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PPWC
Public and Private Workers of Canada

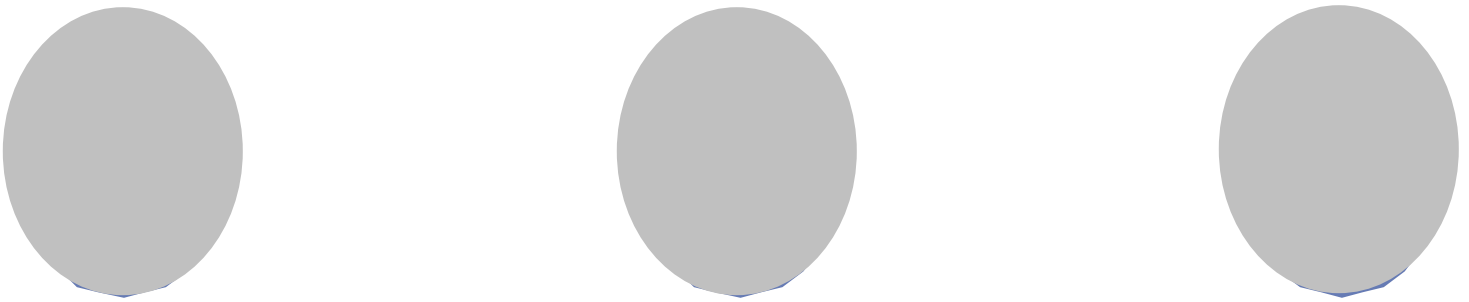


*Participating
Employers
of the Plan*

Employee Booklet

PPWC - Employer Trusteed Health & Welfare Plan

Benefits in effect as of May 1, 2017



Employee Booklet

PPWC - Employer Trusteed Health & Welfare Plan

Benefits in effect as of May 1, 2012 except for:

Nanaimo Forest Products Ltd.: as at November 1, 2008

Desjardins Financial Security

- Life and Long Term Disability Contract Number 647049 (Effective July 1, 2009)
- Weekly Indemnity (Non-Occupational Accident and Sickness) Contract Number 647049-ASO (Effective July 1, 2009)

AIG Insurance Company of Canada

- Accidental Death and Dismemberment Insurance Contract Number BSC 9147793

Pacific Blue Cross

- Extended Health and Dental Contract Number 1309 (prior to April 4, 2014 contact numbers varied by mill)

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Note: More information on your extended health and dental group benefits can be found in your separate extended health care/dental employee booklet issued by Pacific Blue Cross.

1. Introduction

The PPWC - Employer Trusteed Health & Welfare Plan (the Plan) was established in 1977 to provide benefits for eligible union members and their families. The Plan was created through the efforts and cooperation of your union and employer. Today, the Plan also provides benefits to employees employed by the PPWC National Office and Nanaimo Forest Products Ltd.

The Plan operates under the supervision and guidance of a Board of Trustees, equally represented by the union and employers. The duties, responsibilities and authority of the Trustees are spelled out in the Trust Agreement.

The cost of the Plan is shared between you and your employer. All full-time employees subject to the jurisdiction of the Collective Agreements, as well as the above noted non-union employees, are covered and contribute by payroll deduction. The Plan is referred to in the Collective Agreements under Article XV Welfare Plan and Exhibit “B” Welfare Plan and Appendix “2” Long Term Disability Plan Summary.

This booklet contains a description of your basic life, accidental death and dismemberment, weekly indemnity (non-occupational accident and sickness), and long term disability benefits as of the most recently negotiated Collective Agreement. A separate booklet is available from your employer for the extended health and dental benefits. Additional information is available on the Medical Services Plan of British Columbia through your Plan Administrator or on their website.

The information in this booklet has been prepared to give you an informal summary of the main features of your basic insurance program. This booklet is not an insurance policy, and does not grant or confer any contractual rights. The final determination of any claim, question or issue which may arise shall be governed by the applicable legislation and provisions of the Collective Agreement, Trust Agreement, and the Plan Text (in this order).

The Trustees urge you to read this booklet carefully in order to understand your benefits and rights to them. If you have any questions regarding your benefits, you should contact your employer, or your health and welfare committee.

A note about privacy

On January 1, 2004, new privacy legislation, the *Personal Information Protection Act* (British Columbia) (“PIPA”) came into effect in the Province of British Columbia. The Trustees of the PPWC - Employer Trusteed Health & Welfare Plan wish to notify you that they are working to ensure compliance with PIPA and, as always, to maintain security, privacy and confidentiality over all private employee information.

The Trustees require all insurance carriers, group benefit service providers and participating employers to confirm their compliance with applicable privacy laws and the Trustee's general privacy policies and procedures for group benefit information management. Please refer to the carriers' websites for more information on their privacy policies. Please contact your employer for more information about its privacy policy and procedures.

Board of Trustees

For the Employers:

G. Brebber
B. MacLeod

Alternate Trustee:

G. Katz

For the Union:

L. Lindeman
G. Fiege

Alternate Trustees:

R. Gallant
M. Bailey

2. Schedule of Benefits

Zellstoff Celgar Limited (Castlegar), and Skookumchuck Pulp Inc

Basic Life Insurance	May 1, 2011	\$98,460 flat benefit amount
	May 1, 2014	\$100,430 flat benefit amount
	May 1, 2015	\$102,940 flat benefit amount
	May 1, 2016	\$106,029 flat benefit amount
	August 10, 2017 (Skookumchuck)	\$108,200 flat benefit amount
	September 29, 2017 (Zellstoff)	\$108,200 flat benefit amount
	May 1, 2018	\$110,370 flat benefit amount
	May 1, 2019	\$112,580 flat benefit amount
	May 1, 2020	\$114,840 flat benefit amount

Accidental Death and Dismemberment	May 1, 2011	\$98,460 flat benefit amount
	May 1, 2014	\$100,430 flat benefit amount
	May 1, 2015	\$102,940 flat benefit amount
	May 1, 2016	\$106,029 flat benefit amount
	August 10, 2017 (Skookumchuck)	\$108,200 flat benefit amount
	September 29, 2017 (Zellstoff)	\$108,200 flat benefit amount
	May 1, 2018	\$110,370 flat benefit amount
	May 1, 2019	\$112,580 flat benefit amount
	May 1, 2020	\$114,840 flat benefit amount

Weekly Indemnity 62% (effective the date of ratification as below) of weekly earnings (weekly earnings is your regular hourly job rate times your regular scheduled hours of work per week to a maximum of 40 hours per week). The weekly benefit will be subject to the following maximums:

May 1, 2011	\$866
May 1, 2014	\$884
May 1, 2015	\$906
May 1, 2016	\$933
August 10, 2017 (Skookumchuck)	\$1,000
September 29, 2017 (Zellstoff)	\$1,000
May 1, 2018	\$1,020
May 1, 2019	\$1,050
May 1, 2020	\$1,080

Long Term Disability (LTD) 50% of monthly earnings, rounded to the next higher multiple of \$1.00 (based on monthly earnings at date of disability plus any negotiated increases during the elimination period).

