

GROUP BENEFIT PLAN



FOR

TORONTO SECONDARY UNIT

Kevin Kobus
Director of Education

Oliver Carroll
Chairman of the Board

The Catholic Teachers of the Toronto Catholic District School Board are called to bring the gospel values of faith, hope and love to each and every student entrusted to their care. This mission of Catholic education is realized by a philosophy of living and learning which is rooted in and supported by our tradition and faith. The legacy of Catholic education lives on through each and every educator who recognizes and believes in the gifts of self and others, and who joyfully communicates the good news to all members of the school community.

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In response to your employer's request, attached please find the pdf booklet document. It is the responsibility of the policyholder under the Insurance Act to ensure that this document is made available to all employees insured under the plan.

Great-West Life is a leading Canadian life and health insurer. Great-West Life's financial security advisors work with our clients from coast to coast to help them secure their financial future. We provide a wide range of retirement savings and income plans; as well as life, disability and critical illness insurance for individuals and families. As a leading provider of employee benefits in Canada, we offer effective benefit solutions for large and small employee groups.

Great-West Life Online

Information and details on Great-West Life's corporate profile, our products and services, investor information, news releases and contact information can all be found at our website <http://www.greatwestlife.com>.

This booklet contains important information and should be kept in a safe place known to you and your family.

The Plan is underwritten by

THE
Great-West Life
ASSURANCE  COMPANY

INTRODUCTION

To Members of the Toronto Secondary Unit (TSU) of the Ontario English Catholic Teachers' Association

This information booklet provides details regarding the group Benefits that pertain to the Collective Agreement (Article 17) between the Toronto Catholic District School Board and The Toronto Secondary Unit (TSU) of the Ontario English Catholic Teachers' Association.

Although every effort has been made to ensure the accuracy of the information contained in this booklet, your rights and benefits are governed by the terms of the group insurance policy, benefit plan document or plan text providing the group benefits (the "plan"). These governing documents will prevail if they differ from this booklet. Toronto Catholic District School Board intends to provide updated booklet information when substantive amendments are made to the governing documents.

Requests for information about coverage and questions about benefits should be directed through the Great-West Life call center at 1-800-263-5742, or the Toronto Catholic District School Board Benefits and Compensation Department at 416-222-8282.

Please note when the word "you" is used, this reference is to you as a member of this collective bargaining unit entitled to benefits in accordance with the governing documents.

Policy No.
321343, Division 2 – Life Insurance
55082, Division 2 – Health and Dental Benefits
321344, Division 2 - Optional Life Insurance
Last revised date: November 1, 2005

PLAN DETAIL

Eligibility period

You are eligible to become covered for group benefits **immediately**, as per the Collective Agreement between the Toronto Catholic District School Board and the Toronto Secondary Unit (TSU) of The Ontario English Catholic Teachers' Association.

Eligible Division

Secondary Teachers

Life Insurance Coverage (For Employees Only)

Basic

Employees under age 65	300% of annual insurable earnings with a maximum benefit of \$600,000.
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Employees age 65 and over	150% of annual insurable earnings with a maximum benefit of \$300,000.
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The amount of insurance on each employee under age 65 will reduce in accordance with the above schedule at the end of the month following the attainment of age 65.

The amount of insurance on each employee will terminate at the end of the month following age 65, or up to the end of the school year only, if still employed beyond age 65, but less than age 66.

Amounts of life insurance are rounded to next higher thousand dollars.

PLAN DETAIL

Optional

An employee under age 65 insured for basic life insurance may apply for optional life insurance.

Employees under age 65	Units of \$25,000 with a minimum of \$50,000 and a maximum of \$200,000.
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For employees applying for optional life insurance within 31 days from their date of eligibility, the first \$50,000 will be issued without medical evidence. The medical evidence limit is subject to change.

The optional life insurance on an employee will not continue beyond the date the employee attains age 65.

Note: The total basic and optional life insurance will not exceed 10 times the employee's annual insurable earnings.

For Employees and Dependents

Hospital benefit

- | | | |
|---------------------|---|--|
| Deductible | - | applies to covered expenses for Hospital benefit, Vision care benefit, Pay-direct drug benefit and Major medical expense benefit combined. Refer to Major medical expense benefit. |
| Daily amount | - | the difference between the public ward rate and the semi-private accommodation rate in a public hospital |
| | - | \$10 per day in a private hospital |
| | - | \$3 per day in a chronic or convalescent hospital |
| Duration of benefit | - | unlimited in a public hospital |
| | - | 120 days in a private, chronic or convalescent hospital |

The benefit on a member will terminate at the end of the month following age 65, or up to the end of the school year only, if still employed beyond age 65, but less than age 66.

PLAN DETAIL

Vision care benefit

- Deductible - applies to covered expenses for Hospital benefit, Vision care benefit, Pay-direct drug benefit and Major medical expense benefit combined. Refer to Major medical expense benefit.
- Maximum amount - \$250 every two consecutive calendar years for each covered person.

The benefit on a member will terminate at the end of the month following age 65, or up to the end of the school year only, if still employed beyond age 65, but less than age 66.

Pay-direct drug benefit

- Deductible - applies to covered expenses for Hospital benefit, Vision care benefit, Pay-direct drug benefit and Major medical expense benefit combined. Refer to Major medical expense benefit.
- Portion payable - 100%
- Maximum amount - unlimited

The covered expense for the dispensing fee portion of a prescription drug charge is limited to \$7.00.

The benefit on a member will terminate at the end of the month following age 65, or up to the end of the school year only, if still employed beyond age 65, but less than age 66.

PLAN DETAIL

Major medical expense benefit

- Deductible - applies to covered expenses for Hospital benefit, Vision care benefit, Pay-direct drug benefit and Major medical expense benefit combined.
- \$20 a calendar year for the total covered expenses incurred by all covered persons in a family; however, the maximum deductible for each covered person is \$10 a calendar year. If more than one covered person in a family is injured in the same accident only one \$10 deductible is applied in any one calendar year against the combined covered expenses resulting from the accident.
- Portion payable - 100%
- Maximum amount - unlimited

The benefit on a member will terminate at the end of the month following age 65, or up to the end of the school year only, if still employed beyond age 65, but less than age 66.

