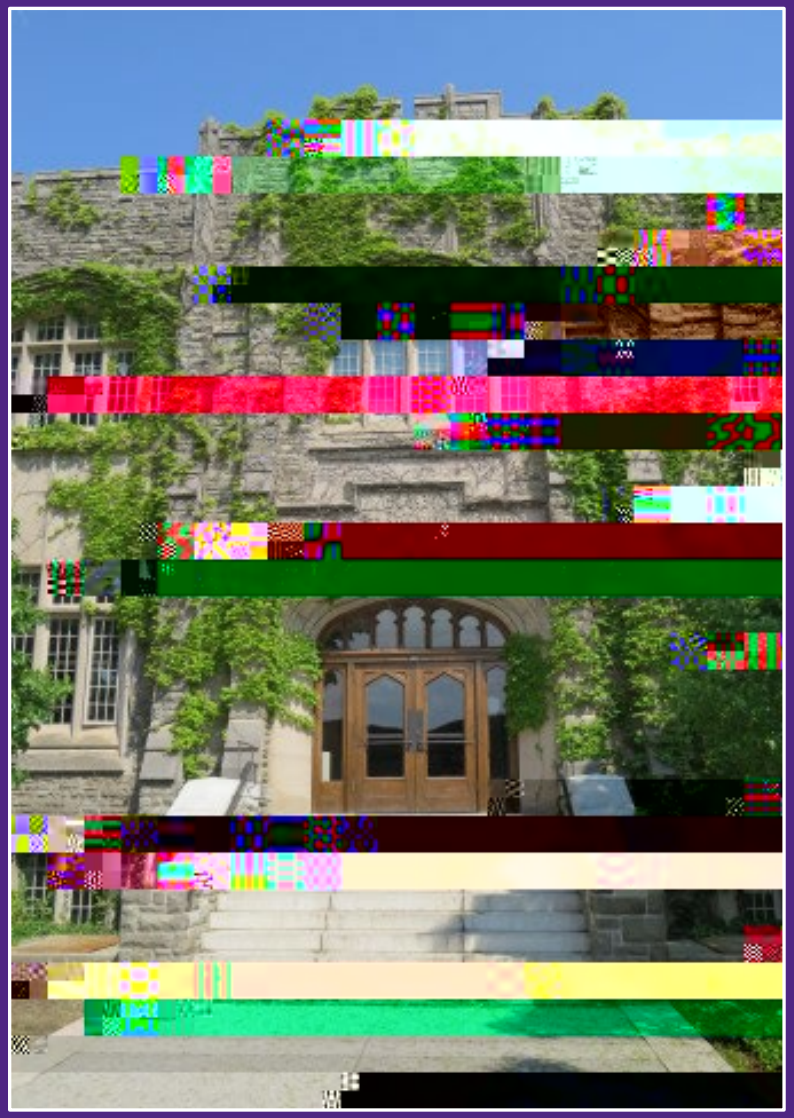


Partial Disability Benefit 30
Recurrent Disability 30
Total Disability Waiver of Premium 30
Cost of Living Adjustment 31
Integration of Benefits 31
Rehabilitation Program 32
Exclusions and Limitations 32
Continuance of Benefits During Disability 33
Termination of Coverage 33

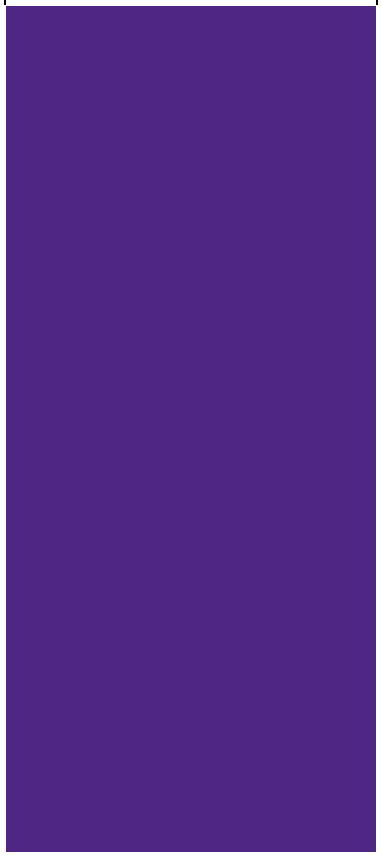
Heart Attack 34
Life Threatening Cancer 34
Stroke 34
Benefit 34
Diagnosis 34
Making a Claim 34