Reimbursement for the Completion of Medical Forms

The weekly indemnity and long term disability plan (through your employer) will reimburse you for the cost of medical forms and specialist reports when required by the carrier if the employer will be reimbursed by the carrier. At the time of printing of this booklet, the maximum reimbursement by the employer allowed by the carrier is \$85 per form. Amounts over this level will be reviewed and considered by the carrier

3. Schedule of Benefits

Canfor Pulp Ltd. (Prince George Pulp & Paper and Intercontinental), Chemtrade Pulp Chemicals Limited Partnership (Prince George), and PPWC National Office

Basic Life Insurance	May 1, 2013	\$98,500 flat benefit amount
	May 1, 2014	\$100,470 flat benefit amount
	May 1, 2015	\$102,980 flat benefit amount
	May 1, 2016	\$106,070 flat benefit amount
	June 14, 2017	\$108,200 flat benefit amount
	May 1, 2018	\$110,370 flat benefit amount
	May 1, 2019	\$112,580 flat benefit amount
	May 1, 2020	\$114,840 flat benefit amount

Accidental Death and Dismemberment	May 1, 2013	\$98,500 flat benefit amount
	May 1, 2014	\$100,470 flat benefit amount
	May 1, 2015	\$102,980 flat benefit amount
	May 1, 2016	\$106,070 flat benefit amount
	June 14, 2017	\$108,200 flat benefit amount
	May 1, 2018	\$110,370 flat benefit amount
	May 1, 2019	\$112,580 flat benefit amount
	May 1, 2020	\$114,840 flat benefit amount

Weekly Indemnity 62% (effective date of ratification) of weekly earnings (weekly earnings is your regular hourly job rate times your regular scheduled hours of work per week to a maximum of 40 hours per week). The weekly benefit will be subject to the following maximums:

May 1, 2013	\$865
May 1, 2014	\$880
May 1, 2015	\$905
May 1, 2016	\$930
June 14, 2017	\$1,000
May 1, 2018	\$1,020
May 1, 2019	\$1,050
May 1, 2020	\$1,080

Long Term Disability (LTD) 50% of monthly earnings, rounded to the next higher multiple of \$1.00 (based on monthly earnings at date of disability plus any negotiated increases during the elimination period).

Reimbursement for the Completion of Medical Forms

The weekly indemnity and long term disability plan (through your employer) will reimburse you for the cost of medical forms and specialist reports when required by the carrier if the employer will be reimbursed by the carrier. At the time of printing of this booklet, the maximum reimbursement by the employer allowed by the carrier is \$85 per form. Amounts over this level will be reviewed and considered by the carrier.

4. Schedule of Benefits

Catalyst Paper Corporation (Crofton Pulp and Paper Division)

Basic Life Insurance	May 1, 2011	\$98,460 flat benefit amount
	May 1, 2015	\$100,430 flat benefit amount
	May 1, 2016	\$102,440 flat benefit amount
	November 1, 2017	\$108,200 flat benefit amount
	May 1, 2018	\$110,370 flat benefit amount
	May 1, 2019	\$112,580 flat benefit amount
	May 1, 2020	\$114,840 flat benefit amount

Accidental Death and Dismemberment	May 1, 2011	\$98,460 flat benefit amount
	May 1, 2015	\$100,430 flat benefit amount
	May 1, 2016	\$102,440 flat benefit amount
	November 1, 2017	\$108,200 flat benefit amount
	May 1, 2018	\$110,370 flat benefit amount
	May 1, 2019	\$112,580 flat benefit amount
	May 1, 2020	\$114,840 flat benefit amount

Weekly Indemnity 62% (effective date of ratification) of weekly earnings (weekly earnings is your regular hourly job rate times your regular scheduled hours of work per week to a maximum of 40 hours per week). The weekly benefit will be subject to the following maximums:

May 1, 2011	\$866
May 1, 2015	\$883
May 1, 2016	\$900
June 14, 2017	\$1,000
May 1, 2018	\$1,020
May 1, 2019	\$1,050
May 1, 2020	\$1,080

Long Term Disability (LTD) 50% of monthly earnings, rounded to the next higher multiple of \$1.00 (based on monthly earnings at date of disability plus any negotiated increases during the elimination period).

Reimbursement for the Completion of Medical Forms

The weekly indemnity and long term disability plan (through your employer) will reimburse you for the cost of medical forms and specialist reports when required by the carrier if the employer will be reimbursed by the carrier. At the time of printing of this booklet, the maximum reimbursement by the employer allowed by the carrier is \$85 per form. Amounts over this level will be reviewed and considered by the carrier.

5. Schedule of Benefits

Nanaimo Forest Products Ltd.

Basic Life Insurance	November 1, 2008	\$89,200 flat benefit amount
	October 3, 2010	\$92,768 flat benefit amount
	October 3, 2011	\$96,479 flat benefit amount
	October 3, 2012	\$98,408 flat benefit amount
	December 22, 2013	\$100,376 flat benefit amount
	December 21, 2014	\$102,885 flat benefit amount
	December 20, 2015	\$105,972 flat benefit amount
	December 18, 2016	\$108,091 flat benefit amount
	December 17, 2017	\$110,253 flat benefit amount

Accidental Death and Dismemberment	November 1, 2008	\$89,200 flat benefit amount
	October 3, 2010	\$92,768 flat benefit amount
	October 3, 2011	\$96,479 flat benefit amount
	October 3, 2012	\$98,408 flat benefit amount
	December 22, 2013	\$100,376 flat benefit amount
	December 21, 2014	\$102,885 flat benefit amount
	December 20, 2015	\$105,972 flat benefit amount
	December 18, 2016	\$108,091 flat benefit amount
	December 17, 2017	\$110,253 flat benefit amount

Weekly Indemnity Covered by the EMBA plan.

