



Millwrights Local 2736 Health Benefits Plan

Summary of Active Members' Benefits

Effective September 1, 2024

Benefits are for members in good standing of Local 2736

This is a brief summary of current benefits and rates.

For further information, please contact the Plan Office (see contact details below).

HOURLY CONTRIBUTION RATE	\$2.835 per hour paid by employers for hours earned in Local 2736 jurisdiction, effective November 1, 2023			
TO ESTABLISH COVERAGE	For new members, or if coverage has lapsed: 220 hours reported in 11 consecutive months.			
MONTHLY COVER CHARGE	110 hours			
HOUR-BANK MAXIMUM	1,320 hours (12 months x 110 hours)			
SELF PAYMENTS	Standard (covers All Benefits except Jury Duty and Bereavement Leave) Rate: \$1.54 per hour (\$169.40 per month)			
- to maintain coverage when short of hours	Mini Plan (only covers EHC and reduced Life and Spousal Life) Rate: \$0.50 per hour (\$55.00 per month)			
- 18 months maximum				
DISABILITY CREDITS	To maintain coverage while on LTD or WCB (up to 1,100 hours), EI sick benefits, or STD, 3.7 hours per day (110 per month) are credited to hour bank. Submit stubs promptly for WCB or EI.			
CONTINUATION OF COVERAGE (long-term)	Coverage for EHC, Dental may be extended free of charge to members who are receiving Long Term Disability from this Plan. You must apply for this benefit – contact the Plan Office			
ASSOCIATE MEMBERS (covers all benefits)	If approved by the Trustees, employers' office staff, etc. may be covered under the Plan by paying the full cost of coverage: \$225.50 per month			
EXTENDED HEALTH CARE (to age 85)	\$0 Deductible, 80% reimbursement, \$3 million overall lifetime limit			
- insured by PBC	... Pay Direct drugs within BC (present your card to your pharmacist) ... June 30 th of the following year claiming deadline			
• Hearing Aids	\$2,000	every 60 months		
• Vision Care	\$1,000	per person per 2 calendar years		
• Registered Counselling and Psychology	\$1,000	per person per calendar year combined		
• Emergency Medical Assistance	Provided in-province and out-of-country through Medi-Assist			
Medical Travel Assistance	If you must travel to receive specialized medical services, the Plan will reimburse some of your travel costs			
- self-insured by the Trustees, paid by PBC				
DENTAL (to age 85)	Basic	Diagnostic and Preventative	100%	
- self-insured by the Trustees, paid by PBC		Fillings, Extractions, Root Canals	80%	\$3,000 per person per year (combined A&B)
	Major Orthodontics		60%	\$3,000 per person per year (combined A&B)
			60%	\$10,000 lifetime limit per person
LONG TERM DISABILITY (to age 65)	After the 26-week waiting period* \$2,500 taxable monthly benefit, reduced by WCB payments, and subject to All-Source Maximum. Payable for a maximum of 5 years or to age 65. * Weeks 1-26 paid by EI sickness benefit. BC Life pays STD if not eligible for EI. This limited STD is self-insured by the Trustees.			
- insured by Blue Cross Life				
JURY DUTY	\$80 per day, five (5) days a week, if eligible for STD			
- self-insured by the Trustees, paid by the Plan				
BEREAVEMENT LEAVE	Maximum of three (3) days leave from work based on hours scheduled at 75% of the Journeyman's Rate			
- self-insured by the Trustees, paid by the Plan				
RESIDENTIAL REHABILITATION	\$10,000 per member per lifetime. Member must be in good standing with the Union and be active on the hourbank plan			
- self-insured by the Trustees, paid by the Plan				
LIFE INSURANCE (to age 75)	\$100,000 for members to age 65, reducing by 50% at age 65, and terminating at age 75			
- insured by Blue Cross Life	\$15,000 spousal life			
- premiums are a taxable benefit	\$15,000 dependent life			
Conversion	You may convert to an individual policy by applying within 30 days of termination from Plan coverage			
Disability Waiver	Life insurance coverage may continue to age 65 if you apply promptly			
AD&D (to age 75)	Accidental Death & Dismemberment (AD&D) \$100,000 for members, reducing by 50% at age 65, and terminating at age 75			
- insured by Blue Cross Life				
Employee and Family Assistance Program	The Employee and Family Assistance Program (EFAP) is a voluntary and confidential counselling and information service for all members of Local 2736 and their families. To book an appointment, call 1-800-667-0993 or visit the website at fseap.ca and login to the "myFSEAP" portal using "MW2736" as the username and "2bwell" as the password.			
- provided by FSEAP				



Millwrights Local 2736 Health Benefits Plan

Summary of Retiree Benefits

Effective October 1, 2024

This is a brief summary of current benefits and rates.
For further information, please contact the Plan Office (see contact details below).

ELIBILITY REQUIREMENTS

To enroll in the Retiree Plan, you must:

1. **be retiring from the Millwrights Local 2736**, and
2. **be actively covered** on the Millwrights Local 2736 Health Benefits Plan when you retire, and
3. **enroll with no break in coverage**, within 30 days of termination on the Millwrights Local 2736 Health Benefit Plan.

COVERAGE – POLICY 43524

The plan is for retired members and their spouses, during the member's lifetime, subject to eligibility.

EXTENDED HEALTH CARE

- insured by PBC

- Vision Care
- Eye Exams

\$100 annual deductible, 80% reimbursement, \$100,000 per person lifetime limit
Coverage for eyeglasses and contact lenses: \$280 per person, per 2-year period
1 routine eye exam per calendar year, between the ages of 19 and 64

PAYMENT

Payment must be made by 12 post-dated monthly cheques or 4 post-dated quarterly cheques to the Plan Office directly.

Retirees pay the following rates, effective October 1, 2022, based on full payment of Extended Health Care:

Singles
\$87.33 per month or \$261.99 per quarter

Couples
\$204.42 per month or \$613.26 per quarter

TERMINATION OF COVERAGE

Coverage will terminate on the earliest of the following dates:

1. on your annual renewal date if you do not make your renewal payment before that time;
2. on the last day of the preceding month, if there are insufficient funds in your bank account to honour a post-dated cheque;
3. upon your death (your spouse will be covered for the balance of coverage already paid for)

NOTICE

The Trustees have arranged to offer this package through Pacific Blue Cross. Since this is a new Plan without excess reserves, they are unable to offer a subsidy for coverage. Members pay the full cost of insurance as charged by PBC. The Trustees intend to work with PBC to ensure the Plan offers value to retired members while remaining affordable. Both future costs, and the details of Plan design, are subject to the Plan's experience and cannot be guaranteed.