Dental benefit

- Deductible - nil
- Basic services payable - 100%
- Restorative services payable - 50%
- Orthodontic services payable - 50%
- Lifetime maximum for basic expenses - unlimited
- Lifetime maximum for restorative expenses - \$10,000
- Lifetime maximum for orthodontic expenses - \$3,000

PLAN DETAIL

Fee schedule for basic and restorative expenses -

dental: fee schedule, for 2003*, approved and published by the Ontario Dental Association for general practitioners; under this plan, this fee schedule applies to charges made by all dentists and is not limited to those charges made by general practitioners.

denturist: fee schedule, for 2003*, approved and published by the Ontario Denturist Association.

Fee schedule for orthodontic expenses-

dental: fee schedule, for 2003*, approved and published by the Ontario Dental Association.

denturist: fee schedule, for 2003*, approved and published by the Ontario Denturist Association.

* *Effective September 1, 2006, fee schedule will be upgraded to 2004.
Effective September 1, 2007, fee schedule will be upgraded to 2005.
Effective August 31, 2008, fee schedule will be upgraded to 2006.*

The benefit on a member will terminate at the end of the month following age 65, or up to the end of the school year only, if still employed beyond age 65, but less than age 66.

COMMENCEMENT AND ADJUSTMENT OF COVERAGE

1. Eligibility

A person indicated under eligible division in the plan detail is eligible to become covered provided such person

- has been actively at work full-time or part-time and for full pay with Toronto Catholic District School Board,
- has been in continuous active full-time or part-time employment for full pay with Toronto Catholic District School Board for the eligibility period shown in the plan detail, and
- is resident in Canada.

Full-time and part-time employment means performing in the customary manner all the regular duties of the employment either at the customary place of employment or at some other location required by the Toronto Catholic District School Board's business.

You will be considered to be resident in Canada while on temporary assignment with Toronto Catholic District School Board outside Canada for not more than 24 months.

If benefits insured under the policy replaces similar insurance within 31 days of its termination, other persons indicated under eligible division in the plan detail who were covered by the prior insurance are eligible to become insured for similar insurance under the policy for an amount not exceeding the amount lost on termination, provided application is made within 31 days after the coverage is lost.

2. Application for Optional Life Insurance

A person eligible for insurance shall become covered by:

- submitting a written application for insurance on forms furnished by Great-West Life and Toronto Catholic District School Board and
- providing any required evidence of insurability.

3. Commencement of Other Coverage

A person eligible for coverage shall become covered by:

- being enrolled for this coverage by Toronto Catholic District School Board and
- providing any required underwriting evidence.

An eligible person who becomes covered under the plan is referred to as a "member" with respect to any benefit under which he or she is covered.

COMMENCEMENT AND ADJUSTMENT OF COVERAGE

4. Evidence

Benefits insured with Great-West Life are subject to evidence of insurability satisfactory to Great-West Life according to the underwriting rules of Great-West Life in effect at that time.

Benefits, other than benefits insured with Great-West Life, are subject to satisfactory evidence required by the underwriting rules established for those benefits.

A failure to disclose or a misrepresentation by a person applying for such benefits of any requested information that is within his knowledge, material to the benefits, and not otherwise disclosed, renders the benefits voidable by the party requiring the evidence.

5. Amount of Coverage

Each eligible person who applies for coverage may obtain coverage for not more than the amount described in the plan detail.

6. Adjustment in Amount of Coverage

When a change in any circumstance would make you eligible for a different amount of benefit, the amount of benefit will be adjusted as follows:

If the change would result in an increase, the increase will be effective on the later of:

- the date of the change in circumstance, and
- the date any required evidence of insurability and underwriting evidence are approved.

The increase will be effective only if you are actively at work full-time or part-time and for full pay on the effective date of the increase.

If the change would result in a decrease, the decrease will be effective on the date of change in circumstance unless otherwise specified in the plan detail.

COMMENCEMENT AND ADJUSTMENT OF COVERAGE

7. Insurable Earnings

For life insurance, "annual insurable earnings" means annual earnings from Toronto Catholic District School Board based on your established normal work period and job classification, and includes any annual salary allowances received from Toronto Catholic District School Board.

If earnings used by Toronto Catholic District School Board to determine premium payments to Great-West Life are understated, the understated earnings will be used to determine annual insurable earnings. If earnings used by Toronto Catholic District School Board to determine premium payments to Great-West Life have been overstated, the correct amount of earnings will be used to determine annual insurable earnings.

TERMINATION OF COVERAGE

Your coverage will terminate at the end of the month following the month in which your employment terminates or you become ineligible.

Your employer may, in its discretion continue coverage during a period when you are absent from work because of injury or disease, scheduled vacation or employer-approved leave of absence, provided premium is submitted on your behalf.

Notwithstanding the foregoing, your employer may terminate your coverage at any time.

LIFE AND OPTIONAL LIFE INSURANCE

1. Benefit

In the event of your death, Great-West Life will pay the amount of insurance for which you were insured.

2. Waiver of Premium on Disability

If prior to your 65th birthday and as a result of injury or disease, you become totally disabled so as to be unable to do any work, and such disability has existed for a continuous waiting period of 6 months, then your life insurance will continue without payment of premium from the date such disability commenced and during the continuance of such disability, but not beyond 65 years of age.

Limitation - No premium will be waived for any period of total disability during which you are not participating and co-operating in a reasonable and customary treatment program for each disabling condition. Such a program must be recommended by the licensed physician treating you and be of the nature and frequency usually required for each disabling condition.

If you cease to be totally disabled, your life insurance will terminate unless you are then eligible to become insured under the policy and premium payments are resumed. In the event of termination of insurance under this paragraph, if you are not then eligible to become insured under the policy, will be entitled to apply for a new policy in accordance with the Conversion Option during a period of 31 days following termination of the insurance. If death occurs during the period of 31 days, insurance will be paid as stated in the Conversion Option.

3. Conversion Option

If your life insurance

- (1) reduces, or
- (2) terminates
 - (a) as provided under Termination of Coverage or
 - (b) as provided under Waiver of Premium on Disability or
 - (c) because of termination of the life insurance in the policy or a division of the policy,

and you are not eligible to become insured hereunder, then you will have the right, upon written application made within 31 days after such reduction or termination, to obtain a new policy of life insurance without evidence of insurability, as provided below.

If the insurance reduces, the amount of the new policy will not exceed the amount of the reduction.

LIFE AND OPTIONAL LIFE INSURANCE

3. **Conversion Option** - continued

If the insurance terminates as provided in (a) or (b) above, the amount of the new policy will not exceed the amount for which you were insured immediately prior to termination.

If the insurance terminates as provided in (c) above, the new policy will not exceed the amount required by law.

Great-West Life will issue the new policy, without total disability benefit or accidental death benefit, on any of its plans then available according to the class of risk to which you belong.