EMY BENC93sG197F1-23. (ST)-19197S N

- Major Restorative Services (crowns, bridges) and dentures

- $800 per year
- Annual PER Base: $300
- Annual HCSA Base: $200
- Your choice annually where to allocate these flexible benefit credits.7TJ0ale flo1 yal 03.1 (c)-8 (r)-6.n-1.325 Td[(c)-m (w)-2.9nt4 (as)-8[(t)-1 .9 (oc)- (e t)-1.1 1 1 T- 0 gts

	x Can be used to pay many medical and dental expenses not covered or only partially covered by Health Care and Dental plans for you and your eligible family members x Annual HCSA Base: $200
	x Basic Life Insurance – two times annual base salary on your life (compulsory life insurance) x Optional Life Insurance – up to an additional two times annual base salary on your life x (Basic and Optional Life maximum benefit - $500,000) x Dependent Life Insurance - $40,000 (spouse) and $10,000 (each eligible child)



- Vacation – plus additional days Western designates annually
- Dependent Tuition Scholarship
- Recognition programs for long service and r

» Eligibility

- Paramedical services
- Vision care
- Major restorative benefits under the dental plan
- $6.11 dispensing fee cap

If your status changes between single and family coverage part-way through the year, any out of pocket expenses covered by the plan you've incurred towards the single or family maximum will be included in the combined maximum for that calendar year.

: You and your spouse incur eligible health and dental expenses from January to July totaling $6,000 for which the Western plan paid 85% ($5,100) and you were out of pocket $900. The remainder of the eligible expenses for the balance of the calendar year will be paid at 100%.

apply to health care and dental benefits. This means claims are adjudicated based on the lowest of the:

- Prevailing amount charged for the same or comparable service or supply in the area in which the charge is incurred, as determined by the insurance provider
- Amount shown in the applicable professional association fee guide
- Maximum price established by law

With the exception of two categories of drugs, most eligible prescription drugs are covered at 85% when prescribed in writing by a physician or dentist and dispensed by a licensed pharmacist. The drug must legally require a prescription. This includes compounded preparations provided at least one of the ingredients is eligible.

In addition, drugs that may not legally require a prescription – but are in an injectable format, or are life sustaining (as determined by the insurance provider), and identified in the therapeutic guide section of the current Compendium of Pharmaceuticals and Specialties – may be covered. These include:

- Antianginal agents
- Antiarrhythmic agents
- Anti-inflammatories
- Anticholinergic preparations
- Antihistamines
- Antiparkinsonian agents
- Antihyperlipidemic agents
- Bronchodilators
- Glaucoma therapy
- Hyperthyroidism therapy
- Oral fibrinolytic agents

- Topical enzymatic debriding agents
- Tuberculosis therapy

The plan also covers:

- Preventive vaccines and medicines (oral or injected)
- Insulin, needles, syringes, lancets and chemical testing agents for the management of diabetes.
- B6 and B12 injectable vitamins when used for weight loss
- Non-oral contraceptives, limited to a maximum of $50 per person per calendar year (this overall maximum includes expenses for contraceptive devices listed under Medical Aids, Appliances,

Practitioners include:

- Prostatic Specific Antigen (PSA) test –

» Flexible Benefit Credits

In addition to many other benefits, Western provides you with flexible benefit credits that may be allocated into one of the following accounts to reimburse for a wide variety of expenses:

- Health Care Spending Account (HCSA)
  - Annual Base: $200
- Professional Expense Reimbursement Account (PER)
  - Annual Base: $300 e

rbl200lt
[MCID 23 BDC 32 1 Tf-15.$Td[(F)-1 Tf-228 Tw 1.675 0 Td( )TjEMC /LBody MCID 14 BDC /-0.001.6751 (es)-8.1 (s)-8 8 0 Td( )o-01h

» Health Care Spending Account (HCSA)

A Health Care Spending Account (HCSA) complements your group benefit plan. The HCSA can be used to pay for many medical and/or dental expenses that are not covered or only partially covered by your Health Care and Dental plans or provincial health care plans. Claims can be made only if you have chosen to allocate flexible benefit credits to this account. The reimbursement of expenses through the HCSA is non-taxable to you which means that your money goes a lot further than if you paid the same expenses out of pocket. The HCSA not only provides you with the flexibility when budgeting to meet the specific health care needs of you and your dependents, but also gives you more control over funding of your health care expenses.

