OVER the WIRE



Coming Soon. Membership SURVEY

Last year, TELUS Health welcomed LifeWorks into the TELUS family.

Over time, you will start seeing this change when using your EFAP services.

Employee and Family Assistance Plan

Your Plan provides an Employee and Family Assistance Plan (EFAP) offered through TELUS Health (formerly LifeWorks). The EFAP is a confidential and voluntary support service that can help you take the first step toward change. Let TELUS Health help you find solutions to the challenges you face at any age and stage of life.

The Employee and Family Assistance Program (EFAP) is available to all Plan Members and their Dependents to access immediate and confidential support in a way that is most suited to your preferences, comfort level and lifestyle.

Your EFAP is completely confidential within the limits of the law. No one, including your employer or union, will ever know that you have used the program unless you choose to tell them.

There is no cost to you or your family to use your EFAP.

This benefit is provided to you through your Plan. Your EFAP can provide a series of sessions with a professional and if you need more specialized or longer-term support, TELUS Health's team of experts can suggest an appropriate specialist or service that is best suited to your needs.

While fees for these additional services are your responsibility, they may be covered by your provincial or other programs, including this benefits plan. These additional services may include longer-term support or treatment services covered by your provincial or other programs, including this benefits program.

Is your contact information up to date?









Solutions for YOUR WORK, HEALTH AND LIFE

Achieve wellbeing

• **Stress** – Mental health concerns – Grief and loss – Crisis situations

Manage relationships and family

 Communication – Separation/ divorce – Parenting

Deal with workplace challenges

• Stress – Performance – Work-life balance

Tackle Addictions

 Alcohol – Drugs – Tobacco/Nicotine – Gambling

Find child and elder care resources

 Child care – Schooling – Nursing/ retirement homes

Get legal advice

• Family law - Separation/divorce - Custody

Receive financial guidance

• **Debt management** – Bankruptcy – Retirement

How Can I Contact TELUS Health (formerly LifeWorks)?

Access your EFAP 24/7 by phone, web or mobile app.

English: 1-877-207-8833 French: 1-877-370-1080 TTY: 1-877-371-9978

www.login.lifeworks.com Username: ebfa Password: mywellness



Paramedical and Major Medical

Referrals

Effective May 1, 2022, referrals for paramedical services and medical supplies/devices, including orthotic inserts, can be obtained from either a nurse practitioner or physician. Eligible expenses **must be medically necessary** for the treatment of an illness or injury. All expenses under this benefit must be first prescribed by a physician, nurse practitioner or other qualified medical practitioners (i.e. a chiropractor for chiropractic expenses).

Medical referrals must contain specific information such as:

- Name of Patient
- Date of Prescription
- The physician must confirm they are recommending a specific treatment provider (i.e. physiotherapist, massage therapy, etc.)
- Name of the medical clinic, address and phone number
- Physician's Name
- Physician's Designation
- Physician's Signature
- Diagnosis (when applicable)

For benefits that have a calendar year maximum, the medical referral is kept on file and remains in effect for one year from the date prescribed by the qualified medical practitioner.

To avoid delay in claims processing, Plan Members should submit their medical referrals at the same time the claim form is submitted to the Fund Office.

Changes to the PSYCHOLOGICAL BENEFIT

Effective October 1, 2022, services of a provisional psychologist can be considered under the psychological Benefits.

The psychological Benefit includes the services of a chartered, certified, provisional or registered psychologist, limited to a maximum Benefit of \$500 per person per calendar year. The most recent Reasonable and Customary Charges per visit apply to all treatments.

What you should know:

- Psychological services must be performed on an individual basis with the provider
- Psychological Benefits exclude any charges for testing of children for learning problems and parent interviews regarding children
- Psychological services performed by a clinical counselor or social worker are not covered

Continuous Glucose Monitoring - Dexcom System

Continuous glucose monitoring (CGM) systems are wearable devices that track blood glucose every few minutes. Dexcom Inc. manufactures and distributes CGM systems for diabetes management.

Since November 1, 2022, coverage for the Dexcom CGM system and supplies has been administered by the prescription drug administrator, ClaimSecure.

Coverage:

- Open to all eligible Plan Members and Dependents with Type 1 or Type 2 diabetes, with a physician's / nurse practitioner's referral.
- Dexcom supplies (receivers, transmitters and sensors) remain covered at 100%.
- Eligible expenses for Dexcom supplies remain covered as a supplemental health benefit and are not subjected to the \$10,000 calendar year maximum for Prescription Drugs.

What you should know:

- Even though ClaimSecure administers the Dexcom supplies, your drug card will not work at your pharmacy. Claims for Dexcom supplies will need to be submitted to ClaimSecure via eProfile, email, or by standard mail. If submitting claims by email or mail, a Prescription Drug claim form must be completed.
- Claims for other CGM systems will continue to be submitted to the EBFA Fund Office for processing. Please complete the Supplementary Health Expense Supplies claim form with your submission.



Frequently Asked Questions

How do I designate a Beneficiary before I retire?

At any time prior to retirement, the Plan Member can complete a new "Registration and Declaration of Beneficiary Form" to change their Beneficiary(s) and file that completed form with the Plan office.

If my service terminates, do I lose my Benefit entitlement under the Pension Plan?

No, once a Plan Member has met the eligibility requirement (previously called the vesting rule), they cannot lose their earned entitlements, even if the Plan Member is no longer working in Covered Employment. However, if a Plan Member terminates membership before having met the eligibility requirements, then there is no entitlement to Benefits from the Pension Plan.

Can a Plan Member make Contributions to the Pension Plan?

No, your Pension plan does not allow Plan Members to make Contributions on their own behalf. Do union dues affect my entitlement to take my pension? No.

Are you a Plan Member who is in receipt of a pension from the Plan, who has returned to work with Local 424? Have you heard about the new Electrical Industry Savings Plan?

Plan members who are in receipt of a pension from the Plan and who are under age 71 can accrue pension benefits from contributions on and after January 1, 2022 if they meet the requirements for the Electrical Industry Savings Plan. Please refer to the Over the Wire November 2022 edition (available on our website www.ebfa.ca) or contact the Pension Team at the Fund Office to learn more about the Savings Plan.



You asked and We listened

In 2015, we sent out our first Membership Survey. It was our way to better understand your experiences with your Electrical Workers' Benefits Plan, Pension Plan and our service delivery.

We received over 800 valuable responses from our members.

The survey results helped shape many of the actions we have taken. We have implemented the following improvements as a direct result of the survey results:

- Regular newsletters with updates and other information about the plans.
- Pension Calculator
- Pension and Benefits booklets
- New updated and more user-friendly website.

We look forward to your responses in the upcoming 2023 Membership Survey

This bulletin provides summary information about the Electrical Industry Insurance Benefit Trust Fund of Alberta and the Electrical Industry Pension Trust Fund of Alberta (registration no. 0383224) in simple terms. It is not intended to be complete or comprehensive, or to provide legal, financial or medical advice. If there is a conflict between this newsletter and the legislation terms that govern the plans (including in any plan text, trust agreement, insurance contract or policy), the terms that govern the plans will apply in all cases. Each of the plans is administered by a Board of Trustees, c/o Employee Benefit Funds Administration Ltd. (EBFA). You can contact EBFA for more information about either plan and your entitlements under those plans.



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