The premium for the new policy will be at the rates established by Great-West Life for your class of risk, sex and current age. The new policy will not become effective until the expiration of the 31 day period.

If death occurs during the 31 day period, Great-West Life will pay an amount equal to the insurance you could have converted under the policy. Payment will be made to the person who would have received the proceeds hereunder. This payment is in full settlement of all life insurance claims under the policy with respect to that person.

4. **Exception to Benefit Payment** *(applies only to optional life insurance)*

If you die by your own act, within two years from the date on which you became insured under the policy or Toronto Catholic District School Board's previous policy for an amount of optional life insurance, the liability of Great-West Life under such optional life insurance will be limited to an amount equal to the premiums (without interest) paid on your behalf for such coverage.

LIFE AND OPTIONAL LIFE INSURANCE

5. Proof of Disability Claim

For premiums to be waived, written proof satisfactory to Great-West Life signed by the licensed physician treating you must be received by Great-West Life:

- (1) while you are totally disabled, and
- (2) within 12 months after the end of the applicable waiting period.

Otherwise, the claim for benefits will be invalid.

Great-West Life at any time may request written proof of the continuance of total disability and may request you to submit to and co-operate in examination by Great-West Life's medical and other advisers. If you fail to furnish proof satisfactory to Great-West Life within three months following the request or refuse to submit to and co-operate in examination by Great-West Life's medical and other advisers, you will be considered to have ceased to be totally disabled immediately prior to the date the request was made.

Proof satisfactory to Great-West Life may be required to verify statements made to establish insurability.

6. Proof of Death Claim

For benefits to become payable, written proof satisfactory to Great-West Life of your death must be received by Great-West Life within one year after the date of death. Proof satisfactory to Great-West Life may be required to verify statements made to establish insurability.

HOSPITAL BENEFIT

1. Benefit

If a covered person (you or your covered dependent) is confined in a licensed hospital in Canada as a result of disability caused by injury or disease, the plan will pay to you the reasonable charges payable by the covered person to the hospital for medically necessary room and board up to the daily amount shown in the plan detail for each day of such confinement. The total amount payable for one or more periods of confinement during any one period of disability due to one or more causes will not exceed the daily amount times the number of days shown in the plan detail.

The maximum amount payable for covered expenses incurred by a covered person during the whole period the covered person is covered under this provision, or any similar provision of any plan replaced by the plan, for one or more periods of confinement in a private, chronic or convalescent hospital will not exceed the daily amount times the number of days shown in the plan detail.

2. Reduction of Benefit

This hospital benefit will be reduced as provided in the Right of Subrogation provision.

3. Limitations

No benefit will be paid

- (1) for a period of hospital confinement which began before the covered person became covered hereunder; this limitation will not apply to a child who became covered at birth;
- (2) for injury or disease for which a covered person is entitled to payment under any Workers' Compensation or similar coverage;
- (3) for an amount for which a covered person is not required to pay, or for which the covered person is entitled to reimbursement under any non-contractual arrangement or under the health plan of the province in which the covered person resides, whether or not the covered person is covered thereunder;
- (4) for an amount which is not permitted to be covered;
- (5) for injury or disease resulting from war or hostilities of any kind;
- (6) if you do not comply with the Right of Subrogation provision.

HOSPITAL BENEFIT

4. Co-ordination of Benefits

Payment on a particular claim cannot exceed 100% of eligible expenses.

ONE EMPLOYEE WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

1. A Toronto Catholic District School Board employee and spouse have separate coverage. Great-West Life would be the primary carrier for the Toronto Catholic District School Board employee. The spouse would be required to submit to their carrier first. The primary carrier for dependent children is determined by the birthdates of the parents. The parent whose birthdate falls first in the year (month and day only) is considered the primary carrier. Copies of receipts and claim forms should be retained and the originals sent to the primary carrier for reimbursement. Once payment has been made by the primary carrier, the statement from that carrier along with the copies of the claims should be sent to the secondary carrier for consideration of any unpaid balance. The group identification should be used on a new claim form.

BOTH EMPLOYEES WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

2. When both employees work for Toronto Catholic District School Board both identification numbers can be used on one claim form and the coordination of benefits can be handled at the same time. The rules in regards to which certificate claims should be paid under first remain the same. The Coordination of Benefits section must be completed and reference to the fact that both are Toronto Catholic District School Board employees helps us to recognize the type of claim.

5. Continuation of Coverage

If you are totally disabled because of injury or disease so as to be unable to perform substantially all of the duties of your occupation on the date when your hospital benefit would otherwise have terminated, coverage will be continued, during the period of disability, for not more than 90 days from such termination date.

If a covered dependent is confined in a licensed hospital because of injury or disease on the date when your hospital benefit would otherwise have terminated, coverage will be continued, during the period of hospital confinement, for not more than 90 days from such termination date.

HOSPITAL BENEFIT

6. Claims

For benefits to become payable, written proof satisfactory to Great-West Life of the incurring of an expense for which benefits are claimed hereunder must be received by Great-West Life not later than 15 months following the date the expense was incurred.

Great-West Life may require a covered person to submit to examination by Great-West Life's medical advisers.

Proof satisfactory to Great-West Life may be required to verify any statements made to satisfy the underwriting rules established for the plan.

Great-West Life, in its discretion may pay another person on your behalf and such payment, provided it is made in good faith, will discharge Toronto Catholic District School Board's liability under the plan.

Payment for a charge by a hospital, instead of being made to you, may be made to the hospital. Such payment will be a complete discharge to Toronto Catholic District School Board for the amount so paid.

No action or proceeding may be commenced with respect to this benefit within 60 days nor after one year from the expiration of the time when proof of claim is required hereunder.

7. How to submit your claim

- **Have the hospital complete and submit directly to Great-West Life a standard hospital claim form showing your full identification (group plan, division and certificate numbers).**
- **Payment will be made directly to the hospital.**

VISION CARE BENEFIT

1. Benefit

If a covered person (you or your covered dependent) incurs expenses for necessary contact lenses or eyeglass lenses which are prescribed by a licensed physician or optometrist for the correction of impaired vision and frames for eyeglass lenses, the plan will pay to you the reasonable charges incurred for such expenses, up to the maximum amount shown in the plan detail.

2. Reduction of Benefit

This vision care benefit will be reduced as provided in the Right of Subrogation provision.