Long Term Disability (LTD)

Hourly 50% of monthly earnings, rounded to the next higher multiple of \$1.00 (based on monthly earnings at date of disability plus any negotiated increases during the elimination period).

Staff 50% of base salary (based on base salary at date of disability) to a monthly maximum of \$8,000.

Reimbursement for the Completion of Medical Forms

The long term disability plan will reimburse you up to a maximum of \$85 per form for any charges made by your physician for completing the medical forms required by the carrier. Amounts over this level will be reviewed and considered by the carrier.

6. Eligibility

Mandatory Participation

All full-time employees who are covered under the Collective Agreements and the non-union employees noted previously must join the Plan for all benefits. To be covered under the Plan, you must be regularly scheduled to work not less than 30 hours per week.

Application Process

You must complete an Application for Group Benefits form provided by your employer's Human Resources Department for the basic life, accidental death and dismemberment, weekly indemnity and long term disability benefits. To enroll under the extended health and dental plan, you must complete a Pacific Blue Cross Enrolment Card that is also available through your Human Resources Department. You will also be asked to complete an enrolment application form for coverage under the Medical Services Plan of British Columbia.

Commencement of Coverage

Your coverage starts when you have been on the payroll of the employer for 30 calendar days (45 calendar days for Nanaimo Forest Products Ltd. employees) or when you have accumulated 30 working days in a 90 calendar day period. If you are not actively at work, your coverage will not start until you have returned to active employment. You are considered actively at work if you report to work on the date in question and you are able to perform all the usual and customary duties of your own occupation. You are also considered actively at work if you are on a scheduled day off or on paid time off and were actively at work on your last scheduled shift and are capable of performing all your usual work duties.

If you elect not to continue benefits while on an employer approved leave of absence, you will not need to satisfy another waiting period when you return to active full time employment.

Portability of Coverage

If you start employment with another employer covered by the Plan within one month of leaving your previous employer also covered by the Plan, then your coverage will start immediately, provided you are actively at work. If you transfer employers, you should obtain a letter from your previous employer outlining your employee status and present it to your new employer.

Coverage During Lay-off

This section does not apply to Nanaimo Forest Products Ltd. staff employees.

You may elect to continue your coverage during lay-off for up to:

- six consecutive months from the date the lay-off began if you have one or more years of seniority; or
- three consecutive months from the date the lay-off began if you have more than four months but less than one year of seniority.

Take note that in the event that you become disabled while on a lay-off, you will not begin satisfying the elimination period for your weekly indemnity and long term disability benefits until your expected return to work date.

As an example, if you are laid off and opted not to continue benefits coverage during that period, and while on lay-off you were injured in an accident, upon return to work, you would not be eligible to apply for Weekly Indemnity or Long Term Disability benefits, because premiums were not being paid when the disability occurred. Your ability to claim for disability benefits upon return to work from a lay-off requires that premiums must have been paid at the time of disability.

Selection of Coverage During Lay-off

In accordance with the Collective Agreements, if you elect to continue coverage you must elect to continue **all** benefits (cannot pick and choose benefits). Employees must make this decision prior to the start of the lay-off.

Payment for Coverage During Lay-off

In accordance with the Collective Agreements, if you elect to continue coverage you must pay your portion of the premium in advance on a monthly basis and your employer will continue to pay its portion.

Return to Work While Lay-off Coverage is in Effect

Your coverage will be extended by one month for each month in which you work.

Return to Work After Lay-off Coverage Expires

You will be eligible for coverage only for the period of time you work. However, if you return to work for at least ten days within a floating period of 30 consecutive days before being laid off again, you requalify for a full extension of lay-off coverage as determined by your seniority.

Coverage During Leaves of Absence

You are covered if you are on leave from an employer that is covered under the Collective Agreements and for the purpose of fulfilling duties assigned to you by the Public and Private Workers of Canada or any of the Local Unions provided the Union pays the required premiums as invoiced by the employer each month.

Your coverage may also be maintained for up to 6 months at the mill from which you are on unpaid leave of absence (except in the case of maternity/parental leave which will be for the period outlined in the *Employment Standards Act* or other applicable legislation). In order to continue coverage during your unpaid leave you must pay the full premium in advance on a monthly basis. Note that the premium cost sharing basis during a maternity/parental leave will be on the same basis as if you were actively at work. Take note that in the event that you become disabled while on a leave of absence you will not begin satisfying the elimination period for your weekly indemnity and long term disability benefits until your expected return to work date.

For example, if you go on a leave of absence and opted not to continue benefits coverage during that period, and while on leave of absence, you were injured in an accident, upon return to work, you would not be eligible to apply for Weekly Indemnity or Long Term Disability benefits, because premiums were not being paid when the disability occurred. Your ability to claim for disability benefits upon return to work from a leave of absence requires that premiums must have been paid at the time of disability.

Selection of Coverage During Lay-off

In accordance with the Collective Agreements, if you elect to continue coverage you must elect to continue **all** benefits (cannot pick and choose benefits). Employees must make this decision prior to the start of the leave of absence.

Coverage During Severance

In accordance with the Collective Agreements, your extended health and dental benefit coverage will continue for the month in which severance occurs plus two additional months.

This section does not apply to Nanaimo Forest Products Ltd. employees.

7. Description of Benefits

Basic Life Insurance

Death Benefit

If you die from any cause while you are covered under the Plan, the amount specified in the Schedule of Benefits will be paid to your designated beneficiary. If you are receiving long term disability benefits at the time of your death, the life insurance benefit will be based on the amount of coverage you were eligible for on the day before your long term disability benefits commenced.

Appointing a Beneficiary

If you do not appoint a beneficiary, the benefit will be paid to your estate. Therefore, it is important that you complete the proper form showing the name of your current beneficiary and return it to your employer. You may change your beneficiary at any time subject to applicable legislation by notifying your employer and completing the prescribed form. It is your responsibility to ensure that your beneficiary designations are up-to-date.

Disability

If you qualify for long term disability benefits, the amount of insurance in force at the date of expiration of the long term disability elimination period will be continued without premium payment until the earlier of the date:

- you retire but in no event beyond age 65; or
- your benefits under the long term disability plan cease.

Conversion after Termination

If your employment is terminated (including upon retirement) and you are age 65 or under, you can have your basic life insurance coverage continued without medical evidence through an individual life insurance policy. To do this, you must apply in writing to the carrier within 31 days of the date you terminate. The cost of the individual policy will depend on your age and sex at the time you apply. The converted policy will not contain a waiver of premium benefit, disability benefits or other benefits or riders. The amount of the individual policy cannot exceed the amount of life insurance coverage provided under this Plan.