Eligible expenses means health care and dental care expenses which qualify as a medical expense under section 118.2(2) of the Canadian Income Tax Act and Regulation 5700, as amended from time to time, or health care and dental care expenses the insurance provider deems as an eligible medical expense under a private health services plan or a group accident and sickness plan, provided eligible expenses are:

- Medically necessary for the treatment of an illness or injury of a covered person
- Incurred for the care of the person while covered under the HCSA
- Not covered under a provincial plan or any other government-sponsored programs; and
- Not prohibited by law from being covered

Western establishes a HCSA with the insurance provider at the beginning of each calendar year. The insurance provider will pay benefits for eligible expenses incurred by you and any individual who meets CRA definition of financially dependent, which may include individuals not covered under Western's Health Care and Dental Plan (e.g. eldercare). The amount of credits remaining in your HCSA at any given time will be your account balance.

If you have a balance in the HCSA at the end of the calendar year, that amount will be carried forward to the next calendar year. Reimbursement will be first paid from the earlier year's credits. At the end of the second calendar year, tax laws require that any credits remaining from the previous year be forfeited.

As Canada Revenue Agency (CRA) decides what expenses are eligible under the HCSA, it is recommended that you access the CRA published list of expenses for the most up to date information. You may access this list by visiting the CRA eligible medical expense website.

An eligible expense is allocated to the plan year in which it is incurred. An eligible expense is incurred on the date the services are received or on the date supplies are purchased or rented. Therefore, eligible expenses incurred in one plan year may not be claimed against the plan credits allocated for the next plan year.

Eligible expenses may include, but are not limited to the following expenses:

- Drugs and medicines
- Vision care
- Deductibles and coinsurance amounts under both the Health Care and Dental plans and under any other medical or dental plans
- Practitioner services – fees for services of:
  - Acupuncturists
  - Chiropractors
  - Chiropodists/Podiatrists
  - Naturopaths
  - Nurses
  - Optometrists
  - Osteopaths
  - Physiotherapists
  - Practical nurses

» Life Insurance

An essential part of financial planning is creating provisions for your family and loved ones following your death. Life Insurance can ensure financial security to those who mean the most to you, such as your spouse, children and other beneficiaries. Western offers several different types of life insurance.

- Compulsory
- Life insurance on your life at two times your annual base salary (rounded to the next higher $1,000)
- Premium for the first $ 50,000* is paid by Western
- Employer paid premium is a taxable benefit
- No medical evidence is required

* Western provides a Sick Leave benefit that qualifies for a reduction in the EI premiums. Currently, a portion of the reduction (5/12) is used to pay $25,000 of the $50,000 of coverage.

- Optional
- You pay the premium based on your age, gender and smoking status
- No medical evidence is required if you apply within 31 days of first being eligible
- Additional life insurance on your life at 1/2, 1, 1½ or 2 times your annual base salary

- Optional
- You pay the premium
- No medical evidence is required if you apply within 31 days of each dependent first being eligible
- Spouse - $40,000
- Child - $10,000 on each eligible child

The maximum combined benefit for the Basic and Optional Life insurance on your life cannot exceed $500,000.

In the event of death by suicide, the Optional Life Insurance death payment (if the life benefit was in force for less than one consecutive year) will be lim (men)-12.3 hilh.2 (al)3.1 (ut)-129 (ned)-p1 (of)-1.2 ((m (m.1 (t)-1.1 (h
yTj[4(ur)-6.m 8.1 (m8 en)-12.3 en1 (of)-, ((m (m.base)-12.3 (on yd o23 ( )]TJ1 (h)-12.3

- You are considered, or would be considered eligible under the terms and conditions of Total Disability Waiver of Premiums benefit provision
- You make the request in writing

This Special Advance Payment cannot exceed 50% of the combined amount of your Basic and Optional Life benefit at the time of the request or $50,000 – whichever is less. There can be only one payment payable in a lump sum to you.

The eventual death claim will be reduced by the amount of the loan plus the interest to the date of death. The insurance provider must approve this benefit. If you receive a Special Advance Payment, the amount available for conversion is reduced by the amount of the special advance payment.

The Basic and Optional Life plans change in coverage when your basic annual salary is adjusted. If you are not actively at work, the change is effective the date you return to work.

Coverage will terminate on the earlier of one of the following:

Basic and Optional Life Insurance:

- End of the month you terminate your employment
- End of the month you retire
- Your Normal Retirement Date*
- On your death
- The date the plan is cancelled for any reason

Dependent Life-Spouse and Optional Spousal Life Insurance:

- End of the month you terminate your employment
- End of the month you retire
- Your Normal Retirement Date
- The date the plan is cancelled for any reason
- Spouse attains age 65(Optional Spousal Life Insurance only)

Dependent Life Insurance for Dependent Children:

- End of the month you terminate your employment
- End of the month you retire
- Your Normal Retirement Date
- The date the plan is cancelled for any reason

*$15,000 of life insurance is continued beyond your Normal Retirement Date, fully funded by Western.

