
Volunteer Fire Fighter Insurance

From: Scott Meger [REDACTED]
Date: 12/03/2018 09:28AM
To: Wadena Admin <wadadmin@sasktel.net>

Hi Ferne,

Providing coverage to the volunteers, gives the municipality piece of mind that their volunteer fire fighters are looked after, and the cost is minor relative to the value your volunteers bring to your community.

The cost of the program is minimal when you break it down. For example, Plan A would cost \$442.00 per year, and would cover all of your volunteers fire fighters. If you had 20 volunteers, that works out to \$2.21 per member per month. The one item we always see claimed is ambulance services, this can run in excess of \$400.00 which would be the whole years premium if somebody had to pay out of pocket. It does not take much to recoup the annual cost of the benefit.

Our Insurance provider (VFIS) has made it a point to provide our clients with quality risk control programs and materials. These products focus on educating and training emergency service personnel with the goal of preventing or reducing personal injuries and death as well as property damages. The VFIS products are specifically tailored to the unique circumstances involved in delivering emergency services. VFIS is pleased to offer our clients a vast library of risk control, loss prevention and safety materials at no charge. These tools are designed to help your Municipality operate more safely and efficiently.

As of May 2018 SUMA is pleased to be offering EFAP to Volunteer Firefighters and First Responders. In order to be eligible, the municipality must participate in the volunteer firefighters program that we currently offer. Coverage will mimic the existing EFAP coverage we offer under the group benefit program and will also be priced at \$5.25 per volunteer per month.

Let me know if you have any questions.

Scott Meger
Group Benefits Administrator
Saskatchewan Urban Municipalities Association

[REDACTED]
www.suma.org

Founded in 1905, SUMA is the voice of Saskatchewan hometowns.

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Attachments (3 files, 643.8 KB)
- 2019 Coverage Application form.pdf (164.4 KB)
- EFAP insert.pdf (336.8 KB)



BASIC "ON DUTY" VOLUNTEER FIRE FIGHTER INSURANCE APPLICATION FORM

Municipality _____

Address: _____

Telephone: _____ Fax: _____

Name: _____ Position: _____

Signature: _____ Date Signed: _____

We require coverage under Basic Volunteer Fire Fighter/First Responder Insurance Option: _____

Plan A - \$400.00
\$50,000 AD&D
\$50,000 Illness

Plan B - \$734.00
\$100,000 AD&D
\$100,000 Illness

Plan C - \$1218.00
\$200,000 AD&D
\$200,000 Illness

All plans include up to \$5,000 Medical coverage and \$100/week to \$500/week Weekly Indemnity

Coverage will take effect on the date signed as indicated above. Premiums will be pro-rated for renewals received after March 1st.

Please send the original form with cheque made payable to:

**Saskatchewan Urban Municipalities Association
Attention: SUMA Group Benefits Department
200 - 2222 13th Avenue, Regina SK S4P 3M7**

Premium for Coverage Option :	\$ _____	X
Plus Administration Fee (10% of Line X)	\$ _____	Y
Plus GST (5% of Line Y)	\$ _____	Z
Total Cheque Enclosed: Line X+Y+Z	\$ _____	

GST #: 107956419RT0001



SUMA On Duty Coverage

This brochure provides an abbreviated description of the benefits available under the SUMA master policy. For a complete description of the coverage, please refer to your municipalities specific copy of your policy. If any conflict arises between the content of this brochure and the master group policy, the terms of the master group policy will govern in all cases.

Eligible Participants- means any officially designated member of a Policyholder while acting as: a volunteer member; any junior member or member in training; any commissioner, director, trustee or other similar position associated with the Policyholder; any bystander deputized at the time of the emergency by an official of the Policyholder to assist in an emergency, but only during the actual emergency; any auxiliary member and any non-member who is requested to participate by the auxiliary or Policyholder.

Scope of Coverage- Covered Activity – means any activity, including travel directly to and from such activity, which is a normal duty of an Insured Person, including any: emergency response for fire suppression and rescue or emergency medical activity; training exercise which simulates an emergency and where active physical participation is required; Firematic Events or Contests; class room training fund-raising activities including athletic activities solely for the purpose of raising funds for the Policyholder or other non-profit organization when such fund- raising is performed as an activity of the Policyholder and all other authorized activities of the fire department including Good Samaritan Acts.

The SUMA provides its members with 3 plan choices. Please refer to the plan specific to your municipality.