3. Limitations

No benefit will be paid

- (1) for safety glasses, sun glasses (with or without prescription), glasses or contact lenses for cosmetic or decorative purposes;
- (2) for an expense for which a covered person is not required to pay, or for which the covered person is entitled to reimbursement under any non-contractual arrangement or under the health plan of the province in which the covered person resides, whether or not the covered person is covered thereunder;
- (3) for an expense which is not permitted to be covered;
- (4) if you do not comply with the Right of Subrogation provision.

VISION CARE BENEFIT

4. Co-ordination of Benefits

Payment on a particular claim cannot exceed 100% of eligible expenses.

ONE EMPLOYEE WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

1. A Toronto Catholic District School Board employee and spouse have separate coverage. Great-West Life would be the primary carrier for the Toronto Catholic District School Board employee. The spouse would be required to submit to their carrier first. The primary carrier for dependent children is determined by the birthdates of the parents. The parent whose birthdate falls first in the year (month and day only) is considered the primary carrier. Copies of receipts and claim forms should be retained and the originals sent to the primary carrier for reimbursement. Once payment has been made by the primary carrier, the statement from that carrier along with the copies of the claims should be sent to the secondary carrier for consideration of any unpaid balance. The group identification should be used on a new claim form.

BOTH EMPLOYEES WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

2. When both employees work for Toronto Catholic District School Board both identification numbers can be used on one claim form and the coordination of benefits can be handled at the same time. The rules in regards to which certificate claims should be paid under first remain the same. The Coordination of Benefits section must be completed and reference to the fact that both are Toronto Catholic District School Board employees helps us to recognize the type of claim.

VISION CARE BENEFIT

5. Claims

For benefits to become payable, written proof satisfactory to Great-West Life of the incurring of an expense for which benefits are claimed hereunder must be received by Great-West Life not later than 15 months following the date the expense was incurred.

Proof satisfactory to Great-West Life may be required to verify any statements made to satisfy the underwriting rules established for the plan.

Great-West Life, in its discretion may pay another person on your behalf and such payment, provided it is made in good faith, will discharge Toronto Catholic District School Board's liability under the plan.

No action or proceeding may be commenced with respect to this benefit within 60 days nor after one year from the expiration of the time when proof of claim is required hereunder.

6. How to submit your claim

Obtain a claim form from your school/department.

For completion and submission follow the instructions on the claim form.

PREFERRED VISION SERVICES (PVS)

Preferred Vision Services (PVS) is a service provided by Great-West Life to its customers through Preferred Vision Services.

Preferred Vision Services (PVS) entitles you to a discount on a wide selection of quality eyewear and vision care services when you purchase these items from a PVS network optician or optometrist. You are eligible to receive the PVS discount through the network whether or not you are enrolled for the extended health care coverage described in this booklet. You may use the PVS network as often as you wish to purchase services and eyewear for yourself and your dependents at a reduced cost.

Shopping for eyewear through PVS:

- (1) Call the PVS Information Hotline at 1-800-668-6444 or visit the PVS web site at www.pvs.ca for information about PVS locations and the program.
- (2) Arrange for a fitting or eye examination, if needed.
- (3) Present your group benefit plan identification card to identify your preferred status as a PVS member through Great-West Life at the time of purchase.
- (4) Select your eyewear and pay the reduced PVS price. If you have vision care coverage, obtain a receipt and submit it with a claim form to your insurance carrier in the usual manner.

PAY - DIRECT DRUG BENEFIT

1. Benefit

If a covered person (you or your covered dependent) incurs covered expenses in excess of the deductible for a necessary drug for the treatment of any injury or disease, the plan will pay to a participating pharmacy on your behalf, otherwise to you, a portion of the reasonable charges ("reasonable" as deemed such by the plan administrator) in excess of the deductible for the following drugs and drug supplies:

- (1) drugs that require a physician's or dentist's prescription according to
 - (a) the Food & Drugs Act, Canada, or
 - (b) provincial legislation in effect where the drug is dispensed.Oral contraceptives are covered.
- (2) drugs that must be injected, including vitamins, insulins, and allergy extracts. Syringes for self-administered injections are also covered.
- (3) disposable needles for use with non-disposable insulin injection devices, lancets, and test strips.
- (4) extemporaneous preparations or compounds if one of the ingredients is a covered drug.
- (5) vaccinations and inoculations for the preventative treatment of communicable diseases.
- (6) smoking cessation products will be considered drugs for the treatment of disease. The maximum amount payable for such expenses is \$500 in a covered person's lifetime.

The deductible and portion payable are shown in the plan detail. "Participating pharmacy" means a pharmacy that has entered into an agreement to provide prescription drugs pursuant to this pay-direct drug benefit plan.

The covered expense for the dispensing fee portion of a prescription drug charge is limited to \$7.00.

Drugs for the treatment of infertility will be considered drugs for the treatment of disease and are covered to an unlimited maximum.

2. Reduction of Benefit

This pay-direct drug benefit will be reduced as provided in the Right of Subrogation provision.

PAY - DIRECT DRUG BENEFIT

3. Limitations

No benefits will be paid:

- (1) for drugs used to treat erectile dysfunction;
- (2) for any drug that does not have a drug identification number as defined by the Food and Drugs Act, Canada;
- (3) for proprietary or patent medicines registered under the Food and Drugs Act, Canada;
- (4) for any single purchase of a drug that would not reasonably be consumed or used within 34 days, except for the following maintenance drugs when dispensed in quantities that would reasonably be consumed or used within 100 days:

antiasthmatics	antibiotics for acne
anticoagulants	anticonvulsants
antihypertensive agents	antiparkinson
antituberculosis	cardiac agents
estrogens	glaucoma
hypoglycemic agents	oral contraceptives
potassium replacements	thyroid preparations
- (5) for drugs that do not require a prescription by law;
- (6) for drugs dispensed by a physician, surgeon, dentist or clinic or by a non-accredited hospital pharmacy;
- (7) for drugs dispensed during treatment as an in-patient or out-patient in a hospital;
- (8) for non-injectable allergy extracts;
- (9) for drugs that are considered cosmetic, such as topical minoxidil or sunscreens, whether or not prescribed for a medical reason;
- (10) for food and dietary supplements;
- (11) for hygienic products;
- (12) for experimental drugs;
- (13) for drugs not considered by the Canadian Medical Association or by the medical association of the province of residence of the covered person to be therapeutically useful;
- (14) for injury or disease for which a covered person is entitled to payment under any Workers' Compensation or similar law;
- (15) for any drug for which a covered person is not required to pay, or for which the covered person is entitled to reimbursement under any non-contractual arrangement or under the health plan of the province in which the covered person resides, whether or not the covered person is insured thereunder;
- (16) for a charge which is not permitted to be covered;
- (17) for an injury or disease resulting from war or hostilities of any kind;
- (18) if you do not comply with the Right of Subrogation provision.

