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**THE FINE PRINT**

The information provided in this guide is for general information purposes only. It is not a contract, and it is not legal or other professional advice. If the information in this guide is different than what is in the official plan text, the plan text and any applicable legislation will govern in all cases.
Welcome to the
MacEwan Flexible Benefits Plan

At MacEwan University, we realize that not all employees have the same needs. That's why the flexible benefits plan is designed to fit a range of needs, preferences and lifestyles.

Employees can:

- Choose from multiple coverage options
- Make new selections each year as needs change
- Manage benefits with user-friendly online tools

Employees will also be able to make changes if they experience an eligible life event (change in marital status, children, etc.)

Who's covered?

New employees become eligible for flexible benefits plan coverage beginning on the first day of their employment. Please review your collective agreement or employment policy to confirm your benefit eligibility.

What's covered?

The flexible benefits plan provides a range of health and dental options together with comprehensive insurance coverage so that employees can make choices that support personal wellness and optimal health—whatever that means to each employee and their family.

The flexible benefits plan includes five main areas of coverage:

1. **Health care coverage**
   - Prescription drugs
   - Medical services and supplies
   - Vision and paramedical services

2. **Dental care coverage**
   - Basic services
   - Major services
   - Orthodontic care

3. **Insurance coverage**
   - Life insurance
   - Disability insurance
   - Critical illness insurance
   - Travel insurance

4. **Health Spending Account (HSA) and Wellness Spending Account**

5. **Employee and Family Assistance Program (EFAP)**

In this plan booklet, you will find:

- A summary of what is covered under each option for each benefit.
- Key questions to ask yourself while choosing coverage.
- Instructions for accessing the benefits website.
- A detailed checklist to help you prepare to enroll.

It’s important to learn how the plan works to make the most of it. This booklet is just one of many resources available to help you learn about and enroll in the plan. For more resources, visit myportal.macewan.ca and review the Pay and Benefits pages.

Questions?

For questions about the flexible benefits plan after reading this Plan Summary Booklet, please contact:

<table>
<thead>
<tr>
<th>Organization</th>
<th>Phone Number</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>MacEwan University Human Resources</td>
<td>780-497-5434</td>
<td><a href="mailto:HRBenefits@macewan.ca">HRBenefits@macewan.ca</a></td>
</tr>
<tr>
<td>Great-West Life Benefits Administration Services</td>
<td>1-844-403-4179</td>
<td></td>
</tr>
<tr>
<td>Claim Inquiries</td>
<td>1-800-957-9777</td>
<td></td>
</tr>
</tbody>
</table>
Most benefits have options to choose from

- Some provide basic coverage; others provide more extensive coverage.
- The options are designed to meet the varying needs of MacEwan employees.

Some benefits are optional

Employees may wish to purchase additional coverage:

- Optional life insurance for you and your family
- Optional accident insurance for you and your family
- Optional critical illness insurance for you and your family.

Each option has a price tag (or cost)

- The total cost of your benefits depends on the options you choose.
- Comprehensive and Enhanced coverage costs more than Core or Basic coverage.

MacEwan gives employees a set amount of flex credits to help pay for benefits

- Employees receive enough flex credits to select Core or Basic coverage at no cost for both health and dental care.
- Comprehensive and Enhanced health and dental coverage require employee contributions in addition to flex credits.
- MacEwan also provides $550 in credits to deposit into a Health Spending Account (HSA).
Employees will pay for some coverage through payroll deductions

- If Comprehensive or Enhanced coverage is selected, the employee will pay the difference through regular payroll deductions and can choose to be reimbursed through the HSA.
- If Core or Basic coverage is selected, employees can allocate remaining credits to their (HSA) or Wellness Spending Account.
- Employees pay the cost of long-term disability insurance and optional insurances with payroll deductions.
- **Premiums are subject to change effective January 1 each year.**

Employees choose coverage options through the online enrollment tool

- Employees will use the online enrollment tool to make selections each year during re-enrollment or when they have an eligible life event.

