

TERMINATION OF COVERAGE

If your reserve account falls below 100 hours after deductions for the current month's coverage are made; your coverage will be terminated the following month.

If your reserve account subsequently goes over 100 hours within 4 months of termination, coverage can then be reinstated on the 1st day of the second month following the month when hours increased.

If you cannot reinstate your coverage within 4 months, you must then comply with initial eligibility rules.

SELF-PAYMENT OPTIONS

If your reserve account falls below 100 hours, you may continue coverage by making self-payments provided you arrange to make your first payment prior to losing eligibility.

Payments must be made continuously and in advance of the month for which coverage is desired.

You may continue to self-pay for up to 18 months.

If you decide to self-pay, 3 levels of coverage are available to you:

1. Full Benefit Package: Same benefits as Active Members, but Life & AD&D @ \$50,000
2. Reduced Benefit Package: Life & AD&D @ \$25,000 each; Prescription Drugs @ 80% coverage; Dental includes Basic services only @ 80% coverage; Vision Care @ \$240
3. Life Insurance Only Package: Life and AD&D @ \$50,000 each

Temporary Disability coverage is not available under any self-pay option.

Once you have chosen a package you cannot change your level of coverage.

WORKING IN THE UNITED STATES

Life, Disability, Health, and Dental benefits, payable in Canadian funds, are available for Members working in the United States under the following conditions:

- Hour bank has sufficient hours to provide insurance coverage;
- Member maintains provincial Health Care and Hospitalization Insurance (medicare) coverage; and
- Member cannot work in the U.S. for more than 12 months.

COVERAGE FOR RETIREES

If you retire, you may be eligible to continue benefits up to age 70 (at a reduced coverage level), either through the Trust Fund paid option, or through self-payments.

Contact the Fund office for more information.

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



LOCAL 720 & LOCAL 725

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

BENEFITS-AT-A-GLANCE

Active Members @ June 1, 2007

	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"> ➤ \$4 per prescription is the maximum dispensing fee ➤ limited list of over-the-counter drugs covered ➤ Erectile dysfunction: \$60 per month to \$720 per calendar year ➤ Smoke Cessation Products \$500 per lifetime <p>Private Hospital</p> <p>Hearing aids: \$4,000/5 years</p> <p>Custom fitted ear plugs: \$300/5 years</p> <p>Sleep Apnea treatment devices: \$2,500/5 years</p> <p>Paramedical Practitioners: \$35/visit to \$700/year, except Physiotherapist \$45/visit to \$900/year</p> <p>Psychologist: \$60/hour to \$600/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: \$60 per exam (within vision care maximum)</p> <p>Corrective Eye Surgery: \$2,000 per lifetime (vision care offset)</p> <p>Safety Glasses: \$300 every 24 months (Members only)</p>	<p>90% for Minor procedures</p> <p>70% for Major procedures</p> <p>Combined Minor & Major maximum of \$3,000/year</p> <p>Recall frequency: once every 6 months</p> <p>X-rays: once every 9 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>\$440 per week</p> <p>Benefits begin on the 1st day of a disability due to either a non-occupational accident or a sickness.</p> <p>No benefits are payable by the Insurer during the 15 week period commencing with the date Employment Insurance Act benefits would normally commence, unless you provide proof you are not eligible for such benefits.</p> <p>The maximum duration of benefits is 104 weeks.</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 & Family Assistance Program (CEFAP).</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>Apply to EI for Accident & Sickness benefits. Obtain form from Union or Fund office; complete and submit within 120 days of the date you become disabled.</p>	<p>Contact Wilson Banwell at 1-800-563-1642.</p>

WHO IS ELIGIBLE?

Members (under age 70) and their dependents for whom employers are obligated to contribute by Collective Bargaining Agreement; full-time salaried officers or employees of a Local or Association approved by Trustees; and, employees of Trustees for whom coverage under this Plan has been approved.

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.

Non-Bargaining employees who work for a contributing employer may be covered. Coverage is based on 160 hours of work per month.

Coverage for the Member Assistance Program (through the Construction Employee and Family Assistance Plan) is effective from the first hour reported.

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

WHAT COVERAGE DO I HAVE IF DISABLED?

If you are disabled for at least 2 weeks of any month and you are receiving either EI Sickness Benefits, Temporary Disability Insurance benefits, or Auto Insurance Schedule B disability benefits, your coverage will continue and no deductions will be made from your reserve account. Your reserve account will be FROZEN at current levels and will be FROZEN for up to 24 months during a temporary disability.

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 Manulife until you reach age 65 or until you qualify for a pension benefit. Your Health, Vision and Dental Care coverage will be continued by the Trust Fund to age 65. During this period your reserve account will continue to be FROZEN until you recover, reach age 65 or qualify for a pension benefit.