does these calculations. These examples are to help explain how coordination of benefits works.

MARTIN'S CASE

Purchase or service	Cost	What the Vision/Hearing Plan pays (Martin's plan)	What the Vision/Hearing Plan pays (Alice's plan)	Total amount reimbursed (paid) by the two plans
Eye examination	\$80	\$80	\$0	\$80
Glasses	\$500	\$300	\$200	\$500

Alice spends \$80 for an eye exam. Alice buys glasses, which cost \$1,000. Coordination of benefits on the Vision/Hearing Plan entitles Alice to claim \$300 from Alice's plan and another \$300 from Martin's, for a total of \$600. In this example, Alice obtains the maximum vision care amount from both plans, \$600.

ALICE'S CASE

Purchase or service	Cost	What the Vision/Hearing Plan pays (Alice's plan)	What the Vision/Hearing Plan pays (Martin's plan)	Total reimbursement by the two plans
Eye examination	\$80	\$80	\$0	\$80
Glasses	\$1,000	\$300	\$300	\$600



Using this benefit



Whose plan do we use?

Two-plan, two-postie families

Sue and Amanda are RSMCs who have coverage under the Vision/Hearing Plan as employees, with family coverage. Their child, Claire, goes for an eye exam and glasses. But whose plan should they file under — Sue's or Amanda's? It depends on whose birthday comes first in the year (the actual date of birth, not the year of birth). Because Amanda's birthday falls earlier in the year, Amanda makes the claim on Amanda's plan. This is known as the "birthday rule".

In this example, Sue and Amanda are both enrolled in the EHCP. Amanda fills out an Extended Health Care/Vision and Hearing Care Expense Statement Form as a member, and adds information about Sue in the Coordination of Benefits section. If Sue's birthday came earlier in the year then Sue would file the claim on their plan, with information about Amanda in the Coordination of Benefits section.

Canada Life will reimburse the claim for Claire's eye exam and glasses with benefits from both parents' plans. Claire's parents only need to fill out one claim form.

Two-plan families where only one partner is a postal worker (partners' claims)

If your family is covered by two different benefit plans, you must file two separate claims — but the claims must be filed one at a time. You must wait for the first claim to be processed by the insurance company before filing the second one. The first claim is filed on the plan that covers the person as an employee, the second one on the plan that covers the person as a partner.

In your case, you first file a claim on the plan that covers you as a member/employee — the Canada Post-Canada Life plan. When the cheque and paperwork come back from Canada Life, you then file a second claim for whatever money Canada Life didn't pay. You file the second claim on the plan that covers you as a partner — your partner's plan. When you send in the second claim, you must include a copy of the Canada Life paperwork that came with the cheque to show how much the first plan paid.

In the case of your partner they file the first claim with the plan that covers them as a member/employee. The second claim should be filed with the plan that covers them as a partner — the Canada Post-Canada Life plan.

Two-plan families where only one parent is a postal worker (claims for children)

The "birthday rule" was developed by insurance companies and applies in situations where children are covered by two benefit plans.



Using this benefit

If you are part of a couple with children who are covered by two plans (only one of which is with CPC), you file a claim on both plans — but the claims must be filed one at a time. The first claim should be filed on the plan covering the partner with the earliest birthday in the year (the actual birthday, not the year of birth).



Example: Your partner's birthday is March 23, 1999 and your birthday is June 3, 1998. You first apply under your partner's plan, because March 23 comes before June 3.

You wait for the insurance company to process the claim and send a cheque. Any amount not paid for by the first claim can be submitted to the other partner's plan. When you send in the second claim, you must include a copy of the paperwork that came with the cheque to show how much the first plan paid.



Common questions and problems



I bought new glasses and sent my claim, but it was rejected. Why was it rejected?

Possibly because you bought your new glasses before the end of the four-year period and you have used up your maximum. You should check with Canada Life before you make your eye appointment, either by phone or checking your on-line account. The four-year calendar is on page 7. See *Contact information* at the end of this booklet for Canada Life telephone numbers and Internet address.



I am on both the Vision/Hearing and Extended Health Care Plans. How do I claim?

You use the same Canada Life claim form for both plans. The folks at Canada Life will figure out how much you are owed from both your Extended Health Care Plan and Vision/Hearing Plan. The benefits from the EHCP are always paid out first.



What if I buy glasses in another province or territory?

Be sure to get a receipt. When you get home, fill out a claim form and mail it to Canada Life. As always, be sure to keep a copy of what you send to Canada Life.



Using this benefit



When will I get my cheque from Canada Life?

It normally takes about two weeks from when you mail your claim to when you will receive your cheque from Canada Life. You can make an on-line claim and also have an option for direct deposit. If you follow this path, make sure you keep your receipts.