Employees can change coverage options during the year if they have a life event

- Between enrollment periods, employees can make changes only if they experience an eligible life event. These include:
  - Marriage or reaching 12 months within a common-law relationship
  - Divorce, legal separation or the end of a common-law relationship
  - Spouse gains or loses benefits coverage under their benefits plan
  - Loss of a spouse or dependent
  - Birth or adoption of a child (includes adding a dependent)
  - Child becomes or is no longer eligible for coverage.
- Employees must make changes using the online enrollment tool within 31 days of the life event. If the life changing event is not made within 31 days, the change will not take effect until the following January 1.
Paying for coverage

MacEwan contributes to the cost of your flexible benefits plan. The university pays 100 per cent for basic life insurance, basic AD&D insurance and short-term disability insurance.

Employees pay 100 per cent for optional life insurance, optional AD&D insurance, optional critical illness insurance and long-term disability insurance.

The cost of health and dental coverage depends on which options you choose.

- If you select Core or Basic coverage, you will have leftover flex credits to deposit to the Health Spending Account or the Wellness Spending Account.
- If you select Comprehensive or Enhanced coverage, you will contribute to the cost of premiums through payroll deductions.

MacEwan allocates $550 to employees’ Health Spending Accounts.

Did you know?

The Health Spending Account can be used to cover health and dental premiums that are paid through payroll deductions. The Benefits Premium Report can be found in PeopleSoft Employee Self-Service.

Tax implications

Any amount that MacEwan pays for an employee’s benefits, as identified in the list below, is added to the employee’s taxable income.

**Taxable benefits**

- Basic life insurance
- Basic AD&D insurance
- Short-term disability insurance premiums
- Flex credits you deposit to the Wellness Spending Account (will be taxed in the year the credits are spent)

**Non-taxable benefits**

- Short- and long-term disability insurance — any short- or long-term disability benefit paid out to an employee would be on a non-taxable basis
- Flex credits you deposit to the Health Spending Account
Flexible benefits at a glance

Employees choose one of the following coverage categories for health and dental care coverage. If you choose to not enroll any eligible dependents at the time of the annual enrollment, you will need to wait until the next enrollment to change your coverage category.

<table>
<thead>
<tr>
<th>Coverage Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Single</strong></td>
<td>Coverage is for you only. If you have any dependents you must choose couple or family.</td>
</tr>
<tr>
<td>(employee only)</td>
<td></td>
</tr>
<tr>
<td><strong>Employee + 1</strong></td>
<td>If you select “Employee + 1” coverage, you will be covering yourself and one other dependent.</td>
</tr>
<tr>
<td>(employee + one dependent)</td>
<td></td>
</tr>
<tr>
<td><strong>Family</strong></td>
<td>If you select “family” coverage, you are choosing to cover yourself and two or more dependents.</td>
</tr>
<tr>
<td>(employee + two or more dependents)</td>
<td></td>
</tr>
</tbody>
</table>

Who is eligible for coverage as a **dependent**?

**Spouse**

A person who is legally married to you or a partner who has continuously resided with you for not less than 12 consecutive months.

**Coordination of Benefits**

You and your spouse should first submit your own claims through your own group plan. Claims for dependent children should be submitted to the plan of the parent who has the earlier birth date in the calendar year (the year of birth is not considered.) Note, benefits for you or a dependent will be directly reduced by any amount payable under a government plan (ex. Alberta Seniors Benefit Plan).

**Dependent child**

A natural, adopted or step child who is dependent upon you for financial care and support. The child must be unmarried, under 21 years of age and working 30 hours per week or less. Children between 21 and 25 years of age who are attending a post-secondary educational institution are eligible for continued coverage as dependents.
**Health care coverage**

**Employees can choose from four options for health care coverage.**

The chosen option applies to all three types of health care coverage: prescription drugs, paramedical services and other medical. At re-enrollment, employees can move up as many coverage levels as they want (e.g., from Core to Comprehensive), but can only move down one coverage level per year (e.g., from Comprehensive to Basic). If you have a life event, you can choose any coverage level.