If your coverage ceases or reduces on or before your Normal Retirement Date (NRD) for any reason other than your request, you may convert your existing group life insurance to an individual policy plan (up to a maximum of $200,000) with the insurance provider without proof of good health, provided you apply and pay your first monthly premium within 31 days of your coverage reducing or attainment of your NRD. During this 31-day period, the amount of life insurance eligible for conversion is continued without charge. To convert your group life insurance to a private policy, contact Human Resources at 519-661-2194. If the coverage ceases for your spouse for any reason other than your request, the spouse may convert their coverage. The conversion option does not extend to any coverage on dependent children.

» Long Term Disability Benefit

If you are approved and are in receipt of full Long Term Disability benefits, the following benefits are continued and you are not required to pay the premium/contribution:

- Health and Dental Care
- Basic Life Insurance
- Pension Plan

If you resume working on a gradual basis and are receiving income from the insurance provider and Western, you will be required to make your regular pension contribution based on the portion of pay received from Western. Western's pension contribution will be based on the total amount of yours and Western's contributions at the date of disability less any amounts paid by you.

You will be required to pay the premium to maintain any optional benefits unless the insurance provider approves a Life Waiver of Premiums. The optional benefits include:

- Optional Life Insurance
- Dependent Life Insurance
- Voluntary Personal Accident Insurance

Benefit payments will cease on the earliest of:

- On the date you cease to be totally disabled or partially d

- The date of any sign, symptom or medical consultation that led to the diagnosis of any type of cancer is within 90 days after the effective date of coverage

Critical Illness Benefits are not payable for a critical illness which is due to or results directly or indirectly from any of the following:

- Failure to seek or follow medical advice
- Intentionally self-inflicted injuries, suicide or attempted suicide
- Operating a vehicle while impaired by drugs, toxic substances or an alcohol level in excess of the legal limit
- Travel or flight in any kind of aircraft if you are a member of the aircraft crew; or if you are on the aircraft for purposes of instruction or training
- Participation in underwater diving, hang-gliding, parachuting, skydiving, or any form of motorized vehicle racing; or
- Cosmetic or elective surgery

Coverage will terminate on the earlier of one of the following:

- The end of the month in which you terminate your employment
- Your Normal Retirement Date
- Your Retirement Date
- The date the Critical Illness Benefit was paid; or
- The date the plan is cancelled for any reason

» Administrative Pension Plan

The University of Western Ontario Pension Plan for Members of the Administrative Staff (the Plan) can play an important role in your map to financial security at retirement. The Plan, along with government benefits, your personal savings and other sources of income are important elements of your journey to a financially secure retirement.

Your pension plan at Western is a defined contribution plan - a type of capital accumulation plan in which contributions are made to the plan by both you and Western. Income at retirement is determined by the contributions that are made to your individual account and the investment earnings that your money generates.

You decide how to invest your retirement account balance – made up of Western's contributions, your contributions and any investment earnings, including any gains or losses. The Plan provides you with a wide range of investment options to choose from to suit your investment goals. Each option comes with a different degree of risk and return and may be appropriate for different points in your career.

Your account balances are split between Member Details and Employer Details. You may allocate these retirement savings to any or all of the available funds. The Plan offers investment options across the three primary asset classes: Cash & Equivalents/Money Market, Fixed Income/Bonds and Equity/Stocks. Each asset class has different properties with respect to risk of loss, chance for growth and how investment return is generated. Before you select your investments, you may want to consider completing the Sun Life Asset Allocation tool online at sunlife.ca/western. It will help you develop an investment strategy based on the amount of risk you are willing to bear and help you consider:

- Your tolerance for negative returns
- Your investment objectives
- How much time you have to invest until you want to use the money

Sun Life provides support through licensed Investment Advice Specialists who are available to provide individual counseling on your Western Plan investments. There are also a variety of tools to support your decision-making. If you do not make an active choice for your retirement account, your money will be automatically invested in the Balanced Growth fund. This is not a recommendation for Balanced

MY BENEFITS –

» Definitions

Means the employee reports for work at his or her usual place of employment with the employer, or such other location as may be required, and is able to perform the Essential and Material Duties of his or her regular occupation on a permanent full-time and full-pay basis for a minimum of 25 hours per week, unless specified otherwise. If an employee is not required to report for work on a specified date, he or she will be considered to be Actively Employed if he or she is not disabled to the degree that he or she could not have reported for work at his or her usual place of employment and performed the Essentf1.1 (em)-1Lentllmplt her

Means treatment received outside of the covered person’s province of