

**THE MILLWRIGHT REGIONAL COUNCIL OF ONTARIO
BENEFIT TRUST**

JANUARY 2010 – BENEFIT PLANS FOR ACTIVE MEMBERS

LETTER FROM THE TRUSTEES

January 2010

Dear Active Member:

We take pleasure in introducing the updated 2010 Active Member Booklet which outlines your Benefit Plans and incorporates all the benefit improvements and changes that have taken place since the January 2009 booklet was distributed.

Effective September 2, 1969 the Millwright District Council of Ontario together with The Association of Millwrighting Contractors of Ontario, established the Trust Funds that provide benefits to eligible Members.

The Funds are controlled by a Board of Trustees consisting of representatives appointed by the Millwright Regional Council (formerly District Council) of Ontario and representatives appointed by the Millwrighting Contractors of Ontario. The duties, responsibilities, and authority of the Trustees are set forth in the Trust Agreements which established and govern the Funds. Copies of the Trust Agreements are available for your inspection at the office of the Plan Administrator.

The benefits provided by the Millwright Plans are funded by contributions made by participating employers, according to the Collective Agreements. The contributions are paid into the Trust Funds and invested by professional investment managers.

We are proud of the Benefit Plans that have been developed and maintained for the Members. The Welfare, LAP and SUB Plans have been designed to provide comprehensive medical and income protection from the time a person joins the Millwright Union in Ontario up to and including his/her retirement years.

The Pension Plan is intended to provide retirement and other benefits to eligible Members and their beneficiaries under the terms of the Plan. Your Pension Plan is intended to supplement the benefits provided under the Canada Pension Plan and the Old Age Security Act.

The Millwright Benefit Plans are of great importance to you. We urge you to read this booklet carefully and share it with your family. Your participation in these Plans will bring greater peace of mind and an increased feeling of security to you and your family.

Your benefits may be modified after the effective date of this booklet. You will receive written notification of any changes made to your benefit plans. The notification will supplement this booklet and should be kept with this booklet in a safe place. Copies of this booklet and all notifications are available in the Member's area at www.millwrightsontario.com.

Yours very truly,

THE BOARD OF TRUSTEES

Employer Trustees

Larry Brokenshire
Robert LeChien
Denis Magne

Union Trustees

Ian McIsaac
Ed Spence
Daniel Trudel

IMPORTANT INFORMATION REGARDING YOUR RESPONSIBILITIES

The Trustees of the Millwright Plan Trust Fund continually try to ensure that you are familiar with the benefit plans coverage, conditions, and limitations. However, the following is **your responsibility**:

- Enrol in the Millwright Benefit Plans. When you become a Member or rejoin a Local Union that participates in the Millwright Benefit Plans, **it is essential that you fully complete and have correctly witnessed a Member Information Card (MIC) for the Welfare Plan and an MIC for the Pension Plan.**

The completed MICs serve several important purposes. They confirm that you are a Member of a Participating Local Union and are a Member of the Plan(s). In addition, they provide your Plan Administrator with the personal data and beneficiary designation(s) required to administer your benefits within the guidelines of the Millwright Benefit Plans.

- Complete the Coordination of Benefits (COB) section of the MIC if you or any of your dependents have insurance coverage elsewhere. If your Spouse has insurance coverage for herself/himself, you and/or any dependent children, the details must be given to the Plan Administrator. COB ensures that you and your family receive maximum reimbursement of the medical and dental expenses you incur. Failure to submit the COB information or to provide coordination of benefits information on the MIC and health and dental claim forms is a serious matter that could result in loss of coverage for you and your dependents. For more information, refer to the Coordination of Benefits section of this booklet.
- Advise the Plan Administrator of all changes to your status. You must file a Member Information Change Form if any of the following occur:
 - a) Marital status and/or name change
 - b) Addition or deletion of dependents
 - c) Beneficiary update
 - d) Spouse update
 - e) Address change*
 - f) Changes to your Spouse's insurance
 - g) if you receive a document from the Plan Administrator and you notice an error in any of your information, such as your date of birth or name

* Address changes can also be made through your Local Union by letter or phone upon full identification.

- When your coverage under this Plan terminates for any reason other than retirement, you have the option to convert your life insurance and/or the dependent life for your Spouse to an individual life insurance policy without medical examination. This is referred to as the **Conversion Privilege**.

To take advantage of this option, it is your responsibility to contact the Plan Administrator as soon as possible because the required application form and the initial premium payment must be submitted to the Insurance Company within 31 days of the date your benefit coverage under this Plan terminates. (For example, if your insurance coverage terminates on the last day of February, to convert the life insurance the Insurance Company must receive the required application and premium by March 31st.) For more information, refer to the Conversion Privilege sections of this booklet.

- When your health and dental coverage under this Plan terminates, or your dependents are no longer eligible for this coverage, you and/or your dependents have the option to convert to individual health and dental coverage with no medical examination or questionnaire required. This option is available for 60 days from the date your and/or your dependents coverage terminates. If you would like more information, please call the Insurance Company at 1-877-268-3763.

GENERAL DEFINITIONS

Participating Local Union means a Local Union affiliated with the Millwright Regional Council of Ontario.