<table>
<thead>
<tr>
<th></th>
<th>CORE</th>
<th>BASIC</th>
<th>COMPREHENSIVE</th>
<th>ENHANCED</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PRESCRIPTION DRUGS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coinsurance</td>
<td>50%</td>
<td>80%</td>
<td>90%</td>
<td>100%</td>
</tr>
<tr>
<td>Generic drug substitution</td>
<td>Yes (low cost alternative)</td>
<td>Yes (low cost alternative)</td>
<td>Yes (low cost alternative)</td>
<td>Yes (low cost alternative)</td>
</tr>
<tr>
<td>Dispensing fee maximum</td>
<td>$6</td>
<td>$8</td>
<td>$10</td>
<td>$12</td>
</tr>
<tr>
<td>Out-of-pocket maximum per year</td>
<td>$2,000</td>
<td>$1,500</td>
<td>$1,000</td>
<td>$0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>PARAMEDICAL SERVICES - PER YEAR MAXIMUMS</strong></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Coinsurance</td>
<td>50%</td>
<td>70%</td>
<td>80%</td>
<td>90%</td>
</tr>
<tr>
<td>Physiotherapy</td>
<td>$500</td>
<td>$1,500</td>
<td>$2,500</td>
<td>$3,500</td>
</tr>
<tr>
<td>Psychology</td>
<td>$250</td>
<td>$500</td>
<td>$1,000</td>
<td>$2,000</td>
</tr>
<tr>
<td>All others</td>
<td>$250 combined max</td>
<td>$500 combined max</td>
<td>$750 combined max</td>
<td>$1,000 combined max</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>OTHER MEDICAL</strong></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Coinsurance – Supplies/services</td>
<td>50%</td>
<td>70%</td>
<td>80%</td>
<td>90%</td>
</tr>
<tr>
<td>Eye exams/vision</td>
<td>None</td>
<td>$100/24 months</td>
<td>$150/24 months</td>
<td>$250/24 months</td>
</tr>
<tr>
<td>Hospital</td>
<td>Semi-private ($100/day)</td>
<td>Semi-private ($150/day)</td>
<td>Semi-private/Private ($150/day)</td>
<td>Semi-private/Private ($200/day)</td>
</tr>
</tbody>
</table>
What do the **terms** mean...

| **Coinsurance** | MacEwan shares the cost of the flexible benefits plan with employees. Coinsurance describes the percentage of the claim that is covered by the flexible benefits plan. For example, if you choose Comprehensive health care coverage, prescription drugs are covered at 90 per cent. If a drug costs $10, the flexible benefits plan covers $9 and you pay the remaining $1. |
| **Out-of-pocket maximum** | An “out-of-pocket maximum” sets a limit to how much an employee would need to pay for medications per benefit year. For example, with Basic coverage, this limit is $1,500. With Enhanced coverage, there is no out-of-pocket maximum. |
| **Generic drug substitutions** | Generic drugs are developed after the patent expires on the equivalent brand name drug. All generic drugs must have the same active ingredients, dosage and delivery as the equivalent brand name drug. The plan will cover the cost up to that of the generic substitution, should one be available. |
| **Dispensing fee** | Pharmacists receive a dispensing fee for filling a prescription. Different pharmacies charge a different fee. To keep plan costs in check, there is a limit to the dispensing fee covered under the plan. You can save by shopping around and filling prescriptions in pharmacies with lower dispensing fees. |
| **Paramedical services** | Paramedical services include:  
- Acupuncture  
- Athletic Therapy  
- Audiology  
- Chiropractic  
- Dietician Services  
- Massage Therapy  
- Osteopathy  
- Naturopathy  
- Physiotherapy  
- Podiatry  
- Psychology  
- Social Worker Services  
- Speech Therapy |
Four ways you can save on prescription drug costs

You play a key role in seeking good value for your benefits—meaning you save money, plan costs remain in check, and MacEwan can continue to offer great options for years to come. You can:

1. Get a trial supply
   If you are prescribed a new long-term medication, choose a trial supply first to ensure the drug works for you and there are no adverse side effects.

2. Request a 90-day supply for maintenance medication
   This can help you save on pharmacy dispensing fees.

3. Choose generic drugs over brand names
   Generic drugs offer significant cost savings and have the same active ingredients as the brand name versions.

4. Shop around
   Choosing a pharmacy with lower dispensing fees saves you money every time you fill a prescription.

Which health care option to choose?
Consider...

1. How many and what kind of health care expenses do you and your family typically have?
   Employees with only a few health care expenses may find that a lower coverage option will suit their needs.

2. How many prescriptions do you and your family typically have filled in a year?
   Estimate how many prescriptions you and your family will have in the coming year and how much the total dispensing fees will be. Ask your pharmacist for a breakdown of your current costs.

3. How much will you and your family spend on paramedical practitioners in the coming year?
   Estimate how much you and your family will spend on paramedical practitioners. Calculate what your out-of-pocket costs would be under each option, and compare it to the cost of coverage.