The conversion privilege is subject to the carrier's terms and conditions.

If you die within the 31-day period during which you are eligible to apply for individual life insurance, the maximum amount you were eligible to convert will be paid to your beneficiary. However, if any individual policy has been issued, the converted policy must be surrendered without payment of claim (premiums will be refunded) in order to be eligible for the group life insurance amount within the 31-day period.

Living Benefit

A living benefit is available under some circumstances if you become terminally ill. It is available in a one-time lump sum payment equal to the lesser of \$50,000 or 50% of your total basic life coverage provided your life expectancy is twelve months or less, you have been approved for basic life waiver of premium (this requirement may be waived in certain situations) and your beneficiary has consented to the payment of the living benefit. The difference between your regular life insurance benefit and the advance one-time payment, less accrued interest, will be paid to your beneficiary when you die. More detail is available from your employer.

Accidental Death and Dismemberment (AD&D)

Benefit Level

Your AD&D coverage is equal to the amount shown in the Schedule of Benefits.

Coverage

Your AD&D insurance provides benefits in the event of accidental death or injury which occurs on or off the job, 24 hours a day. For losses resulting from and occurring within 12 months of an accident, your AD&D insurance will pay according to the schedule below.

Please note that the schedule of losses is not promised under the terms of the collective agreement other than for Quadriplegia, Hemiplegia, Paraplegia and will therefore vary by carrier and is subject to change.

Covered Loss	% Principal Sum
Loss of Life	100%
Loss of Both Hands or Both Feet	100%
Loss of Entire Sight of Both Eyes	100%
Loss of One Hand and One Foot	100%
Loss of One Hand and the Entire Sight of One Eye	100%
Loss of One Foot and the Entire Sight of One Eye	100%
Loss of One Arm or One Leg	80%
Loss of One Hand or One Foot	75%
Loss of The Entire Sight of One Eye	75%

Covered Loss	% Principal Sum
Loss of Thumb and Index Finger of the Same Hand	33 1/3%
Loss of Speech and Hearing	100%
Loss of Speech or Hearing	75%
Loss of Hearing in One Ear	66 2/3%
Loss of Four Fingers of One Hand	33 1/3%
Loss of All Toes of One Foot	25%
Loss of Use of Both Arms or Both Hands	200%
Loss of Use of One Hand or One Foot	75%
Loss of Use of One Arm or One Leg	80%
Quadriplegia (total paralysis of both upper and lower limbs)	200%
Paraplegia (total paralysis of both lower limbs)	200%
Hemiplegia (total paralysis of upper and lower limbs of one side of the body)	200%

Note: Loss of a hand or a foot means severance through or above the wrist or ankle joint, but below the elbow or knee. Loss of sight, hearing, or speech must be entire and irrecoverable. Loss of use must be total and irrecoverable and must be continuous for a period of 12 months and such Loss of use is determined to be permanent. Paralysis means complete and irreversible paralysis caused by brain, spine, muscle, or nerve damage as a result of an accident which has continued for a period of 12 months from the date of the accident. Similar requirements exist for other losses.

In no case shall an amount greater than the principal sum be paid for all losses due to any one accident with the exception of:

- paraplegia;
- hemiplegia;
- quadriplegia;
- loss of use of both arms;
- loss of use of both hands;
- loss of use of both legs; and
- loss of use of one arm and one leg on the same side of the body,

where the maximum amount payable is 200% of the principal sum.

Payment will be directly to you or, in the event of your death, to your beneficiary or estate.

Disability

If you qualify for long term disability benefits, the amount of insurance in force on the date of expiration of the LTD elimination period will be continued without premium payment until the earlier of the date:

- you retire; or
- your benefits under the long term disability plan cease.

Conversion after Termination

If the current carrier offers this provision and your AD&D insurance terminates as a result of termination of employment or termination in a class you are eligible for insurance under this Plan, then you can convert to an individual policy of the type that is currently being offered by the carrier subject to the carrier's provisions and limitations. The minimum and maximum amount of coverage available for conversion will be determined by the carrier, as will the time limit to convert.

Limitations/Exclusions

AD&D insurance does not provide benefits for losses resulting directly or indirectly from any of the following:

- suicide or any attempt thereat by the you while sane;
- self inflicted Injury or any attempt thereat by you while sane or insane;
- declared or undeclared war or any act thereof;
- sickness, disease, or bodily infirmity whether the Loss or claim results directly or indirectly from any of these;
- mental incapacity whether the Loss or claim results directly or indirectly from any mental incapacity;
- sustained while you are undergoing the medical or surgical treatment of sickness, disease, or bodily or mental infirmity;
- stroke or cerebrovascular accident or event, cardiovascular accident or event, myocardial infarction or heart attack, coronary thrombosis, aneurysm;
- travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if you are:
- riding as a passenger in any aircraft not intended or licensed for the transportation of passengers; or
- performing, learning to perform or instructing others to perform as a pilot or crew member of any aircraft; or
- riding as a passenger in an Owned Aircraft or Leased Aircraft operated by the Policyholder.
- infections of any kind regardless of how contracted, except bacterial infections that are directly caused by botulism, ptomaine poisoning or an

accidental cut or wound independent and in the absence of any underlying sickness, disease or condition including but not limited to diabetes;

- injury or Loss sustained while you are on full-time active duty in the armed forces or organized reserve corps of any country or international authority. (Unearned premium for any period for which you are on full-time active duty shall, upon application to the Carrier by the Policyholder, be refunded);
- committing, attempting or provoking an assault or criminal offense excluding without limitation driving a vehicle with alcohol in the blood in excess of 80 milligrams of alcohol per 100 millilitres of blood. A "vehicle" means, a vehicle that is drawn, propelled or driven by any means other than muscular power;
- injury or Loss sustained while you are under the influence of a drug or substance which is controlled as specified under the Controlled Drug and Substances Act (Canada) unless taken pursuant to the advice of and in strict accordance with the instructions of a duly licensed Physician;
- an act, attempted act or omission taken or made by you, or an act, attempted act or omission taken or made with your consent, for the purposes of interrupting the blood flow to your brain or to cause asphyxiation to you whether with intent to cause harm or not; and
- natural causes.

