

This information is available in alternate formats upon request.

## BENEFITS ENTITLEMENT - DURING MATERNITY & PARENTAL LEAVE

✓ = Eligible    X = Not Eligible

Leave Type	Dental	Vision	Prescription Drugs	Health Spending Account	Ambulance /Hospital	Extended Health	Travel	Group Insurance
<b>Maternity Leave</b>								
Plan "A"	✓	✓	✓	✓	✓	Employee may pre-pay premiums	Employee may pre-pay premiums	Employee may pre-pay employee & employer portion of premiums
Plan "B"	✓	✓	✓	✓	✓	✓	✓	✓
<b>Parental Leave</b>								
	X	X	X	X	Employee may pre-pay premiums	Employee may pre-pay premiums	Employee may pre-pay premiums	Employee may pre-pay employee & employer portion of premiums