4. Does anyone in your family need glasses or contact lenses?
   Determine how many pairs of glasses or contact lenses you and your family will need over the plan year and compare it to the cost of coverage.
Employees can choose from four options for dental care coverage.

<table>
<thead>
<tr>
<th></th>
<th>CORE</th>
<th>BASIC</th>
<th>COMPREHENSIVE</th>
<th>ENHANCED</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COINSURANCE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basic</td>
<td>50%</td>
<td>80%</td>
<td>90%</td>
<td>100%</td>
</tr>
<tr>
<td>Major</td>
<td>50%</td>
<td>50%</td>
<td>65%</td>
<td>80%</td>
</tr>
<tr>
<td>Orthodontic</td>
<td>50% (child only)</td>
<td>50% (child only)</td>
<td>50% (child only)</td>
<td>50% (adult + child)</td>
</tr>
<tr>
<td><strong>MAXIMUMS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basic</td>
<td>$1,000 combined max</td>
<td>$1,500 combined max</td>
<td>$2,000 combined max</td>
<td>$2,500 combined max</td>
</tr>
<tr>
<td>Major</td>
<td>$1,500 per lifetime</td>
<td>$2,500 per lifetime</td>
<td>$3,500 per lifetime</td>
<td>$4,500 per lifetime</td>
</tr>
<tr>
<td>Orthodontic</td>
<td>$1,500 per lifetime</td>
<td>$2,500 per lifetime</td>
<td>$3,500 per lifetime</td>
<td>$4,500 per lifetime</td>
</tr>
<tr>
<td><strong>COMPLETE EXAMINATIONS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 every 36 months</td>
<td>1 every 36 months</td>
<td>1 every 24 months</td>
<td>1 every 24 months</td>
</tr>
<tr>
<td><strong>RECALL EXAMINATIONS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 every 9 months</td>
<td>1 every 9 months</td>
<td>1 every 9 months</td>
<td>1 every 6 months</td>
</tr>
<tr>
<td><strong>FLUORIDE APPLIANCES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 every 6 months</td>
<td>1 every 6 months</td>
<td>1 every 6 months</td>
<td>1 every 6 months</td>
</tr>
<tr>
<td><strong>SCALING</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6 units every 12 months</td>
<td>6 units every 12 months</td>
<td>6 units every 12 months</td>
<td>8 units every 12 months</td>
</tr>
</tbody>
</table>
What do the terms mean…

<table>
<thead>
<tr>
<th>Basic services</th>
<th>Includes: Diagnostic services (complete oral exams), X-rays, tests and laboratory reports, preventative services (polishing and scaling), minor restorative services (fillings), endodontic services, periodontal services, denture maintenance, oral surgery, adjunctive services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major services</td>
<td>Includes: Crowns and onlays, dentures and bridgework, denture-related surgery, appliance maintenance</td>
</tr>
<tr>
<td>Complete examination</td>
<td>Includes: Complete evaluation of all hard and soft tissues, cancer exam and periodontal screening or comprehensive probing</td>
</tr>
<tr>
<td>Recall examination</td>
<td>Includes: Periodontal screening or comprehensive probing</td>
</tr>
</tbody>
</table>

Which dental care option to choose? Consider…

1. How much do you and your family expect to spend on dental services?
   Estimate how much you expect to spend on dental services over the next year.

2. Does anyone in your family need major dental work such as a crown or dentures?
   If you know you and your family will need coverage for major dental services such as crowns or dentures, it’s a good idea to plan for them in advance.

3. Does anyone in your family need braces?
   Orthodontic work (braces) for children is covered under all four options. However, if you and/or your spouse need orthodontic work, consider selecting Enhanced coverage since it’s the only option that provides adult coverage.

Dental fee guide

MacEwan University’s dental coverage is similar to many other plans as the dental plan pays based on the fee guide that the Alberta Dental Association and College has put in place. The plan will cover costs up to the amount in the fee guide for the current year. The same process applies for the coordination of benefit claims in that if the first carrier paid the fee guide amount, then the second plan does not reimburse any additional amount. This could result in an out of pocket expense.