Additional Benefits

Additional benefits are not promised under the terms of the Collective Agreement and may vary from carrier to carrier and may not be provided in the future. The policy in effect at the printing of the booklet provides for a rehabilitation benefit, workplace modification and accommodation benefits, psychological therapy, in-hospital benefit, identification benefit, daycare benefit, funeral expense benefit, bereavement benefit, a family transportation benefit, a home alteration and vehicle modification benefit, a continuing education benefit (for dependent children and spouse), a spousal occupational training benefit, a repatriation benefit, a seat belt benefit, and an exposure and disappearance benefit in the event that you are involved in an accident for which AD&D benefits are paid and you meet the insurer's criteria. Please refer to the current Plan Text for more information about the current coverage.

Weekly Indemnity (Non-Occupational Accident and Sickness)

The PPWC - Employer Trusteed Health & Welfare Plan includes disability benefit plans for all eligible members.¹ The carrier does not provide insurance for this benefit. It is the financial responsibility of the Trustees. The actual claims adjudication and payment of weekly indemnity claims is however completed by the carrier from the first day of payment. Cheques or electronic funds transfer (EFT) will be issued biweekly in arrears.

The plan is designed to provide partial income continuation in the event of an accident or illness which is medically certified and which causes the member to be disabled, as defined by the terms and conditions of the plan.

Everyone is a stakeholder in the Health & Welfare disability programs including those with the good fortune of never having been disabled. The Trustees want to be sure that those who qualify are provided with their entitled benefits and are assisted in returning to the workforce, where applicable. The Trustees do not condone misuse of the plans. As stakeholders, most of us know that the quality and integrity of any plan can suffer as a result of abuse. The carrier agrees with these beliefs and will address confirmed cases of plan misuse.

Definition of Disability

Weekly indemnity is paid for periods during which you are disabled and prevented from performing the duties of your own occupation as a result of non-occupational accident or sickness. Several conditions must be met as outlined below. For example, you must be under the regular attention of a qualified physician or relevant and certified specialist, or a chiropractor during the first two weeks of benefits only.

Benefit Amount

You will receive a benefit equal to 62% of your weekly earnings, rounded to the next higher multiple of \$1.00, subject to a weekly benefit maximum as follows:

Zellstoff Celgar Limited (Castlegar), Skookumchuck Pulp Inc, Catalyst Paper Corporation (Crofton Pulp and Paper Division), Canfor Pulp Ltd. (Prince George Pulp & Paper and Intercontinental) and Chemtrade Pulp Chemicals Limited Partnership (Prince George), and PPWC National Office:

May 1, 2018	\$1,020
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Your weekly earnings means your hourly straight time rate times your regular numbers of hours scheduled per week (to a maximum of 40 hours per week). You are automatically covered for any negotiated changes in your hourly straight time rate.

¹ Weekly indemnity is not provided for employees of Nanaimo Forest Products Ltd. by this plan.

Here is an example:

$62\% \times \$32.975 \text{ hr rate} \times 40 \text{ hours} = \818 per week . This benefit will be reduced by earnings from employment outside the mill (including self-employment) except for that portion you were earning regularly prior to becoming disabled.

Elimination Period

If your disability is the result of a non-occupational accident, benefits are payable on the first day of disability. Provided you see a physician within three days of the accident, benefits will be paid retroactive to the accident date. If you do not see a physician until after three days, benefits will not begin until the date you first see a physician.

If you are hospitalized (or if invasive surgery was performed that would customarily be done in a hospital setting) or if any surgery is performed which necessitates time off work, weekly indemnity benefits will be paid with no elimination period (i.e. from the first day of disability).

In order for benefits to be paid retroactive to the first day of illness if you were hospitalized after the three day elimination period, your illness must have been uninterrupted and the subsequent hospitalization must have been a result of the same illness for which the weekly indemnity payments are paid.

If your disability is the result of a non-occupational sickness, there is a three day elimination period. Benefits will be paid from the fourth day of disability or from the date of a physician's visitation, if later than the fourth day of disability. Please note that if you have a serious illness requiring kidney dialysis, chemotherapy, radiation, or other similar recurring treatments you are required to satisfy only one elimination period.

Duration of Benefits

Benefits are payable for as long as you remain disabled to a maximum of 52 weeks of weekly indemnity benefits. If you attain age 65 while receiving weekly indemnity benefits, your benefits will cease once you have received at least 15 weeks of benefits, you are no longer disabled or you retire, whichever comes first.

If there is a lay-off or if the Plan terminates while you are receiving benefits, then payments will continue for the maximum benefit period as long as you remain totally disabled.

Consecutive Periods of Disability

If you return to work for less than two weeks and become disabled due to the same or related cause, the second period of disability will be considered a continuation of the previous period of disability. If you return to work and work full-time for two or more consecutive weeks, a new claim will be established if you again become disabled from the same or related cause. Vacation days, floating holidays, statutory holidays, banked time and other paid or unpaid time off will not count towards satisfying this provision.

Benefits while on Lay-off or Unpaid Leave of Absence

If you elected to continue your benefit coverage during your lay-off or unpaid leave of absence, no benefits are payable if your disability occurs during a lay-off or unpaid leave of absence. However, if you remain disabled when the lay-off or leave of absence ceases, you can commence satisfying the elimination period. Once the elimination period is satisfied, payments will commence assuming you have elected to continue your coverage and you have paid the required premiums during the layoff/leave of absence period.

If you opted not to continue benefits during your lay-off or unpaid leave of absence and you became disabled, upon return to work, you would not be eligible to apply for Weekly Indemnity benefits, because premiums were not being paid when the disability occurred. Your ability to claim for disability benefits upon return to work from a lay-off or leave of absence requires that premiums must have been paid at the time of disability.

Conversion after Termination

Weekly indemnity benefits cannot be converted to an individual policy or extended. Your coverage will terminate immediately on the date your employment is terminated.

Limitations

No weekly indemnity benefits are paid for that part of a weekly indemnity benefit period during which:

- you are not under the regular care and attention of a qualified physician or relevant and certified specialist (or of a chiropractor during the first two weeks of weekly indemnity payments);
- you are not receiving required treatment for your condition;
- you are imprisoned in a penal institution or confined in a hospital, or similar institution, as a result of criminal proceedings;
- you are eligible to receive benefits under any Workers' Compensation Law or any similar law;
- you are absent from British Columbia without the approval of the carrier;
- you reside outside of Canada for any period exceeding 90 consecutive days or a total of 180 days in any 365 day period unless:
 - you have previously notified and received approval in writing from the carrier;
 - you remain under the regular care of a physician deemed appropriate by the carrier; and,
 - proof of ongoing disability can be determined on evidence satisfactory to the carrier in English or French within 30 days of request.
- You are on paid time off;

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- You perform work for wages or in expectation of a profit without the approval of the carrier;
 - You are not suffering a loss of weekly earnings from your employer as a result of the disability.

