

**CITY OF SASKATOON  
EXTENDED HEALTH COVERAGE**

Labour Group	Drugs					Paramedic			Vision	HCSA *	
	Co-insurance	Maximum	CRC **	Per Prescription Deductible	Dispensing Fee Cap	Co-insurance	Maximum	Co-insurance	Maximum	Eye Examinations	
ESA/Sr. Administration	100%	\$750	Y	N/A	N/A	100%	\$400	100%***	\$400 max/2 years	\$100 max/2 years	\$500
SCMMA	80%	\$1,500	Y	\$10.00	N/A	80%	\$400	80%***	\$400 max/2 years	\$100 max/2 years	N/A
CUPE 59	80%	\$1,500	Y	N/A	\$5.00	80%	\$400	100%***	\$350 max/2 years	\$135 max/2 years	N/A
CUPE 47	80%	\$700	Y	N/A	N/A	80%	\$300	100%***	\$200 max/2 years	\$100 max/2 years	N/A
CUPE 2669	80%	\$500	Y	N/A	N/A	100%	\$300	100%	\$150 max/2 years	\$100 max/2 years	N/A
CUPE 859	80%	\$1,000	Y	\$10.00	N/A	100%	\$300	100%	\$200 max/2 years	\$100 max/2 years	N/A
ATU 615	100%	\$1,400	Y	N/A	N/A	100%	\$350*** *	100%	\$400 max/2 years	\$120 max/2 years	N/A
IBEW 319	90%	\$400	N	N/A	N/A	90%	\$350	90%	\$200 max/2 years	\$50 max/2 years	N/A
IAFF 80	80%	\$850	Y	N/A	N/A	80%	\$500	80%	\$200 max/2 years	\$50 max/2 years	N/A

\* Health Care Spending Account (HCSA)

\*\* Client Reimbursement Card (CRC)

\*\*\* Includes Laser Eye Surgery

\*\*\*\* \$350 maximum for all paramedical services except for massage therapy which has a \$500 maximum

Benefit eligibility and coverage levels may vary depending upon your employment status and your union/employment group affiliation. Some benefits may not be available. Applicable waiting periods apply. In the event of any error or misunderstanding, the terms of the plan policy will apply.