<table>
<thead>
<tr>
<th>CO-INSURANCE</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENEFIT PERIOD</td>
<td>Unlimited; however, members must maintain their provincial healthcare coverage to be eligible for emergency travel assistance with Great-West Life. Thus, the trip limitation is equal to that specified by the provincial benefit programs.</td>
</tr>
<tr>
<td>MAXIMUM COVERAGE</td>
<td>Unlimited</td>
</tr>
</tbody>
</table>
Insurance coverage

Sometimes illness and injury affect our employees and their families. That’s why the flexible benefits plan provides basic and optional insurance protection for:

- Employee life insurance
- Optional life insurance (employee, spouse and child)
- Accidental death and dismemberment (AD&D) insurance
- Disability insurance
- Critical illness insurance
- Travel insurance
Life insurance

**Basic** life insurance (employer paid)

MacEwan provides basic life insurance — employees are covered for 1x their annual earnings, up to a maximum of $500,000.

**Optional** life insurance (employee paid)

Employees can purchase optional life insurance for themselves, their spouse and their children. The cost is based on the selected coverage amount and the individual’s age, gender and smoking status. Rates are based on per $1,000 of coverage. Evidence of insurability (proof of good health) is required to purchase optional life insurance for yourself or your spouse but is not required to purchase optional life insurance for your child.

<table>
<thead>
<tr>
<th>COVERAGE</th>
<th>EMPLOYEE</th>
<th>SPOUSE</th>
<th>CHILD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Units of $10,000</td>
<td>Units of $10,000</td>
<td>Units of $10,000</td>
<td></td>
</tr>
<tr>
<td>MAXIMUM</td>
<td>$300,000</td>
<td>$300,000</td>
<td>$50,000</td>
</tr>
</tbody>
</table>

Which **life insurance option** to choose? Consider…

1. **How much life insurance coverage do you need?**
   - If you are single and have very little debt, basic life insurance coverage may be all you need. If you have dependents or significant debt such as a mortgage, and the basic life insurance (1x your earnings) is not enough for your needs, you may want to purchase optional life insurance protection.

2. **Are you in good health now?**
   - If you are in good health now, you may want to take advantage of optional life insurance. Once you are approved for optional life insurance coverage, you can keep it for as long as you are eligible for the MacEwan flexible benefits plan, even if your health changes.

3. **Do you depend on your spouse for part of your household income?**
   - Will the loss of your spouse’s income cause financial hardship? Will you need to pay more for childcare or household maintenance if your spouse dies? Your spouse may have coverage through their personal or employer plan. If so, how does the cost of your spouse’s existing coverage compare with the cost of coverage under the flexible benefits plan?
Choosing a beneficiary is important!

• You can name a person, an institution or a charity.

• You will be asked to declare your beneficiary details online while enrolling. At the end of the enrollment process, you will be presented with your beneficiary declaration form. Your beneficiary selection is not valid until you sign this form and submit it to Great-West Life at the address indicated on the form.

• Great-West Life will conduct one follow-up with you and if the form is not submitted, your estate will be assigned as your beneficiary.

• By designating a beneficiary, the plan assets can be transferred directly to them, tax-free, upon the employee’s death.

If no beneficiary is named, any benefits will be paid to the estate and taxes will apply.
Accidental death and dismemberment (AD&D) insurance

**Basic AD&D insurance (employer paid)**

MacEwan provides basic AD&D insurance. Employees are covered for 1x their annual earnings, up to a maximum of $300,000.

**Optional AD&D insurance (employee paid)**

Employees can purchase optional AD&D insurance for themselves, their spouse and their children.

<table>
<thead>
<tr>
<th></th>
<th>EMPLOYEE</th>
<th>SPOUSE</th>
<th>CHILD</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COVERAGE</strong></td>
<td>Units of $10,000</td>
<td>Units of $10,000</td>
<td>Units of $10,000</td>
</tr>
<tr>
<td><strong>MAXIMUM</strong></td>
<td>$300,000</td>
<td>$300,000</td>
<td>$50,000</td>
</tr>
</tbody>
</table>

**Important to know...**

**Accidental death**
- Benefits are paid to your beneficiary in addition to any life insurance you may have.
- Death must be accidental.

**Accidental dismemberment**
- Benefits are paid to you according to the SSQ AD&D Schedule of Loss.
- Injury must be accidental.
Which **AD&D insurance option** to choose? Consider…

1. **Is life insurance enough?**
   AD&D insurance is not a replacement for life insurance. AD&D insurance is paid to your beneficiary only if you die **because of an accident**. Accident insurance also pays you a benefit while you are still living if you are accidentally injured. Life insurance does not.