If there is a problem with your claim, Canada Life will send you a note saying what the problem is, and you will have to resolve it before the claim can be processed.

Possible problems:

- your Canada Post employee number (HRID number) is missing
- a family member does not show up as covered in CL's records
- a required signature (e.g., yours, a medical practitioner's) is missing
- a receipt is missing
- an original receipt is required

If you want to check on the progress of your claim, you can call Canada Life, or you can look up your on-line account on the CL website. See *Contact information* at the end of this booklet for Canada Life's telephone numbers and Internet addresses.



How long do I have to send in my claim form?

You have 12 months from the date of an expense to make a claim. If you submit your claim later than 12 months after the date of your service or purchase, it won't be accepted for reimbursement: you won't be able to get any money back.



What do I do if I think Canada Life made a mistake?

Possible scenarios:

- your cheque is smaller than you think it should be
- you were denied reimbursement for something you are sure is covered by your plan

Here's what to do if you think Canada Life made a mistake:

- Canada Life should provide you with a written explanation of why you were not reimbursed as much as you expected or why your claim is denied.
- If you aren't satisfied with the response you get from CL, check with your local to see if they can intervene on your behalf or whether a grievance is possible.



Using this benefit



What Premiums Do I Pay When I am on Leave Without Pay?

When you go off on Leave Without Pay (LWOP) depending on the leave you are on your coverage may change and how much premiums you pay, may change as well.

BENEFIT	LEGISLATED AND ILLNESS	NON-LEGISLATED*
EHCP	Your coverage continues but you can opt out but can only opt back in when active at work. You pay only the employee share.	After 30 days of LWOP to maintain coverage while on LWOP you must pay both the employee and the employer's share
Basic Life Insurance,	Your coverage continues. You pay only the employee share.	After 30 days of LWOP you must pay both the employee and the employer's share
Long Term Disability (LTD)	Your coverage continues. You pay only the employee share. However if you are on LTD, you do not pay LTD premiums.	After 30 days of LWOP you must pay both the employee and the employer's share
Dental	Your coverage continues. You pay only the employee share. No premium.	If you are on a LWOP absence of more than 30 days, your coverage will end on your last day worked.
Vision & Hearing	Your coverage continues. You pay only the employee share. No premium.	If you are on a LWOP absence of more than 30 days, your coverage will end on your last day worked.

Legislated Leave and Illness: Legislated leave is any leave provided by the government, such as parental, adoption or compassionate care leave. Illness would cover Long Term Disability Insurance when you are no longer getting paid directly from CPC

Non-Legislated Leave: These are unpaid leaves provided for under the Collective Agreement. Examples of non-legislated leave are: Education, Military, Relocation of Spouse, Personal Needs, Elder Care Leave etc.

*** The Union's position is that all article 30 benefit plans are maintained as long as you are an employee and reserves the right to grieve or otherwise contest the eligibility requirements and administration of the benefit plans.**



The fine print

Exclusions (what's NOT covered)

The Vision and Hearing Plan does not reimburse expenses for:

- broken appointments (that a doctor billed you for)
- the filling out of claim forms
- safety glasses or sunglasses
- artificial eyes (but covered under EHCP)
- hearing tests
- the cost of recharging devices, or other such hearing aid accessories (but batteries are covered as long as they were bought at the time you purchased the hearing aid)
- supplies or services that are:
 - eligible for reimbursement under any government plan (such as provincial or territorial funding for hearing aids), or for which a government or government agency prohibits payment of benefits
 - received from a medical department maintained by Canada Post, an association, a union, or a similar type of group
 - required as a result of intentional self-inflicted injury, war (declared or undeclared), insurrection, or participation in a riot
 - provided principally for cosmetic purposes
 - clearly experimental in nature
 - not considered justifiable and reasonable by the insurer (however, the portion that would have been charged for an alternative treatment that is considered justifiable or reasonable will be covered)
 - required as a condition of employment
 - supplies or services for which there would have been no charge in the absence of this insurance



Dictionary

Children

Your children are your natural or legally adopted children, stepchildren, or foster children of you or your partner, who are unmarried and financially dependent on you for support, and who are:

- under age 21 (for the Extended Health Care Plan)
- under age 22 (for Vision/Hearing, and for Basic and Major Dental Plan coverage)
- under age 25, if full-time students (for the Extended Health Care Plan, Vision/Hearing Plan, and for basic and Major Dental Plan coverage)
- any age, if they are mentally or physically disabled and incapable of self-sustaining employment, providing they were disabled and covered on the date that coverage would otherwise have ended (Vision/Hearing, Dental and Extended Health Care Plans)
- any age, if they are mentally or physically disabled and incapable of self-sustaining employment, provided the child remains dependent on you for financial support (CUPW Life Insurance Plan)

Exceptions:

- only children under 22 years of age qualify for orthodontic coverage under the Dental Plan
- only children under 15 years of age are covered for pit and fissure sealants under the Dental Plan (Basic services)
- to be covered by the CUPW Life Insurance Plan, a child must be at least 14 days old and cannot be a foster child

Continuous Service

- The length of service as an employee since the date of your last hiring. (clause 8.01 and 11.01 RSMC and Urban agreements respectively)

Coordination of benefits

You can coordinate benefits (and get up to 100% reimbursement for your claims) if you are covered by more than one plan for the same benefit. You can coordinate benefits if both you and your partner are postal workers who are both eligible for family coverage. You can also coordinate benefits when one partner has CPC benefits and the other partner is covered by different plans. (For more details, see the booklet on each benefit plan.)



Dictionary

CPC

Canada Post Corporation.

CUPW

Canadian Union of Postal Workers

EHCP

Extended Health Care Plan

Eligible expenses

Eligible expenses are services or purchases that are covered under your plan.

Employee Self Service (ESS)

Employee Self Service (ESS) is the Canada Post “SAP” website. You use a password and user number to access the electronic file containing your personal information. You can also obtain information about CPC benefits and download enrolment and claim forms at home or at work. Internet addresses and further information are at the end of this booklet.

First payer

If the province covers your claim, the province is always the first payer. Also, when someone is covered by more than one benefit plan, the first payer is the insurance carrier that the insured person files a claim with first. The first payer is the person’s primary plan, the one that covers them as an employee. For example, if you are covered by the CPC Dental Plan and your partner’s (non-CPC) dental plan, you claim with the CPC Dental Plan first. (See also *second payer* and *coordination of benefits*.)

Canada Life formerly called Great West Life

The insurance company that looks after the Long Term Disability, Dental, Vision/Hearing and Extended Health Care Plans

Maximums

Benefit plans set a limit on the amount of money you will be reimbursed (paid back) for various purchases and services: maximums. Just what a “maximum” is, differs from plan to plan, and sometimes even within the same plan.



Dictionary

Under the Extended Health Care Plan, the maximum for massage therapy is \$400 a year, but if you claim \$400 in one year you will only get \$320 back. That's because you are reimbursed 80% of this particular maximum. Most maximums under the EHCP are reimbursed at 80%, and the only way you can get more than 80% is to be covered by a second benefit plan.

In many cases, the maximum amount is allotted for a one-year period (such as for paramedical services like acupuncture), or a four-year period (e.g., eyeglasses). Some limits are for five years (e.g., hearing aids), and a few are lifetime maximums (e.g., wigs for cancer patients). Some time limits vary depending on the age of the person claiming reimbursement, for example a child can obtain a new wheelchair earlier than an adult.

Under the Vision/Hearing Plan, for example, you get 100% of the maximum amounts under the plan. Under the Dental Plan, you can get 100% of a maximum if you spend enough. For more information, see the booklet on each plan.

National Capital Region

The Ottawa-Gatineau area

Premium holiday

A period during which you don't have to pay premiums for a benefit

Regular employee

Under the urban contract, a permanent employee.

Reimbursement

Money that you get back for expenses that you paid for out of your pocket

Rural and Suburban Mail Carriers (RSMCs)

A group of workers covered by a collective agreement with Canada Post. The collective agreement covers the 10,779 Rural and Suburban Mail Carriers (RSMCs) who work as Route Holders, Permanent Relief (PRE) and On-Call Relief (OCRE).

SAP

SAP stands for "Systems, Applications and Products in Data Processing" (translation from German). SAP is the software system used by Canada Post's Employee Self-Serve (ESS) Intranet/Internet site.



Dictionary

Second payer

When someone is covered by more than one benefit plan, the second payer is the carrier that the insured person files a claim with second, usually the partner's plan. For example, if you are covered by both the Canada Post (Canada Life) Dental Plan and your partner's (non-CPC) dental plan, you claim with the CPC Dental Plan first; CPC is the first payer. When you get your reimbursement from Canada Life you can file a claim with your partner's dental plan, the second payer. (See also *first payer and coordination of benefits*.)

Spouse/Partner

A spouse/partner is defined as:

- the person to whom you are married and with whom you live, or
- the person to whom you were (or are) legally married and whom you support, or
- the person with whom you have been living in a common-law relationship for at least one year



Note: The one-year requirement does not apply to common-law relationships where a child is born or adopted of the relationship.



Note: Same-sex couples are included under this definition of spouse.



Note: A divorced partner is not eligible for coverage under the CUPW Life Insurance Plan. A divorced partner whom you support is eligible for coverage under the Vision/Hearing, Dental and Extended Health Care Plans.