Benefits will be withheld unless you continue to provide sufficient medical evidence which supports your inability to work. Such evidence may include any of the following:

- periodic supplementary statements from your physician;
- referral to specialists;
- independent medical examinations by a physician selected by the carrier if requested by the carrier.

Exclusions

The Weekly Indemnity benefit does not cover a disability which results from any of the following:

- Cosmetic surgery, unless the surgery is due to an accident;
- Voluntary participation in war, riot or insurrection;
- Intentionally self-inflicted injuries or sickness whether sane or insane, other than attempted suicide;
- The course of employment;
- Participation in the commission of a criminal offense;
- An accident which occurs while you are operating a motor vehicle and the blood contains more than 80 milligrams of alcohol in 100 milliliters of blood (.08%); or,
- Injury or sickness which occurred while you were on active duty in the armed forces of any country, state or international organization or resulting from war or act of war, whether declared or undeclared.

Third Party Liability

There is a subrogation provision under the Plan. In the event you recover an amount from a liable third party for the loss of income resulting from the same accident or illness, then you must reimburse the carrier on behalf of the Plan to the extent that the net third party recoveries plus weekly indemnity benefits exceed 100% of your gross wages lost.

Voluntary Graduated Return-to-Work

Weekly indemnity benefits will be reduced by 50% of any earnings paid by your employer during a graduated return to work. The employment earnings from the return

to work program, together with your reduced weekly indemnity benefit, will not exceed 100% of your pre-disability earnings. The integration of earnings formula provides an increased financial incentive as you build up your hours of work to the point that you return to full-time employment.

Appeal Process

The carrier's declination letter or explanation of benefits will explain how you can appeal a claim decision that you do not agree with. Generally, your written notice of your intent to appeal must be submitted to the carrier within 60 days of the date of the declination letter. The additional medical evidence required to support the appeal may follow this written notice of appeal to the carrier.

Disputed Workers' Compensation Claims

Workers' Compensation is payable for work-related injury or disease. If your claim is not accepted by WorkSafeBC (WCB), then you may claim for weekly indemnity benefits provided you have been off work for at least two weeks. If the WCB subsequently accepts your claim, then you must repay the weekly indemnity benefits you received.

Before any weekly indemnity benefits are paid, you will be required to complete and submit a reimbursement agreement to the carrier, and submit proof of the disputed WCB claim.

Canada Pension Plan (CPP) Disability Benefits

You may be eligible for CPP disability benefits if you are unable to perform any substantial gainful employment and suffer from a physical or mental condition that is severe and prolonged. In order to be eligible, you must have made CPP contributions for at least two of the last three years or for five out of the last ten years. CPP disability benefits do not affect your weekly indemnity benefits and are payable monthly from the fourth consecutive month following the month of disability, and you should make application at that time.

Long Term Disability (LTD)

The PPWC - Employer Trusteed Health & Welfare Plan includes disability benefit plans for all eligible members. The plan is designed to provide partial income continuation in the event of an accident or illness which is medically certified and which causes the member to be disabled, as defined by the terms and conditions of the plan.

Everyone is a stakeholder in the Health & Welfare disability programs including those with the good fortune of never having been disabled. The Trustees want to be sure that those who qualify are provided with their entitled benefits and assistance in returning to the workforce, where applicable. The Trustees do not condone misuse of the plans. As stakeholders, most of us know that the quality and integrity of any plan can suffer as a result of abuse. The insurer agrees with these beliefs and will address confirmed cases of

plan misuse.

Eligibility for Benefits and Elimination Period

LTD benefits are payable if:

- You are disabled in accordance with the definition of disability under the plan;
- The disability lasts longer than 52 weeks (the LTD elimination period);
- You are under the regular care and attention of a qualified physician or relevant specialist; and
- You are receiving required treatment for your condition.

Payments start on the later of 52 weeks or the date weekly indemnity benefits cease and are made monthly in arrears.

You should apply for LTD benefits after you have been away from work due to disability for a period of 38 to 42 weeks (even if you are receiving WCB benefits instead of weekly indemnity or EMBA benefits). The carrier or your employer will assist you with your application.

Benefit Amount

You will receive a benefit equal to 50% of your monthly earnings. Your monthly earnings means your hourly straight time rate plus any negotiated increases in straight time earnings that took place during the elimination period times your regular number of hours scheduled per week (to a maximum of 40 hours per week) times 52 weeks divided by 12 months. Here is an example:

$50\% \times \$30.77 \text{ hr rate} \times 40 \text{ hours} \times 52 \text{ weeks} / 12 \text{ months} = \$2,667 \text{ per month}$

For Nanaimo Forest Products Ltd. staff employees, monthly earnings means your monthly base salary as at the date of disability. The LTD benefit is subject to a monthly maximum of \$8,000.

Benefit Duration

As long as you meet the definition of disability and the conditions of payment, the LTD benefit will continue until the earlier of:

- Death
- Recovery
- The date you no longer meet the definition disability
- 60 months of payment plus one month for each 2 full months of continuous service beyond 60 months service with your employer as of your date of disability. You will receive benefits to age 60 as a minimum

- The date you reach age 65

In no event will benefits be paid beyond age 65.

If there is a lay-off or if the Plan terminates while you are receiving benefits, then payments will continue for the maximum benefit period as long as you remain totally disabled.

LTD Benefits After Five or More Years

Nanaimo Forest Products Ltd. - Hourly Employees

The PPWC – Employer Trusteed Health & Welfare Plan offers a 5-year LTD benefit recalculation for all eligible members. If you are under 60 years of age and have reached your five-year anniversary on LTD since the start of LTD benefit payments, your future disability benefit is recalculated using the greater of your existing long term disability benefit or a recalculated benefit using the base rate effective on the anniversary date.

If you reach a subsequent five-year anniversary (i.e. 10 years, 15 years, 20 years, etc.) on LTD and are still under 60 years of age, you will again have your future disability benefit recalculated using the greater of your existing long term disability benefit or a recalculation using the base rate that is in place on that date.