<u>Plan A</u>	<u>Plan B</u>	<u>Plan C</u>
\$50,000 AD&D	\$100,000 AD&D	\$200,000 AD&D
\$50,000 Illness	\$100,000 Illness	\$200,000 Illness
\$5,000 Medical	\$5,000 Medical	\$5,000 Medical
\$100/wk to \$500/wk Weekly Disability	\$100/wk to \$500/wk Weekly Disability	\$100/wk to \$500/wk Weekly Disability

DEATH BENEFITS

Injury or Loss of Life- Death benefits are paid when a member dies as a result of an injury or illness while performing a Covered Activity.

Injur(ies) - means accidental bodily injury sustained by the **Insured Person**: (1) during and resulting from an **Insured Person's** participation in a specific **Covered Activity** while coverage under this policy is in force as to the **Insured Person**; (2) which directly (independent of sickness, disease, mental incapacity or any other cause) causes a loss to the **Insured Person**; and (3) which is not otherwise defined as an **Illness**. The term **Injury**, for purposes of this policy, will not include human immunodeficiency virus (HIV), acquired immune deficiency syndrome (AIDS) or AIDS related complex (ARC), or any heart or circulatory malfunction.

Illness – means any disease, sickness, or infection of an **Insured Person** while coverage under this policy is in force as to the **Insured Person**. The **Illness** must:

- (1) manifest itself during a specific **Covered Activity** with the result that the **Insured Person** interrupts his or her participation in such **Covered Activity** in order to receive immediate **Medical Treatment**; or directly result from participation in a **Covered Activity** and also result in the **Insured Person** receiving **Medical Treatment** within 48 hours of participation in such **Covered Activity**. The requirement that **Medical Treatment** be received within 48 hours is waived for **Infectious Diseases**.
- (2) **Illness** also includes the **Mandatory Quarantine** of an **Insured Person**.

Seat Belt Benefit- If a member dies while wearing a properly fastened seatbelt at the time of a motor vehicle accident, which caused death, 25% of the Principal Sum will be paid to the beneficiary.

Dependent Benefit- If a member dies, each surviving dependent child will receive \$30,000.

Spousal Support Benefit- If a member dies, the surviving spouse will receive \$15,000.

Memorial Benefit- If a member dies, the policyholder will receive a lump sum of \$5,000. This benefit can be used at the discretion of the fire department.

Repatriation- When loss of life occurs outside 50 kms, expenses will be paid for shipment of the body to the city of residence. Expenses not to exceed \$20,000.

Safety Vest Benefit- If a member dies, wearing an approved safety vest, the beneficiary will receive 25% of the Principal Sum.

Military Death Benefit- If a member dies while serving the Canadian Armed Forces, \$15,000 will be paid to the beneficiary.

Dependent Elder Benefit- If a member dies, each surviving elder dependent will receive \$5,000 per Dependent Elder.

LUMP SUM LIVING BENEFITS (all lump sum benefits are paid in addition to medical and disability income benefits)

Accidental Dismemberment - A lump sum benefit will be provided to the member when a loss incurs which is indicated in the accidental dismemberment table. Hearing loss is also part of this table. See policy for breakdown of percentages. *Para, Quadra and Hemi Plegias pay 2 times the principal sum. Uniplegia pays the principal sum.*

Vision Impairment- If a member has an accident causing permanent vision impairment, we will pay a lump sum benefit. See Policy for breakdown of percentages.

Injury, Illness & Heart Permanent Impairment- If injury results in a permanent physical impairment, we will pay a % of the principal sum depending on the severity of the impairment up to 100%. For illness, if after collecting disability for 5 years, we will pay the % of the principal sum up to 100% and for Heart, if after collecting disability for 26 weeks, we will pay the % of principal sum depending on the severity of the impairment caused to the left ventricular valve up to 125%. See policy schedule.

Cosmetic Disfigurement from Burns- If injury results due to full thickness burns, the policy will pay a percentage of the principal sum depending on the area of the body burned.

HIV Positive Benefit- If a member contract HIV as a direct result of a Covered Activity, we will provide a lump sum benefit to the member. The lump sum amount is equal to the Infectious Disease principal sum

Cancer Benefit- We will pay the benefit listed upfront, when covered by workers compensation and cancer first diagnosed while policy in force.

Felonious Assault Benefit- If a felonious act causes a loss under the Accidental Death, Dismemberment, Burn, Vision or Illness, Injury or Heart Impairment, we will pay an additional 50% of the principal sum.

WEEKLY INCOME and MEDICAL BENEFITS

Total Disability- If injury or illness to an Insured Person results in total disability, the policy will guaranteed to pay the weekly income benefit for the 1st 28 days or 4 weeks listed., please refer to Schedule of Benefits. If total disability continues beyond the 1st 28 days or 4 weeks, the policy will pay lessor of the weekly benefits shown or 100% of the insured person's pre-disability gross average weekly wage. It is at this time, we coordinate payments from all other sources including workers compensation, if they exist. The policy will never pay less than the minimum benefit selected. Policy pays up to 260 weeks (5yrs) or unless 10 year option taken.