PAY - DIRECT DRUG BENEFIT

4. Co-ordination of Benefits

Payment on a particular claim cannot exceed 100% of eligible expenses.

ONE EMPLOYEE WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

1. A Toronto Catholic District School Board employee and spouse have separate coverage. Great-West Life would be the primary carrier for the Toronto Catholic District School Board employee. The spouse would be required to submit to their carrier first. The primary carrier for dependent children is determined by the birthdates of the parents. The parent whose birthdate falls first in the year (month and day only) is considered the primary carrier. Copies of receipts and claim forms should be retained and the originals sent to the primary carrier for reimbursement. Once payment has been made by the primary carrier, the statement from that carrier along with the copies of the claims should be sent to the secondary carrier for consideration of any unpaid balance. The group identification should be used on a new claim form.

BOTH EMPLOYEES WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

2. When both employees work for Toronto Catholic District School Board both identification numbers can be used on one claim form and the coordination of benefits can be handled at the same time. The rules in regards to which certificate claims should be paid under first remain the same. The Coordination of Benefits section must be completed and reference to the fact that both are Toronto Catholic District School Board employees helps us to recognize the type of claim.

PAY - DIRECT DRUG BENEFIT

5. Concurrent Drug Utilization Review

Claims for covered drugs submitted electronically to Emergis Inc. are subject to concurrent drug utilization review at point-of sale to determine if:

- (1) an adverse reaction is possible between a prescribed drug and another drug already being taken by the patient;
- (2) a prescribed drug may be harmful to a patient who is a child or a senior;
- (3) a refill prescription is being filled too early or too late;
- (4) a prescribed drug contains ingredients in the same therapeutic class as another drug currently being taken or that has recently been taken and the ingredients remain active in the patient's system;
- (5) the prescribed therapy duration falls outside the drug manufacturer's recommended minimum and maximum limits;
- (6) the prescribed daily dosage of a drug falls outside the age band limits established by the drug manufacturer;
- (7) a prescribed drug is intended solely for the use of a person of the opposite gender to that of the patient.

Based on the outcome of the review, a pharmacist may refuse to dispense the drug as prescribed.

Claims for covered drugs are not subject to concurrent drug utilization review if:

- (1) the drugs are dispensed at a pharmacy that is not properly equipped to provide the service; or
- (2) the drugs are extemporaneous preparations or compounds.

Neither Great-West Life nor Emergis makes any guarantees, representations or warranties about the accuracy or completeness of the patient information provided for the concurrent drug utilization review or about the review results nor are they liable for any decision made by a pharmacist as a result of the review process.

PAY - DIRECT DRUG BENEFIT

6. Claims

For benefits to become payable, written proof satisfactory to Great-West Life of the incurring of an expense for which benefits are claimed hereunder must be received by Great-West Life not later than 15 months following the date the expense was incurred.

Proof satisfactory to Great-West Life may be required to verify any statements made to satisfy the underwriting rules established for the plan.

Great-West Life, in its discretion and to the extent permitted by law, may pay another person on your behalf and such payment, provided it is made in good faith, will discharge Toronto Catholic District School Board's liability under the plan.

Payment for a charge by a hospital or a dentist, instead of being made to you, may be made to the hospital or dentist. Prescription drug benefits for drug claims submitted through Emergis's electronic claims system will be issued to Emergis. Such payment will be a complete discharge to the Toronto Catholic District School Board for the amount so paid.

No action or proceeding under this plan may be commenced with respect to this benefit within 60 days nor after one year from the expiration of the time when the proof of claim is required hereunder.

7. How to submit your claim

You have the option to:

- (1) Use your drug card at the pharmacy at the time of purchase, or
- (2) Obtain a claim form from your school/department. For completion and submission follow the instructions outlined on the claim form.

MAJOR MEDICAL EXPENSE BENEFIT

1. Benefit

If a covered person (you or your covered dependent) incurs covered expenses in excess of the deductible, the plan will pay to you a portion of such covered expenses. The deductible and the portion payable are shown in the plan detail. No amount will be paid for covered expenses otherwise payable under the plan.

2. Reduction of Benefit

This major medical expense benefit will be reduced as provided in the Right of Subrogation provision.

3. Covered Expenses

Covered expenses are the reasonable charges for the medically necessary services and supplies for treatment of any injury or disease as described below, made

- (1) by a licensed public hospital in Canada, including semi-private accommodation. For charges by a chronic or convalescent hospital for a covered person, please refer to the Hospital benefit.
- (2) for services rendered in Canada, but outside the province of residence of the covered person by a licensed physician in excess of the charges allowed under the health plan of the province of residence whether or not the covered person is covered thereunder. The amount payable for such services will be limited to the amount specified in the fee schedule.
"Fee schedule" means the schedule of fees of the medical association or the College of Physicians and Surgeons at the time of treatment in the province of residence of a covered person.
- (3) for services of the following if licensed by a licensing and registration authority in the province where the service is rendered:
 - (a) by a physiotherapist not to exceed \$12.20 for each visit for each covered person;
 - (b) by a speech therapist but limited to \$200 a calendar year for each covered person;
 - (c) by a chiropractor, excluding diagnostic x-rays, limited to \$30 per visit to a maximum of \$300 a calendar year for each covered person;
 - (d) by a registered massage therapist but limited to \$7 for each treatment and to 12 treatments a calendar year for each covered person; and
 - (e) by a psychologist limited to \$35 for the first visit and \$20 an hour for all other visits and a maximum of \$200 a calendar year for each covered person.

Charges for services by a member of the College of Physicians and Surgeons are paid by the provincial health insurance plan.

