

ROOFERS LOCAL UNION 30

SUMMARY OF BENEFITS

As at July 1, 2025

All Benefits are subject to the terms of the Insurance Policies and the official Plan Documents. The document is a summary. The final determination of Benefits is based on the rules set out in the official Plan Documents.

BENEFITS		ACTIVE MEMBERS
Life Insurance:	Benefit Amount:	\$75,000
AD & D:	Principal Amount:	Maximum of \$100,000
Dependant Life Insurance:	Benefit Amount:	Spouse: \$10,000; Child (from birth): \$8,000
Critical Illness:	Benefit Amount:	Maximum of \$20,000
Long Term Disability Income:	Maximum Benefit Amount:	\$1,750 per month
	Qualifying Period:	Commencing with the 17th week of continuous Total Disability. Payable to the earliest of death, recovery or attainment of age 65. Any occupation. Taxable benefit.
	Benefit Duration:	Maximum to age 65
Dental:	Deductible:	Nil
	Reimbursement:	100% for basic expenses. 50% for dentures. 50% for crowns and bridges.
	Fee Guide:	2024 Ontario Dental Association Suggested Fee Guide, General Practitioners
	Maximums:	\$2,000 per person each calendar year
Vision Care:	Member Benefit Amount:	\$600 maximum benefit every 2 calendar years for Active Members, Spouses and Dependant Children 18 years of age and over
	Dependant Benefit Amount:	\$300 maximum benefit every calendar year for Dependant Children under 18 years of age
	Refractions (Testing for Eyeglasses):	\$100 maximum benefit every 2 calendar years
Medical Benefit: <i>Enrollment in Provincial Health Care Plan is mandatory. Provincial Plan is the first payer.</i>	Individual Yearly Maximum:	Unlimited
	Reimbursement:	100% of most eligible expenses subject to maximums and limits below; 100% of generic drug ingredient cost; 25% of brand name drug ingredient cost. If no generic drug is available, Plan will pay 100% of the brand name drug ingredient cost.
	Practitioners:	Chiropractors are covered at \$500 per year. Speech therapist are covered at \$600 per year. Physiotherapist is covered at 100% limited to reasonable and customary charges, maximum of \$2,500 per calendar year, per person. Licensed Massage Therapist covered each at 100% limited to reasonable and customary charges, maximum of \$2,000 per calendar year, per person. Accupuncture is covered at \$300 per year. Podiatrists' services are covered at 100%. Naturopath covered \$500 per year.
	Prescription Drugs:	Reimbursement (as described above) for drugs which by law require the written prescription of a physician. Includes anesthetics and diabetic supplies. Over the counter drugs, vitamins, birth control and minerals are not covered. Medical marijuana (with restrictions) covered at \$1,000 per year.
	Outpatient Services:	Hospital services and supplies obtained from an out-patient department of a licensed hospital or surgical supply company while not confined in a hospital.
	Mental Health:	Services of a licensed Psychologist, Social Worker, Clinical Counsellor, Marriage & Family Therapist, Psychotherapist and Psychoanalyst are covered to a combined maximum of \$2,500 per person per year.
	Medical Services and Supplies:	Licensed ambulance (land, air/rail (unlimited)), medical equipment & supplies, foot orthotics or orthopaedic shoes covered at \$500 per calendar year. Diagnostic x-ray and laboratory expenses. Blood serum and oxygen. Purchase of braces, crutches, surgical stockings, artificial limbs and eyes and prosthetic devices. Rental of, or at the insurance company's option, the purchase of a wheelchair, hospital-type bed or other durable equipment for temporary therapeutic use.
	Private Duty Nursing	Up to \$10,000 every 3 calendar years
	Accidental Dental:	Necessary dental treatment required as a result of an accidental injury limited to a maximum benefit of \$5,000 per accident
	Hearing Aids:	\$400 per calendar year. New instrument allowed every 4 calendar years.
Emergency Travel Assistance (ETA):	Lifetime Maximum:	Unlimited
	Coverage:	Emergency medical coverage and travel assistance services for Members and eligible dependants while travelling for periods of up to 60 days per trip. Must be in condition of stable health prior to departure. Unlimited maximum. Referrals are not covered.
Othtodontic Benefit	Coverage:	Lifetime maximum benefit of \$1,000 for dependant children under age 18 only.
Current Benefit Contribution:	Contribution Amount:	Members will become eligible for benefits on the first day (1st) of the second (2nd) month after accumulating \$1,395 of contributions in his/her Dollar Bank. After that, the Member must have \$465 in his/her Dollar Bank to be covered for benefits for the month. Additionally, the Member must be in Good Standing with the Local Union.

Roofers Local Union 30 Benefit Plan Administration Office
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