



**EMPLOYEE BENEFITS - SUPPORT STAFF UNION AND NON-UNION  
PERMANENT FULL TIME AND PART TIME EMPLOYEES**

PLAN	BENEFIT	ELIGIBILITY	EMPLOYEE COST	EMPLOYER COST	EFFECTIVE DATE OF PREMIUMS
<b>Group Life Insurance Basic Life (MPSELIP)</b>	2 x annual salary	<b>Compulsory.</b> No waiting period.	0.0745¢/1,000 coverage  Oct. 1/23 – 0.0860¢/1,000 coverage	.0745¢/1,000  Oct. 1/23 - 0.0860¢/1,000 coverage	1 <sup>st</sup> day of employment
<b>Optional Life Insurance (MPSELIP)</b>	Available at an additional 100%, 200% or 300%, annual earnings.	Optional Employee coverage only. No waiting period.	0.172¢ /1,000 coverage (Premium is deducted off 1 <sup>st</sup> & 2 <sup>nd</sup> pay) Employee pays 100%	N/A	1 <sup>st</sup> day of employment
<b>Optional Accidental Death &amp; Dismemberment and Specific Loss (MPSELIP)</b>	Available in units from \$18,000 (1 unit) to a maximum of \$360,000 (20 units)	Optional Family coverage available No waiting period.	<b>Single:</b> \$0.50 per month/unit <b>Family:</b> \$0.75 per month/unit Deducted 1 <sup>st</sup> and 2 <sup>nd</sup> pay of month)	N/A	1 <sup>st</sup> day of employment
<b>Family Life Insurance (MPSELIP)</b>	One Time lump sum payment. Spouse =\$20, 000 Dependents =\$10,000	Optional No waiting period	\$5.00 per month (Premium is divided and deducted 1 <sup>st</sup> and 2 <sup>nd</sup> pay of month)	N/A	
<b>Dental Plan (Manitoba Blue Cross)</b>	100% basic coverage 50% major coverage \$1,500 coverage per year per member.	<b>Compulsory</b> *unless covered under another plan or have Treaty Status, must submit proof and waiver. No waiting period.	<b>Single:</b> \$18.05 monthly <b>Family:</b> \$48.45 monthly (Premium is divided and deducted 1 <sup>st</sup> & 2 <sup>nd</sup> pay.)	<b>Single:</b> \$18.05 <b>Family:</b> \$48.45	1 <sup>st</sup> day of employment
<b>Extended Health (Manitoba Blue Cross)</b>	*80% of eligible coverage  No deductible	<b>Compulsory</b> *unless covered under another plan or have Treaty Status, must submit proof and waiver. No waiting period.	<b>Single:</b> \$71.00 monthly <b>Family:</b> \$142.00 monthly (Premium is divided and deducted 1 <sup>st</sup> & 2 <sup>nd</sup> pay.)	N/A	1 <sup>st</sup> day of employment

PLAN	BENEFIT	ELIGIBILITY	EMPLOYEE COST	EMPLOYER COST	EFFECTIVE DATE OF PREMIUMS
<b>Retirement Plan for Employees of Frontier School Division</b>	Retirement Pension Plan	<b>Full Time Employees Compulsory</b> No waiting period  <b>Part Time Employees Optional-</b> no waiting period	9.0% of basic earnings *Contributions deducted each pay.	9.0%	1 <sup>st</sup> pay period following 3 months of service
<b>Employee Assistance Plan</b> (Homewood Human Solutions)	Confidential health promotion and counseling services.	<b>Compulsory</b> No waiting period	N/A. No cost to employee	\$3.08 per employee per month	1 <sup>st</sup> day of employment
<b>Long Term Disability (MSBA , the co-operators)</b>	Provided coverage should you become totally disabled as a result of an accidental injury or sickness and are unable to work	<b>Compulsory for: (Full time, Part time employees, excluding Berens River)</b>	<b>Division, Area Office and JHK, Area 3 (excluding Berens River), &amp; Area 5 employees:</b> 1.887% of earnings <b>Area 1, Area 2 &amp; Area 4 employees:</b> 2.476% of earnings *Deducted each pay	N/A	1 <sup>st</sup> day after completion of 3 months of service
<b>Group RRSP and TFSA</b> (Canada Life)	Daily interest, term deposit or mutual fund retirement savings. *For more information please contact the Pension & Benefits Clerk.	Optional	No Minimum. Maximum determined by Revenue Canada.  *Deducted each pay.	N/A	

**In the event of any variation between this summary sheet and the provisions of the plan text(s), the plan text(s) shall prevail. Where questions arise regarding interpretation, the plan text(s) shall govern.**

**Frontier School Division retains the right to change benefits and/or cost sharing allocations.**

This document is available in alternative formats by request

September 2023