MAJOR MEDICAL EXPENSE BENEFIT

3. Covered Expenses - continued

- (4) for services of a dentist for the excision of a cyst or tumour and for treatment required as a direct result of an accidental injury to natural teeth from an external blow, excluding biting accidents, provided treatment is received within 90 days, and completed within one year of the accident;
- (5) for ambulance service to the nearest hospital where treatment is available;
- (6) for private duty nursing service in the home of the covered person by a registered graduate nurse not ordinarily resident in the home and not related to the covered person; provided such service can be performed only by a registered graduate nurse and not by a person of lesser qualifications and such service was recommended and approved by a licensed physician;
- (7) for an artificial eye, arm, hand, leg, foot, breast and orthopaedic brace, including repairs and adjustments, or replacement if repair is not possible, or to accommodate a growing child;
- (8) for rental of a wheel chair, crutches, cane, walker, oxygen set, respirator or hospital bed recommended and approved by a licensed physician;
- (9) for the following items if recommended and approved by a licensed physician: casts, traction appliance, spinal and abdominal medical support, varco traction kit, belt and similar appliance, neck brace, cervical collar, ileostomy or colostomy kit;
- (10) for custom built orthopaedic shoes, orthopedic modifications to shoes, and orthotics; provided such shoes and modifications are recommended and approved by a licensed physician, a licensed podiatrist or a licensed chiropodist, limited to one pair per calendar year for each covered person;
- (11) for a wig required as a result of chemotherapy treatment, limited to 1 wig during the lifetime of each covered person;
- (12) for radium therapy;
- (13) for blood transfusions, blood plasma or other blood products;
- (14) for such services and supplies where, and to the extent that, such expenses are required by law to be covered expenses under this benefit.

Additional services and supplies may be included at the discretion of Toronto Catholic District School Board, provided they are considered life-sustaining.

MAJOR MEDICAL EXPENSE BENEFIT

4. Limitations

No benefit will be paid

- (1) for any covered expense incurred during a period of hospital confinement which began before the covered person became covered hereunder; this limitation will not apply to a child who became covered at birth;
- (2) for a periodic health check-up or examination, travel for health, cosmetic surgery and dental services other than those covered in 3(4) above;
- (3) for injury or disease for which a covered person is entitled to payment under any Workers' Compensation or similar coverage;
- (4) for an expense for which a covered person is not required to pay, or for which the covered person is entitled to reimbursement under any non-contractual arrangement or under the health plan of the province in which the covered person resides, whether or not the covered person is covered thereunder;
- (5) for a charge which is not permitted to be covered;
- (6) for an injury or disease resulting from war or hostilities of any kind;
- (7) for contraceptive products (excluding oral contraceptives), implants or appliances normally used for contraception;
- (8) for diagnostic x-rays;
- (9) if you do not comply with the Right of Subrogation provision.

5. Co-ordination of Benefits

Payment on a particular claim cannot exceed 100% of eligible expenses.

ONE EMPLOYEE WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

1. A Toronto Catholic District School Board employee and spouse have separate coverage. Great-West Life would be the primary carrier for the Toronto Catholic District School Board employee. The spouse would be required to submit to their carrier first. The primary carrier for dependent children is determined by the birthdates of the parents. The parent whose birthdate falls first in the year (month and day only) is considered the primary carrier. Copies of receipts and claim forms should be retained and the originals sent to the primary carrier for reimbursement. Once payment has been made by the primary carrier, the statement from that carrier along with the copies of the claims should be sent to the secondary carrier for consideration of any unpaid balance. The group identification should be used on a new claim form.

MAJOR MEDICAL EXPENSE BENEFIT

5. Co-ordination of Benefits - continued

BOTH EMPLOYEES WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

2. When both employees work for Toronto Catholic District School Board both identification numbers can be used on one claim form and the coordination of benefits can be handled at the same time. The rules in regards to which certificate claims should be paid under first remain the same. The Coordination of Benefits section must be completed and reference to the fact that both are Toronto Catholic District School Board employees helps us to recognize the type of claim.

6. Continuation of Coverage

If you are totally disabled because of injury or disease so as to be unable to perform substantially all of the duties of your occupation on the date when your major medical expense benefit would otherwise have terminated, coverage will be continued, during the period of disability, for not more than 90 days from such termination date.

If a covered dependent is confined in a licensed hospital because of injury or disease on the date when his major medical expense benefit would otherwise have terminated, coverage will be continued, during the period of hospital confinement, for not more than 90 days from such termination date.

7. Claims

For benefits to become payable, written proof satisfactory to Great-West Life of the incurring of an expense for which benefits are claimed hereunder must be received by Great-West Life not later than 15 months following the date the expense was incurred.

Great-West Life may require a covered person to submit to examination by Great-West Life's medical advisers.

Proof satisfactory to Great-West Life may be required to verify any statements made to satisfy the underwriting rules established for the plan.

Great-West Life, in its discretion may pay another person on your behalf and such payment, provided it is made in good faith, will discharge Toronto Catholic District School Board's liability under the plan.

MAJOR MEDICAL EXPENSE BENEFIT

7. **Claims** - continued

Payment for a charge by a hospital or a dentist, instead of being made to you, may be made to the hospital or the dentist. Such payment will be a complete discharge to Toronto Catholic District School Board for the amount so paid.

No action or proceeding may be commenced with respect to this benefit within 60 days nor after one year from the expiration of the time when proof of claim is required hereunder.

8. **How to submit your claim**

Obtain a claim form from your school/department

For completion and submission follow the instructions outlined on the claim form.

DENTAL BENEFIT

1. Benefit

If a covered person (you or your covered dependent) incurs covered expenses, the plan will pay to you a portion of the covered expenses as shown in the plan detail.

The maximum amount payable for a covered person is shown in the plan detail.

2. Reduction of Benefit

This dental benefit will be reduced as provided in the Right of Subrogation provision.

3. Covered Expenses

Covered expenses are the reasonable charges, not exceeding those specified in the fee schedule, incurred for necessary dental services as described below which are performed or prescribed by a licensed dentist or a denturist licensed to practise denture therapy:

(1) Basic Services:

Examinations:	Endodontic Services
Routine (once every 9 months)	Root Canal
Complete (once every 3 years)	Root Amputation
Radiographic examinations X-ray;	Hemisection
complete series intra-oral	Intentional Removal Apical Filling
films (once in 3 years)	Canal and/or pulp Chamber Enlargement
Periapical films	Chemical Bleaching
Occlusal films	Displacement Dressings
Posterior bitewing films (twice	Management, Oral Infections
a year)	Management - Acute Infections
Extra oral films	Desensitization
Extra oral films - additional films	Gingival Curretage - Removal of
Posterior - Anterior and lateral	soft tissue
skull and facial bone	Gingivoplasty
Radiographs - Temporomandibular	Soft tissue grafts
joint	Perio-Surgery
X-ray - Panoramic film (once in	Periodontal Abscess
3 years)	Adjunctive Periodontal Services
Cephalometric films	Occlusal Adjustment
Cephalometric films - additional	Perio Scaling
Tracing and interpreting X-rays	Root Planing
Interpretation of X-ray	Perio Appliance
Radiographs - hand and wrist	Periodontal Re-evaluation
per case	Denture Repairs