Student

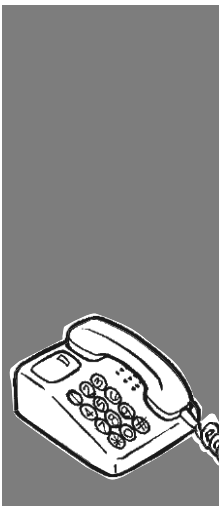
A child is considered as a full-time student if they have been in registered attendance at an elementary school, high school, university, or similar educational institution. Full-time status will be designated by the institution. A full-time student qualifies for prescription drug benefits until their 26th birthday if they are a child of a Quebec resident and otherwise meets the qualified child definition

Urban postal operations (UPO)

A group of workers covered by a collective agreements with Canada Post. The collective agreement for urban postal operations covers the 47,203 people who work as letter carriers, postal clerks, dispatchers, mail service couriers, mail handlers, technicians and mechanics.

V/H Plan

The Vision and Hearing Plan, often called Vision/Hearing Plan.



Contact information

Canadian Union of Postal Workers (CUPW) — your union

Your steward and others in your local or region can help you with your benefits questions or problems.

My union contacts



A large rectangular area intended for writing contact information. It features a solid grey header bar at the top, followed by three horizontal dashed lines, and a solid grey footer bar at the bottom.

CUPW Special Needs Program (for children with special needs)

(800) 840-5465

The drug plan covers prescription vitamins for children who are registered in the program.

Internet address

www.cupw-sttp.org

On this site, you can:

- download the latest version of this booklet, and other benefit booklets. (Check to be sure you have the latest version; the date is at the bottom of each page.)
- download forms for these Canada Post benefits: Dental, Vision/Hearing, Basic Life Insurance, and Extended Health Care Plans



Contact information

Canada Post Corporation (CPC)

Canada Post AccessHR is where you can get forms and information about your pay and benefits coverage. It is staffed by members of the Union of Postal Communications Employees (UPCE), a sister union in the post office. AccessHR can be reached by phone at 1-877-807-9090 or by email at accesshr@canadapost.ca.

Always have your Canada Post employee number (HRID number) at hand when you call. If you have problems with a particular claim, call Canada Life.

Canada Post employee ESS (SAP) site

<http://mysite.canadapost.ca>

Use the above address to reach this site from home. At work, the site is accessible on the Intranet. On this site, you can:

- download forms and CPC's benefits information
- check your personal information to see if it's accurate

Notes:

- You need a user name and password to use the site. If you never got a password or it doesn't work, call (877) 411-8585.



Contact information

Canada Post drug list

There are three ways you can look up the on-line drug plan:

- 1 Look for the link on CUPW's website at: **www.cupw-sttp.org**
- 2 Go to Canada Post's ESS (SAP) site at: **<http://mysite.canadapost.ca>**
Go to "Employee Self Serve" by clicking on "Benefits", and then to "Drug Plan". Click "yes" when asked: "Do you want to display non-secure items?"
- 3 Go to this Internet address: You can go onto Canada Life website or use their App

Canada Life

This company looks after the Extended Health Care Plan, the Vision/Hearing Plan and the Dental Plan.

Mailing addresses

For Quebec residents (for CLAIMS), except those in the National Capital Region:

Canada Life Health & Dental Benefits
800, de la Gauchetière ouest, Suite 5800
Montreal, QC H5A 1B9

For all other residents (for CLAIMS):

Canada Life Health & Dental Benefits
P.O. Box 3050
Winnipeg, MB R3C 4E5

To send in your Dependent Information Form (but NOT for claims):

Canada Assurance Company
Member Administration
P.O. Box 6000, Station Main
Winnipeg, MB R3C 9Z9



Contact information

Phone numbers

Quebec residents (<u>except</u> those in the Montreal area):	English and French: (800) 663-2817
Montreal residents:	(514) 878-1288
All other residents — call the Winnipeg office:	English and French: (800) 957-9777 TTY/TDD: (800) 990-6654

Internet address

www.gwl.ca or www.canadalife.com

On this site, you can:

- Look up your claims history for the past two years for your Dental, Extended Health Care and Vision/ Hearing Plans

Notes:

- You log onto the Canada Life website using the number of a CL plan and your Canada Post employee number (HRID number). You can pick your own password for future access. On the CL site, you can check your electronic file, to check on the progress of a claim, for example.
- The CL site has confusing names for two of the plans. The Vision/Hearing Plan is called “Health & Vision (51392)” and the Extended Health Care Plan is called “Health, Drugs, Vision (51391)”. The Dental Plan is called “Dental (51057)”.
- Don’t use the generic claim forms on this site; use the ones on the CUPW or CPC sites instead.

cupw•sttp

Canadian Union of Postal Workers

NATIONAL OFFICE • 377 BANK STREET, OTTAWA, ON K2P 1Y3 • CUPW.CA