The recalculated monthly benefit when combined with all other disability income, which you are receiving, will not exceed 70% of the base rate income in effect at the effective date of the recalculation.

Example

Current LTD benefit:	\$2,666.73
Base rate at LTD anniversary date:	\$ 32.98
Recalculation of LTD benefit:	
LTD benefit at LTD anniversary date:	\$ 2,858.27
Primary CPP at LTD anniversary date:	\$958.30
Total income at LTD anniversary date:	\$3,816.57 – less than the 70% all source maximum of \$4,001.57
Increase to LTD monthly benefit:	\$191.53 (\$2,858.27 - \$2,666.73)
(1) Calculation of LTD benefit	
	\$32.98/ hour rate x 40 hours x 52 weeks / 12 months x .50 = \$2,858.27
(2) Calculation of all source maximum	
	\$32.98/ hour rate x 40 hours x 52 weeks / 12 months x .70 = \$4,001.57

Nanaimo Forest Products Ltd. staff employees are not eligible for a LTD benefit recalculation.

LTD Benefits After One or More Years

Zellstoff Celgar Limited, Catalyst Paper Corporation, Chemtrade Pulp Chemicals Limited Partnership, Canfor Pulp Ltd., Skookumchuck Pulp Inc., and PPWC National Office

The PPWC – Employer Trusteed Health & Welfare Plan offers an annual LTD benefit recalculation for all eligible members. If you are under 60 years of age annually on your LTD anniversary date, your future disability benefit is recalculated using the greater of your existing long term disability benefit or a recalculated benefit using the hourly straight time rate effective on the anniversary date.

The recalculated monthly benefit when combined with all other disability income, which you are receiving, will not exceed 80% of the hourly straight time rate income in effect at the effective date of the recalculation.

Example

Current LTD benefit:	\$2,666.73
Hourly straight time rate at LTD anniversary date:	\$32.98
Recalculation of LTD benefit:	
LTD benefit at LTD anniversary date:	\$2,858.27
Primary CPP at LTD anniversary date:	\$958.30
Total income at LTD anniversary date:	\$3,816.57 – less than the 80% all source maximum of \$4,573.23
Increase to LTD monthly benefit:	\$191.53 (\$2,858.27 - \$2,666.73 \$)

- (1) **Calculation of LTD benefit**
 $\$32.98 / \text{hour rate} \times 40 \text{ hours} \times 52 \text{ weeks} / 12 \text{ months} \times .50 = \$2,858.27$
- (2) **Calculation of all source maximum**
 $\$32.98 / \text{hour rate} \times 40 \text{ hours} \times 52 \text{ weeks} / 12 \text{ months} \times .80 = \$4,573.33$

Definition of Disability

You are considered disabled if you are unable to perform the duties of your own occupation because of sickness and/or injury during the first 18 months of long term disability benefit payments. After this period, you continue to be considered disabled if you are unable to perform the duties of any occupation for which you are qualified by education, training or experience.

Consecutive Periods of Disability

If you again become disabled from the same or related cause within 6 months of returning to full-time work, your monthly benefit will resume immediately and payment will start again one month after the date you become totally disabled. If you return to work on a full-time basis and become disabled due to illness or injury unrelated to the first disability, the second period of absence will be considered a new disability.

Rehabilitative Employment

Rehabilitative employment means any occupation, or employment for wage or profit, or any course or training that entitles you to an allowance. The rehabilitative employment must be approved by your physician in consultation with the carrier.

Monthly Benefit while Participating in Rehabilitative Employment

If you engage in rehabilitative employment, your monthly LTD benefit will be reduced by 50% of your rehabilitative employment income that exceeds \$50 per month. Your LTD benefit will be further reduced by the amount that remuneration from rehabilitative employment plus LTD benefit exceeds 75% of your monthly earnings based on the straight time rate in effect on the day before your LTD benefits commenced.

Duration of Rehabilitative Employment

You may continue until your earnings from rehabilitative employment exceed 75% of your monthly earnings. In no event can you continue in rehabilitative employment beyond 24 months.

Other Disability Income

Nanaimo Forest Products Ltd.

The maximum you can receive from all sources is 70% of your pre-disability monthly earnings. Pre-disability monthly earnings for Nanaimo Forest Products Ltd. – Hourly employees is based on your hourly straight time rate at your date of disability plus any increases which took place during the LTD elimination period.

Therefore, your LTD benefit will be reduced by the amount that your total disability income from all sources (as listed below), including LTD, (but excluding a WCB permanent partial disability award from a previous non-related disability) exceeds 70% of your pre-disability earnings.

Example

70% x \$32.98 hr rate x 40 x 52 weeks / 12 months = \$4,001.57 all source maximum

LTD benefit	\$2,858.27
Primary CPP disability benefit	\$1,200
Disability income from all sources	\$4,058.27
All source maximum	\$4,001.57
Excess	\$56.69

The LTD benefit payable, rounded to the next dollar is \$2,802 per month (\$2,858.27 - \$56.69).

Zellstoff Celgar Limited, Catalyst Paper Corporation, Chemtrade Pulp Chemicals Limited Partnership, Canfor Pulp Ltd., Skookumchuck Pulp Inc., and PPWC National Office

The maximum you can receive from all sources is 80% of your pre-disability monthly earnings (based on your hourly straight time rate at your date of disability plus any increases which took place during the LTD elimination period.) Therefore, your LTD benefit will be reduced by the amount that your total disability income from all sources (as listed below), including LTD, (but excluding a WCB permanent partial disability award from a previous non-related disability) exceeds 80% of your pre-disability earnings.

Example

80% x \$34.43 hr rate x 40 x 52 weeks / 12 months = \$4,774.29 all source maximum

LTD benefit	\$2,983.93
Primary CPP disability benefit	\$1,441.88
WCB benefit	\$750.45
Disability income from all sources	\$5,176.26
All source maximum	\$4,774.29
Excess	\$401.97

The LTD benefit payable, rounded to the next dollar is \$2,582 per month (\$2,983.93 - \$401.97).

Other disability income includes:

- CPP primary disability pension benefits;
- WorkSafeBC benefits payable for the same or related disability;
- disability income from a group or association plan;
- disability income arising out of any law or legislation;

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- wage continuation or pension plan of any employer including the Pulp and Paper Industry Pension Plan.

Benefits from your private or individual disability plan are not included as other income.