2. **Does anyone in your family travel often by car, or participate in high-risk sports or activities?**
   You might want to buy a higher level of accident insurance if you or your family members could be at a greater risk of accidental injury or death.

3. **Do you have other accident insurance coverage?**
   If you already have accident insurance through your spouse’s plan or a private plan, compare the cost of that coverage to the cost under the flexible benefits plan.
### Disability insurance

#### Short-term disability (employer paid)

<table>
<thead>
<tr>
<th>Benefit Amount</th>
<th>60% of weekly earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Maximum</td>
<td>Greater of $2,000 and EI*</td>
</tr>
<tr>
<td>Qualifying Period</td>
<td>1 week</td>
</tr>
<tr>
<td>Benefit Duration</td>
<td>16 weeks</td>
</tr>
</tbody>
</table>

*For more information on the most recent EI maximum, visit the Service Canada website at [canada.ca](http://canada.ca) – Employment Insurance benefits.

#### Long-term disability (employee paid)

<table>
<thead>
<tr>
<th>Benefit Amount</th>
<th>70% of the first $2,000 plus 50% of any excess amount; 1% cost of living adjustment annually</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Maximum</td>
<td>$10,000</td>
</tr>
<tr>
<td>Elimination Period</td>
<td>17 weeks</td>
</tr>
<tr>
<td>Recurrent Disability</td>
<td>6 months for same or related condition</td>
</tr>
<tr>
<td>Elimination Period</td>
<td>2 years plus elimination period; own occupation</td>
</tr>
</tbody>
</table>

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**Important to know…**

**Payment**

- Short-term disability benefits are paid for 16 weeks after a one week qualifying period, and are equal to 60 per cent of weekly earnings.
- Long-term disability benefits begin after an employee has been unable to work for 17 weeks, and are reduced by disability amounts received from other plans, such as the Canada/Quebec Pension Plan.
  - For the first two years you are unable to work, you will be considered disabled if you cannot perform the duties of your own occupation.
  - After two years, you will be considered disabled only if you cannot perform the duties of any occupation in the province where you work or live for which you are (or could become) qualified through education, training or experience.

**Taxation**

- Short-term disability: MacEwan pays the premium for short-term disability benefits, which is added to your taxable income. Any short-term disability benefit paid out to an employee would be tax-free.
- Long-term disability: Since employees pay the entire cost with payroll deductions, monthly long-term disability benefits would be tax-free.
Employees can purchase optional critical illness insurance, which provides a lump-sum payment if you are diagnosed with a covered critical illness or condition (e.g., cancer, stroke).

Employees can purchase optional critical illness insurance for themselves, their spouse and their children.

<table>
<thead>
<tr>
<th>EMPLOYEE</th>
<th>SPOUSE</th>
<th>CHILD</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVERAGE</td>
<td>Units of $10,000</td>
<td>Units of $10,000, $20,000 or $25,000</td>
</tr>
<tr>
<td>MAXIMUM</td>
<td>$300,000</td>
<td>$300,000</td>
</tr>
</tbody>
</table>

The cost of this coverage is based on the selected coverage amount and the individual’s age, gender and smoking status. Proof of good health is only required if purchasing more than $50,000 of coverage for yourself or your spouse.

What to consider when choosing optional critical illness coverage?

1. **Are you at risk for any of the covered illnesses?**
   We all know someone directly affected by serious illness. While you may remain healthy, there’s no guarantee. Family history may be cause for a higher risk.

2. **Do you need this extra coverage on top of other insurance benefits?**
   Even though you have LTD coverage under the flexible benefits plan, it doesn’t pay 100 per cent of your pre-disability salary. If you are off work for an extended period due to an illness, you may need extra money to cover expenses such as bills, loans, medical costs or a mortgage.
Health Spending Account (HSA)

MacEwan provides employees with an additional $550 that is allocated towards the Health Spending Account (HSA) to help pay for eligible health and dental expenses not covered under the flexible benefits plan or any other plan.

If you choose Core or Basic coverage, you will have leftover flex credits that can be added to the $550 HSA or allocated to your Wellness Spending Account.