DENTAL BENEFIT

3. Covered Expenses - continued

(1) Basic Services: - continued

Radiographs - Tomography	Denture rebasing and/or relining (6 months)
Specific Diagnostic Procedures	post Denture (once in 3 years)
Treatment Planning	Partial Denture Remake
Consultations	Tissue Conditioning
Prophylaxis - cleaning (twice in 12 consecutive months)	Surgical Services
Space Maintainers	Anaesthesia
(Caries/Trauma/Pain Control - as a separate removal of cariou lesions)	Consultation with another dentist
	Professional Visits
	Drug injection
	Amalgam Restorations

(2) Restorative Services:

Appliances	Crowns - Porcelain/Ceramic fused to Metal Base (once in 5 years)
Motivation of Patients	Crown - Metal (once in 5 years)
Myofunctional Therapy	Copings, Metal/Plastic
Restoration in conjunction with Crown	Repair, Inlays, Onlays, Crowns
Gold foil Restoration (once in 5 years)	Recement/Rebond
Metal Inlay Restoration (once in 5 years)	Removal of Inlays and Crowns
Composite Inlay (once in 5 years)	Complete Dentures (once in 5 years)
Porcelain Restoration (once in 5 years)	Temporary - Partial Dentures (once in 5 years)
Porcelain Inlay (once in 5 years)	Altered Cast Impression
Metal Restoration (once in 5 years)	Denture Adjustments (3 months post Denture)
Onlays (once in 5 years)	Remount & Equilibration (3 months post Denture)
Retentive Pins	Pontics (once in 5 years)
Cast Metal Post and Core	Pontics - Temporary
Posts, Prefab, Retentive	Master Cast
Plastic Crowns (once in 5 years)	Replace Broken Prefab. Attachable Facings
Crowns - Plastic and Acrylic - Temporary	Removal of Fixed Bridge
Crowns - Plastic/Metal Base (once in 5 years)	Recementation of Fixed Bridge
Crowns - Porcelain/Ceramic (once in 5 years)	Repairs
Fixed Prosthetics, excluding dental implants	Fixed Bridge Retainer (once in 5 years)
Diagnostic Casts	Retainers (once in 5 years)
	Splinting (once in 5 years)
	Provisional Coverage
	Interproximal discing of teeth

DENTAL BENEFIT

3. Covered Expenses - continued

(3) Orthodontic Services:

Orthodontic treatment	Appliances
Repairs	Removable Retention Appliances
Alterations	Fixed/Cemented Retention Appliance
Recementations	Case Type Fixed Appliance
Separations	

"Fee schedule" means:

- (1) for services performed by a dentist, the schedule of fees approved and published by the dental association and as described in the plan detail, and
 - (2) for services performed by a denturist, the schedule of fees approved and published by the denturist association and as described in the plan detail,
- and, if the covered person is resident outside of Canada, the fee schedule of the dental association or denturist association, as applicable, of the province where the Canadian head office of Toronto Catholic District School Board is located. If an allowance for an expense is not shown in the applicable fee schedule, Great-West Life will determine the reasonable and customary allowance.

4. Limitations

No benefit will be paid

- (1) for a covered expense otherwise payable under the plan;
- (2) for an expense incurred for cosmetic purposes;
- (3) for an expense incurred for the removal of an amalgam restoration and its replacement with an alternate material unless there is evidence of recurrent decay or significant breakdown;
- (4) for injury or disease for which a covered person is entitled to payment under any Workers' Compensation or similar coverage;
- (5) for an expense for which a covered person is not required to pay, or for which the covered person is entitled to reimbursement under any non-contractual arrangement;
- (6) for an expense for an injury or disease resulting from war or hostilities of any kind;
- (7) for more than one examination for a covered person during any period of nine consecutive months;
- (8) for an expense incurred for construction of an inlay, onlay or crown unless there is extensive decay, breakdown or fracture of the tooth at the time of construction where an amalgam or similar restorative material cannot adequately restore the tooth;

DENTAL BENEFIT

4. Limitations – continued

- (9) for an expense incurred for replacement of an inlay, onlay, crown or fixed bridge unless there is extensive decay or breakdown which can not be repaired by use of amalgam or similar restorative material;
- (10) for an expense incurred for a precision attachment or for dental restorations for the purposes of periodontal splinting, full mouth rehabilitation, altering of the vertical dimension or modifying the occlusion;
- (11) if you do not comply with the Right of Subrogation provision.

5. Co-ordination of Benefits

Payment on a particular claim cannot exceed 100% of eligible expenses.

ONE EMPLOYEE WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

- 1. A Toronto Catholic District School Board employee and spouse have separate coverage. Great-West Life would be the primary carrier for the Toronto Catholic District School Board employee. The spouse would be required to submit to their carrier first. The primary carrier for dependent children is determined by the birthdates of the parents. The parent whose birthdate falls first in the year (month and day only) is considered the primary carrier. Copies of receipts and claim forms should be retained and the originals sent to the primary carrier for reimbursement. Once payment has been made by the primary carrier, the statement from that carrier along with the copies of the claims should be sent to the secondary carrier for consideration of any unpaid balance. The group identification should be used on a new claim form.

BOTH EMPLOYEES WORKING FOR TORONTO CATHOLIC DISTRICT SCHOOL BOARD

- 2. When both employees work for Toronto Catholic District School Board both identification numbers can be used on one claim form and the coordination of benefits can be handled at the same time. The rules in regards to which certificate claims should be paid under first remain the same. The Coordination of Benefits section must be completed and reference to the fact that both are Toronto Catholic District School Board employees helps us to recognize the type of claim.

DENTAL BENEFIT

6. Claims

For benefits to become payable, written proof satisfactory to Great-West Life of the incurring of an expense for which benefits are claimed hereunder must be received by Great-West Life not later than 15 months following the date the expense was incurred.

Great-West Life may require a covered person to submit to examination by Great-West Life's dental advisers.

Proof satisfactory to Great-West Life may be required to verify any statements made to satisfy the underwriting rules established for the plan.

Great-West Life, in its discretion may pay another person on your behalf and such payment, provided it is made in good faith, will discharge Toronto Catholic District School Board's liability under the plan.

Payment for a charge by a hospital or a dentist, instead of being made to you, may be made to the hospital or the dentist. Such payment will be a complete discharge to Toronto Catholic District School Board for the amount so paid.

No action or proceeding may be commenced with respect to this benefit within 60 days nor after one year from the expiration of the time when proof of claim is required hereunder.