Increases in CPP or WCB Disability Pension

Once you have started to receive your LTD benefit, periodic adjustments to your CPP or WCB disability benefits due to increases in the Consumer Price Index will **not** reduce your monthly LTD payments.

Minimum LTD Benefit Amount

You will receive a minimum of \$25 per month if your other disability income reduces the LTD benefit below \$25.

Benefits while on Lay-off or Unpaid Leave of Absence

If you elected to continue your benefit coverage during your lay-off or unpaid leave of absence, no benefits are payable if your disability occurs during a lay-off or unpaid leave of absence. However, if you remain disabled when the lay-off or leave of absence ceases, you can commence satisfying the elimination period. Once the elimination period is satisfied, payments will commence assuming you have elected to continue your coverage and you have paid the required premiums during the layoff/leave of absence period.

If you opted not to continue benefits during your lay-off or unpaid leave of absence and you became disabled, upon return to work, you would not be eligible to apply for Long Term Disability benefits, because premiums were not being paid when the disability occurred. Your ability to claim for disability benefits upon return to work from a lay-off or leave of absence requires that premiums must have been paid at the time of disability.

Conversion after Termination

Your LTD insurance will terminate immediately on the date your employment is terminated. You cannot convert this coverage to an individual plan.

Other Benefits while Receiving LTD Payments

Your coverage under the Medical Services Plan, extended health, dental, basic life and AD&D insurance will continue in accordance with the conditions of those plans. You are not required to pay weekly indemnity or LTD premiums while you are receiving LTD benefits.

Limitations

No LTD benefits are paid for that part of a LTD benefit period during:

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- which you are not under the regular care and attention of a qualified physician or relevant and certified specialist;
 - which you are not receiving required treatment for your condition;
 - which you are imprisoned in a penal institution or confined in a hospital, or similar institution, as a result of criminal proceedings;
 - any leave of absence (including maternity/parental leave);
 - a strike, lockout or layoff, if the disability begins on or after the strike, lockout or layoff begins;
 - which you are absent from British Columbia without the approval of the carrier;
 - which you reside outside of Canada for any period exceeding 90 consecutive days or a total of 180 days in any 365 day period unless:
 - you had previously notified and received approval in writing from the carrier;
 - you remain under the regular care of a physician deemed appropriate by the carrier; and,
 - proof of ongoing disability can be determined on evidence satisfactory to the carrier in English or French within 30 days of request;
 - which you perform work for wages or in expectation of a profit without the approval of the carrier; or
 - which you are not suffering a loss of earnings from your employer as a result of the disability during the LTD benefit payment period.

Benefits will be withheld unless you continue to provide sufficient medical evidence which supports your inability to work. Such evidence may include any of the following:

- periodic supplementary statements from your physician;
- referral to specialists;
- independent medical examinations by a physician selected by the carrier if requested by the carrier.

Exclusions

LTD insurance does not provide benefits for any disability resulting from any of the following:

- war, insurrection, rebellion or service in the armed forces of any country;
- participation in a riot, civil commotion or in the commission of a criminal offence;
- an accident which occurs while you are operating a motor vehicle and the blood contains more than 80 milligrams of alcohol in 100 milliliters of blood (0.08%);

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- intentionally self-inflicted injuries

Pre-existing Condition Limitation

If you received treatment or medical supplies for a disability within 90 days prior to joining the Plan, that disability will not be covered until you complete 12 consecutive months of employment during which you are not absent from work as a result of the disability.

Importance of Applying for Long Term Disability

It is very important that you apply for LTD benefits within the plan's time limits in the event that you become disabled, even if your disability is due to a work-related accident or injury and you are in receipt of Workers' Compensation benefits. Having an approved LTD claim is important for the following reasons:

- to ensure you receive all of the benefits for which you are eligible;
- to ensure coverage is in place in the event that the Workers' Compensation claim is terminated or if you become disabled from another cause; and,
- to ensure your life and accidental death and dismemberment coverage continues.

Appeal Process

The carrier's declination letter or explanation of benefits will explain how you can appeal a claim decision that you do not agree with. Generally, your written notice of your intent to appeal must be submitted to the carrier within 60 days of the date of the declination letter. The additional medical evidence required to support the appeal may follow this written notice of appeal to the carrier.

8. Claims

There are different forms for claiming your benefits. The following briefly describes the procedures for each benefit. Time limitations for legal claims will be in accordance with the agreements made with the carriers by the Trustees.

Basic Life and AD&D

Your employer should be contacted for the necessary forms.

Weekly Indemnity

You should obtain two forms from your employer: 1) Employee's Statement, 2) Physician's Statement. When you and your physician have completed the form return it to your employer. Alternatively, you can send the employee and physician statements directly to the carrier. Claims should be submitted as soon as possible after the onset of disability but no later than 6 months after the end of the first month following the elimination period.

You should see a physician as soon as you become disabled to ensure your claim is not jeopardized. Medical confidentiality is available upon request. Your employer will also be required to complete a form and submit it to the carrier.

Long Term Disability

If it appears that you will receive the weekly indemnity benefit for the maximum period, the carrier will automatically send you the necessary forms to apply for LTD. You should receive the forms after the 39th week of weekly indemnity benefits and return them as soon as possible. If you are not receiving benefits from the Plan, but are doing so from an EMBA plan or WCB, you can obtain forms from your employer and should ensure that your LTD claim is filed no later than 6 months after the end of the first month following the elimination period.

Note: The weekly indemnity and the long term disability plans (through your employer) will reimburse you for eligible charges made by your physician for completing the required medical forms required by the carrier if the employer will be reimbursed by the carrier. (See Schedule of Benefits for maximum reimbursement amounts).

9. Questions

Questions regarding your coverage may be directed to the Plan Administrator at your mill site. Alternatively, you may contact the carriers directly.

For Basic Life, Weekly Indemnity & Long Term Disability

A toll free line for the PPWC – Employer Trusteed Health & Welfare Plan has been established with Desjardins Financial Security for your basic life insurance, weekly indemnity and long term disability benefits. The hours of operation are 8:00 am to 4:00 p.m. Monday through Friday. A voice mail may be left outside of these hours for one of the Plan's adjudicators. If you have any questions regarding the status of a claim, coverage under the Plan or how to complete forms, please feel free to use the line. The toll free number is: 1-877-718-4422.

For Accidental Death and Dismemberment

For general and claim inquiries, feel free to contact AIG Insurance Company of Canada at 1-800-663-0231. The hours of operation are 8:30 am to 5:00 p.m. Monday through Friday.