Member means a person who (i) is a member of a Participating Local Union for whom contributions are received by the Trust Fund(s) in accordance with the Collective Agreement(s) and (ii) resides in Canada.

Contributing Employer means any employer bound by a Collective Agreement or memorandum of understanding with the Union that makes contributions to the Millwright Regional Council of Ontario Benefit Trust Funds.

Eligible Dependents for Welfare Plan Benefits

1. Your Spouse (legal or common law*)

- while married to you as a result of a valid civil or religious ceremony, providing that the relationship includes continuous cohabitation and public representation of married status.
- Dependent spouse **shall not** include a person separated or divorced from the Member whether or not there is a court order or separation agreement calling for the Member to provide insurance for his/her former spouse.

*The common law Spouse eligibility rules for dental, major medical and dependent life insurance are as follows:

- i. For a Member who is currently in benefit, spousal insurance for a common-law spouse (not identified previously) will become effective 12 months from the date a Member Information Card (MIC), identifying the common-law spouse, is received by the Plan Administrator.
- ii. For a Member who is currently working toward initial eligibility or reinstatement, spousal coverage will become effective 12 months from the date the Member becomes eligible for benefits.

2. Your Dependent Children

- a) Your children (over 24 hours old for the dependent life insurance benefit) are eligible. A dependent child shall include children of the marriage, legally adopted children and your spouse's children. To be considered a dependent, the child must be unmarried, not employed on a regular and full-time basis, and under 21 years of age.
- b) A child age 21 to 24 inclusive will be considered a dependent if in full-time attendance at an accredited school, college or university. A student whose normal residence is in Canada will also be considered a dependent when attending school outside Canada, subject to the limitations described in the Major Medical Benefits section in the Welfare Plan for Active Members portion of this booklet. Proof of school attendance is required annually.
- c) A child of your spouse shall be considered a dependent only if:
 - i. The child is also your child;
 - ii. You adopt your spouse's child; or
 - iii. Your spouse is living with you and has custody of the child.If a common law spouse has dependent children from a prior relationship, these children will only be covered under this Plan once the spouse becomes eligible for benefits.
- d) Any functionally impaired child who was insured as a dependent shall remain insured beyond any limiting age for dependents. For the purposes of insurance, functionally impaired shall mean an unmarried person who was insured as a dependent prior to becoming functionally impaired who is wholly dependent upon you for support and maintenance within the terms of the Income Tax Act.

Note:

If your dependent is hospitalized at the time when your insurance coverage starts, coverage for that dependent will not become effective until the day following final discharge from the hospital.

READ THIS BOOKLET CAREFULLY, BUT REMEMBER...

This booklet is not the Welfare Plan Policies, or the SUB, LAP or Pension Plan Document(s). This booklet is an outline of the provisions of the Plans which are of general interest. The booklet is for your information only and does not create or confer any contractual or other rights. Also remember that no benefits are guaranteed and that the benefits can be changed by the Trustees at any time.

Upon written request, copies of the Plan Documents may be obtained from the Plan Administrator. There will be a charge for this service.

INQUIRIES AND QUESTIONS

If you have questions about any part of your Benefit Plans, or if you would like to find out more about your eligibility, benefit coverage or options, please call or write to the Plan Administrator:

MANION, WILKINS & ASSOCIATES LTD.

500 – 21 Four Seasons Place, Etobicoke, Ontario M9B 0A5

Contact Centre: 416-234-3511 or Toll Free - 1-866-532-8999

Fax: 416-234-2071

Email: info@manionwilkins.com - Website: www.manionwilkins.com

Pension: 416-234-5044 or Toll Free – 1-866-532-8999

Pension Fax: 905-264-6344

The Accidental Death and Dismemberment Benefit and the Emergency Out of Province Medical Coverage if Under Age 75 are underwritten by:

CHARTIS INSURANCE COMPANY OF CANADA

All other coverages are underwritten by:

THE MANUFACTURERS LIFE INSURANCE COMPANY

(MANULIFE FINANCIAL)

NOTICE REGARDING PRIVACY OF PERSONAL INFORMATION

When you apply for coverage Manion, Wilkins & Associates Ltd., the Plan Administrator and the insurers set up a file, or series of files, with your personal information relative to your participation in the Welfare, Legal Assistance, Supplementary Unemployment Benefits and Pension Trust Funds and Plans. This includes all of the information concerning your enrolment, your benefits and your claims.

The purpose of these files is to permit us to administer your benefits under the Plans. This includes the following:

- arranging insurance coverage where applicable
- claims adjudication, management and payment
- internal and external audits
- income tax reporting purposes where applicable
- preparation of reports used by the plan sponsor (Board of Trustees) in the financial management of the Plan
- administration, calculation and payment of your pension benefits

Your files will be kept in the offices of Manion, Wilkins & Associates Ltd., the insurers and the custodian. Your personal information is used within our companies and shared, only to the extent required by law, with your plan sponsor, your Participating Local Union and the coverage provider(s) and financial institutions involved in caring for your plan(s). Only authorized persons have access to your files when required for coverage purposes. The information in your files is securely stored and is not shared with any other parties, unless you authorize us to release it to them, or the disclosure is required by law.

You have the right to access the personal information in your files, and if necessary, have it corrected by submitting a written request to the Plan Administrator or the insurers.