7. How to submit your claim

You and your dentist must complete a dental claim form for each family member. The form should then be submitted to Great-West Life directly

- at end of treatment, or
- at periodic intervals if treatment continues over a number of months.

Avoid peak periods - December and January.

For extensive dental work over \$500, it is recommended that you submit a claim form/estimate showing the proposed treatment to determine the amount of benefit that will be paid.

GENERAL PROVISIONS (Dependent Benefits)

1. Dependent

Dependent means

- (1) the person with whom you are cohabiting and to whom you are legally married (spouse);
- (2) your unmarried child, under 21 years of age and dependent on you for support; and

Effective September 1, 2006

- (3) *your unmarried child, 21 years of age or over but less than 25 years of age, who is a full-time student attending or on vacation from a recognized (government funded) post secondary educational institution or similar educational institution*, working less than 30 hours per week, and dependent on you for support.*

**Similar educational institution includes a government subsidized program such as a college or technical school. Unaccredited programs, work experience/paid apprenticeships and correspondence courses are excluded.*

The following will be considered your child:

- (a) a person you are adopting, during the period of probation,
- (b) your stepchild, and
- (c) a person related to you by blood or marriage and for whom you are the legal guardian.

The age restriction does not apply to a mentally or physically handicapped person who had this condition and was covered as your dependent immediately before the age of 21.

Covered dependent means a person covered under the policy as a dependent.

2. Termination of Dependent Benefits

The coverage on a dependent will terminate on the earlier of:

- (1) the date the dependent ceases to qualify as your dependent, and
- (2) the date you cease to be covered for similar coverage.

On your death any health benefits on your dependents will continue until the end of the month following the month in which your death occurs.

GENERAL PROVISIONS

Toronto Catholic District School Board has appointed Great-West Life Assurance Company, as its agent for the purpose of reviewing and paying claims and providing administrative services for hospital, dental, pay-direct drug, major medical expense and vision care benefits. Such benefits are not insured by The Great-West Life Assurance Company but remain the responsibility of Toronto Catholic District School Board.

The basic life and optional life insurance are underwritten and administered by The Great-West Life Assurance Company.

1. Contract

Reference to a province includes a territory when required by the context.

2. Age

If your age has been misstated, the true age will govern and there will be an equitable adjustment in the amount of premium paid by you or the Toronto Catholic District School Board as the case may be.

3. Currency

All payments to or by Great-West Life will be in lawful money of Canada.

4. Conformity With Law

Any provision of this booklet which is in conflict with any law to which the booklet is subject, is understood, declared, and acknowledged to be amended to the extent necessary to conform to such law.

GENERAL PROVISIONS

5. Right of Subrogation

If a benefit is paid under the plan for a loss for which a third party is or may be liable, whichever of Great-West Life and Toronto Catholic District School Board is responsible for the payment of such benefit will be subrogated to your rights in any claim you assert against the third party.

Where the amount of the benefit paid by the plan, together with the recovery from the third party and from any other source, exceeds 100% of the actual loss or expense, you will hold the benefits in excess of 100%, less the proportionate amount of unrecovered legal expenses, in trust for Great-West Life or Toronto Catholic District School Board as the case may be and will reimburse such party in the amount of the excess within 30 days following receipt of the third party recovery.

If the third party recovery compensates you for future loss, any benefits otherwise payable by the plan will be reduced so that the total benefits payable in the future will not exceed 100% of the loss.

You will co-operate with Great-West Life and Toronto Catholic District School Board and in no way compromise their right of subrogation. You will execute a subrogation reimbursement agreement and direction and any other documentation required by Great-West Life or Toronto Catholic District School Board and provide details of the third party claim.

You must obtain the consent of Great-West Life or Toronto Catholic District School Board as the case may be to any settlement of the third party claim which consent will not be unreasonably withheld. If you fail to obtain such consent to any settlement, you will be considered to have recovered 100% of your loss from the third party.

If judgement is obtained in the third party action, you must advise Great-West Life or Toronto Catholic District School Board as the case may be of the judgement within 10 days and provide the details of the total recovery. If you fail to provide these details, you will be considered to have recovered 100% of your loss from the third party.

No benefits will be payable unless the requirements of this provision are satisfied.

PROTECTING YOUR PERSONAL INFORMATION

At Great-West Life, we recognize and respect the importance of privacy. When you apply for coverage or benefits, we establish a confidential file of personal information. We limit access to personal information in your file to Great-West Life staff or persons authorized by Great-West Life who require it to perform their duties, to persons to whom you have granted access, and to persons authorized by law.

We use the information to administer the group benefit plan under which you are covered. This includes many tasks, such as:

- (1) Determining your eligibility for coverage under the plan;
- (2) Enrolling you for coverage;
- (3) Assessing your claims and providing you with payment;
- (4) Managing your claims;
- (5) Verifying and auditing eligibility and claims;
- (6) Underwriting activities, such as determining the cost of the plan, and analyzing the design options of the plan; and
- (7) Preparing regulatory reports, such as tax slips.

Your employer has an agreement with Great-West Life in which your employer has financial responsibility for some or all of the benefits in the plan and we process claims on your employer's behalf. We may exchange personal information with your health care providers, your plan administrator, other insurance or reinsurance companies, administrators of government benefits or other benefit programs, other organizations, or service providers working with us when necessary to administer the plan.

All claims under this plan are submitted through you as plan member. We may exchange personal information about claims with you and a person acting on your behalf when necessary to confirm eligibility and to mutually manage the claims.

For more information about our privacy guidelines, please ask for Great-West Life's ***Privacy Guidelines*** brochure.

**TORONTO CATHOLIC
DISTRICT SCHOOL BOARD
TRUSTEES 2006-2007**

Wards

- | | | |
|-----|--------------------------------------|--------------|
| 1. | Joseph Martino | 416-512-3401 |
| 2. | Ann Andrachuk,
Honorary Treasurer | 416-512-3402 |
| 3. | Sal Piccininni | 416-512-3403 |
| 4. | Mary Cicogna | 416-512-3404 |
| 5. | Maria Rizzo | 416-512-3405 |
| 6. | Christine Nunziata | 416-512-3406 |
| 7. | John Del Grande | 416-512-3407 |
| 8. | Oliver Carroll, Chair | 416-512-3408 |
| 9. | Catherine LeBlanc-Miller | 416-512-3409 |
| 10. | Barbara Poplawski | 416-512-3410 |
| 11. | Angela Kennedy,
Vice-Chair | 416-512-3411 |
| 12. | Paul John Crawford | 416-512-3412 |
| | Ihor Korbabicz,
Student Trustee | 416-512-3413 |