Partial Disability- Is payable when an insured person is unable to perform one or more, but not all, of the material and substantial duties of his or her regular occupation. The policy will pay similar to Total Disability in the same time frame, but using 50% of the insured person's pre-disability gross average weekly wage. The policy will not exceed the maximum listed in the schedule and will never pay less than the minimum listed in the Schedule of Benefits. The Partial Disability benefit is payable up to 52 weeks.

Cost of Living- After the 1st year, the disability is increased by the consumer price index

Transition Benefit- While on Total Disability, the firefighter's job was terminated, we will pay an additional 26 weeks of disability.

Occupational Retraining Benefit- If an injury or illness causes permanent total disability, the policy will pay for job related retraining up to \$20,000. The benefit is paid if the member decides to enroll in an institution of higher learning and pays for tuition, books and training materials.

Home Alteration & Vehicle Modification- If an insured sustains injuries under the accidental dismemberment or permanent physical impairment benefit and is now required to be wheel chair ambulatory, this benefit will pay for the one time cost of alterations, up to \$50,000 to the members home or vehicle to make them wheel chair accessible.

Family Expense- The policy will pay a per day benefit based on whether it is Hospital Confinement (\$100/day) or Out Patient Therapy (\$50/day).

Blanket Medical Expense- The policy will pay for reasonable and customary expenses up to \$5,000 in excess of any provincial plan or workers compensation benefits.

Critical Incident Stress Management- The policy will pay for reasonable expenses incurred by a CISM team for transportation, meals and lodging within 60 days of an Emergency Duty up to \$25,000.

Post Traumatic Stress Disorder- The policy will pay for reasonable expenses, if a traumatic incident occurred, an insured person requires hospital or medical treatment for a post traumatic stress disorder. Expenses up to \$25,000.

Cosmetic/Plastic Surgery- The policy will pay for reasonable expenses, if an insured person requires skin grafting or plastic surgery due to an injury for which medical expense benefits are paid or payable.

Family Bereavement & Trauma Counseling- \$1,000/ resident immediate family member (spouse or dependent child)

Employee and Family Assistance Program for Volunteer Firefighters and First Responders



Frequently Asked Questions

What is an Employee and Family Assistance Program?

An **Employee and Family Assistance Program (EFAP)** provides professional, confidential support services for members and their immediate family. It includes short-term counselling, programs, and resources for work, health, and life issues.

What is short-term counselling?

EFAP counselling is short-term, change-oriented, goal-focused therapy. Counsellors help the client work toward achieving a specific, measurable goal that can be accomplished in a few sessions. The exact number of appointments provided depends on many factors, including the nature of the problem, the client's history with that problem, and the client's motivation for change. If a client needs or wants ongoing support or specialized services, the EFAP counsellor will refer them to community resources or private practitioners. Once the client has transitioned out of the EFAP, any costs incurred would not be covered.

How do members access EFAP?

EFAP is available 24/7/365 through:

- The care access center toll-free number for immediate assistance
- E-Counselling via www.workhealthlife.com
- First Chat via www.workhealthlife.com
- My EAP app

For crisis situations requiring immediate attention, call 911 or the Shepell Care Access Centre

Are members required to visit Shepell offices for EFAP services?

No. Shepell provides services and resources that don't require an in-person visit. Programs are accessible over the telephone, online and/or through text-based tools. The initial assessment will identify the solution that best fits the employee's lifestyle and learning preferences.

What if the member doesn't need counselling?

EFAP covers a broad range of services and resources that are not limited to counselling. Learn more about the wide range of support available to members and their families by calling the Shepell Care Access Centre or by accessing our website www.workhealthlife.com.

Do members need to make initial contact for a family member to access EFAP services?

No. Family members must access the EFAP on their own as confidentiality for them is just as important.

Is EFAP confidential?

Yes. EFAP is completely confidential within the limits of the law. Client care representatives, clinical counsellors, and professional service providers adhere to strict privacy and confidentiality procedures. Personal information is only provided to authorities if there is a threat of violence to oneself or others, child abuse or a subpoena. In these situations, Shepell will be required to release information by law.

What kind of problems or concerns can EFAP help with?

- Emotional and mental health
- Relationships and family
- Workplace concerns
- Work-life balance and stress
- Addictions
- Physical health and nutrition
- Career questions
- Child and eldercare
- Legal and financial concerns

Your EFAP is committed to ensuring the resources and supports you receive are the right fit for you.

Interested in learning more? Call us today.

SUMA Group Benefits Program

T: 306.525.4390

E: gis@suma.org

