# TOWN OF AMHERSTBURG



**POLICY NO.:** H00 – Group Health Insurance

**Plans** 

SOURCE: SECTION:

**DATE ENACTED:** Draft April 1, 2009

**DATE OF AMENDMENT:** 

# **SUBJECT:**

# **Group Health Insurance Plans**

#### **INTENT:**

To provide employees with comprehensive group insurance coverage.

### **SCOPE:**

This policy applies to all employees.

#### PROCEDURE / IMPLEMENTATION:

#### **GROUP HEALTH INSURANCE PLANS**

- 1. The Employer agrees to pay one hundred percent (100%) of the premium costs for the group health benefits listed herein. In so doing, coverage will be provided for: all employees, their spouses and/or eligible dependents (including overage dependents as defined by Green Shield); employees receiving disability benefits (including, but not limited to STD, LTD, OMERS Disability, and/or CPP Disability); retirees as defined in the Retirement Policy, their spouse and/or their eligible dependents and; in the event of the death of an active employee or retiree their surviving spouse and/or eligible dependents. The Plan will include the following:
  - a) The Employer Health Tax
  - b) Green Shield Supplementary Plan for Semi Private Hospital Care
  - c) Green Shield Apoth-O-Care Drug Plan #3 (Produce Selection) with prescription co-payment of one dollar (\$1.00)
  - d) Green Shield Dental Plan 13 including Orthodontic coverage to a maximum of two thousand dollars (\$2,000.00) and Bridges and Crowns to a

- maximum of one thousand dollars (\$1,000.00) lifetime at fifty percent (50%)(Town pays half and employee pays half for each procedure).
- e) Green Shield Vision Care Plan E providing two hundred and fifty dollars (\$250.00) every twenty four (24) months or two hundred and fifty dollars (\$250.00) every twenty four (24) months towards the cost of laser eye surgery.
- f) Green Shield Audio Plan H 1 including Hearing Aids
- g) Green Shield Extended Health Services Plan including Out of Province Travel Assistance (Plan QK for active employees and Plan QJ for retirees); Private Nursing Care (with an annual cap for private duty nursing care of fifteen thousand dollars (\$15,000.00); Chiropractic therapy and; Homeopathic Treatment Programs; Massage therapy one hundred and fifty dollars per year (\$150.00/year) [being thirty dollars per visit (\$30.00/visit) for five visits with a registered massage therapist]; Orthotics four hundred dollars (\$400.00) every thirty-six (36) months.
- 2. Retirees, for the purpose of this clause, shall be defined as former full-time employees who had at least two (10) years of full time service with the Employer who are eligible for a pension under the OMERS Plan; who are eligible for coverage under the group health insurance plans and; who have resigned their employment and meet the criteria in the Retirement Policy:
  - i) at age sixty-five (65) or after
  - ii) before age sixty-five (65) but on a pension from OMERS
  - by reason of long term disability, covered under the LTD Plan (outlined in this Agreement) and/or the OMERS Disability Plan
- 3. Benefits on Lay-off: The employer agrees to pay one hundred percent (100%) of the premium costs to provide benefit coverage as defined hereafter for all laid off employees. The Corporation will continue to provide benefits (in accordance with the terms and provisions of this Agreement) for all laid off employees at a rate of one (1) month for every year of service until the affected employee gains other permanent employment or for a period not to exceed one (1) year following the effective day of the layoff whichever is less). In order to qualify for such entitlement, an employee must have at least five (5) years service with the Corporation.