HSA credits are available January 1 each year and are paid at any time throughout the year after you submit an eligible claim. Any amount in the HSA must be used within two years. Employees can be reimbursed through the HSA only up to the maximum amount in the account and must submit all claims within 90 days of the end of each plan year.

Eligible claims

You can use the HSA to pay for the same expenses you can claim for the Medical Expense Tax Credit as defined in the Income Tax Act. The entire list of eligible expenses for the HSA is available on the Canada Revenue Agency (CRA) website. This list includes:

- Health and dental premiums paid through payroll deductions
- Prescription drug dispensing fees
- Co-payment for all flexible benefits plan eligible expenses (i.e., the percentage not covered by the MacEwan benefits plan)
- All fees above the plan maximums — including vision care and laser eye surgery, paramedical and dental fees.

Eligible dependents

Employees can submit claims to the HSA for a broad range of dependents, including spouse, children, grandchildren, parent or sibling, provided they are dependent on you for support and live in Canada.

For more information about eligible dependents, visit the CRA website at: www.cra-arc.gc.ca/medical.
Wellness Spending Account

Employees who chose Core or Basic health and dental coverage have the option of allocating leftover flex credits to the Wellness Spending Account. The Wellness Spending Account can help pay for a broader range of expenses not covered by the flexible benefits plan or HSA, including fitness club memberships, smoking cessation products and programs, weight loss programs, nutritional counselling and childcare expenses.

For the complete list of expenses that are covered by your Wellness Spending Account, visit the Wellness section of the Pay and Benefits pages on myportal.macewan.ca

The flex credits deposited to the Wellness Spending Account will be added to your taxable income for federal income tax purposes the year they are spent. Any amount in the Wellness Spending Account must be used within two years.

Employee and Family Assistance Program (EFAP)

The Employee and Family Assistance Program (EFAP) is a free, confidential service that connects you and your eligible family members to a network of dedicated professionals—24/7/365.

Here are some of the Shepell EFAP services that could help you take a first step toward better health and wellbeing:

- Counselling, including: stress management, resiliency, anxiety, depression, parenting, couple and relationship support, communication, conflict resolution
- WorkLife Services, including: childcare, eldercare, legal support, financial support, nutrition support, naturopathy, Health Coaching

You can access confidential support in a way that is most suited to your preferences, comfort level and lifestyle, including face-to-face, online chat, websites and videos.

How to get in touch with the EFAP

Call: 1-800-387-4765
Go online: www.workhealthlife.com
Enrollment checklist

You will use the online enrollment tool at www.flex.gwl.ca/MacEwan to join the plan for the first time, and to make any changes during the regular re-enrollment periods or after an eligible life event.

**Before enrolling, employees should:**
- ✔️ Read all of the flexible benefits plan materials.
- ✔️ Discuss coverage options with your family members to determine health care, dental care, life insurance and other needs.
- ✔️ Review your spouse’s benefits information and discuss the best way to coordinate benefits between the two plans.
- ✔️ Know the birthdates of all dependents. You will need to enter the names and birthdates of all eligible dependents that you enroll in the plan. For proper claims processing, please enter the correct birthdates and the full legal names for your dependents (do not enter nicknames).
- ✔️ Choose beneficiaries for life, AD&D and critical illness insurance. You will need to assign beneficiaries when you first join the flexible benefits plan.
- ✔️ Ask questions. If you have questions about the plan or your options after reading this guide and other materials, please contact:

  Great-West Life Benefits Administration Services
  ✆ 1-844-403-4179

**After enrolling, employees should:**
- ✔️ Register on Great-West Life’s GroupNet for Plan Members at http://gwl.greatwestlife.com/MyRegistration and/or download the GroupNet mobile app where you will be able to:
  - View your profile and benefits coverage
  - Print additional benefit cards
  - Sign up for direct deposit
  - Access claim forms
  - Submit claims online
  - View claim history
- ✔️ Check the mail for your ID card, which includes: Plan#50175, Plan name: MacEwan University and Member ID: your employee ID.

  Great-West Life Benefits Claim Inquiries
  ✆ 1-800-957-9777
Be sure to complete and submit all your forms.

Depending on your choices, you may need to fill out additional forms to complete your enrollment in the flexible benefits plan. The online enrollment tool will prompt you to download any required forms. Make sure you return these forms to the insurer to complete your enrollment.