

Special Assistance Fund (SAF)

Frequently Asked Questions

Who is eligible for the Special Assistance Fund?

The Special Assistance Fund (SAF) is available to employees, retirees, and dependents as defined under the CBC/Radio-Canada Supplementary Health Care Plan (SHCP), Policy 51089.

How much will be reimbursed for eligible claims?

Requests for eligible expenses will be considered up to 100% reimbursement, up to the per individual lifetime maximum of \$12,500.

What expenses have specific reimbursement maximums under the SAF?

The following specific reimbursement maximums will apply:

- Hearing aids - up to \$2,200 per ear every five years;
- Electric wheelchairs and scooters: reimbursement will be limited to one device every five years for claimants 18 years of age and over and on an as needed basis for claimants under 18 years of age to the following maximums:
 - Electric wheelchairs: up to \$7,700;
 - Scooters: up to \$5,500;
- Fertility treatments: up to \$7,000 per treatment per person.

What do I need to know before submitting a claim?

Approval of claims for financial support from the SAF will be based on the following criteria:

- The request must be directly related to services or supplies which are medically necessary for an eligible individual, supported by acceptable medical documentation and original receipts.
- The cost incurred must qualify as a medical expense under the provisions of the Income Tax Act (ITA) in the determination of the medical expense tax credit. See the [Government of Canada Website](#) for further information.
- Payment of claims from the SAF will only be considered when all other sources of reimbursement have been explored and have been unsuccessful. If, however, other sources have reimbursed **any** amount, the remaining out of pocket amount will not be eligible for consideration under the SAF. You should work with your suppliers (e.g. physicians, specialists, hospital staff, medical supply company) to determine if any other sources of reimbursement are available to you.
- Requests can only be considered after the expense has been incurred and where an original receipt showing the payment of such an expense is submitted for consideration.
- If the claim is not an eligible expense under the SHCP, you may then submit a request to be considered under the SAF. If your request is eligible, the SAF Administrator will make a recommendation for the CCSB to consider for review and approval.

What are examples of requests that may be covered?

- Some regulated health care and paramedical services, such as midwife, occupational therapist, audiologist, kinesiologist, dietician
- Medical marijuana
- Travel expenses for medical treatment
- Coagulation Monitor and Coagulation Strips

What top-up exceptions are covered by the SAF?

The SAF is not intended to top up existing benefits or replace existing plans, except for:

- Hearing aids
- Electric wheelchairs and scooters
- Dental procedures to treat medical conditions – e.g. facial reconstruction - but excluding orthodontics and other treatments covered under a regular dental schedule.

CBC/Radio-Canada employees, retirees and eligible dependents not currently covered under the SHCP may submit claims to the SAF. For any exceptional top-up claims to the amounts above, the portion you would have been entitled to had you been covered under the SHCP will not be allowed.

For example, if you are eligible for a \$500 reimbursement under the SHCP for a hearing aid, you will be eligible to submit a request for any outstanding amount up to \$2,200. If however you are not eligible for reimbursement under the SHCP, you will be eligible to receive the amount you paid up to \$2,200 minus the \$500 you would have received had you been enrolled in the SHCP.

Note: In the event you are insured for hearing aids under another benefit plan and can demonstrate that a deductible has been paid under that plan, the \$500 deductible will be waived.

What is not covered by the SAF?

The following services / examples are not eligible for submission and reimbursement from SAF:

- Dental services
- Home care services
- Laboratory Services
- Dietary supplements
- Patient lift chair
- Contact lenses
- Laser eye surgery
- Drugs/medication

How do I submit a request under the SAF?

Review this document to determine if your claim is eligible. Then complete the [SAF Request form](#) and mail it to the address on the form. The Group Plan Number is 51089 and the ID number is your CBC/Radio-Canada employee ID number preceded by the letter 'M'.

In order for your request to be processed, it is very important that you complete the form accurately, sign it and ensure that you have attached all acceptable medical documentation, your medical physician's referral and the original receipts to support your request. Keep copies of all your documents submitted.

Only requests over \$200 are eligible for reimbursement under the SAF. If an individual receipt is less than \$200, you may bundle same-type services, such as the following in one request form:

- Medical marijuana - multiple receipts
- Occupational therapy - receipts for multiple sessions
- Fertility treatment - all expenses related to the same cycle of treatment

You must submit your complete request including all required information/documentation to the SAF Administrator within 15 months of the date the expense was incurred otherwise your request will be declined.

How do I submit a request for travel expenses for medical treatment under the SAF?

Submit your receipts for your hotel, food and transportation separately under Type of Expense under Claim Details.

When do I submit my request?

You must submit your fully completed SAF Request Form with all your supporting documents no later than:

- February 1 for the March CCSB meeting
- May 1 for the June CCSB meeting
- August 1 for the September CCSB meeting
- November 1 for the December CCSB meeting

What happens next after I have submitted my request?

The SAF Administrator will review the claim to determine if your request meets the eligibility criteria. When reviewing the claim, the SAF Administrator may request additional information or documentation to complete their review. It is critical to keep all documents associated with your claim to ensure there is no delay in the review of your request. Incomplete requests will result in the claim being declined.

Once their review is complete, the SAF Administrator will send their recommendations to the CCSB for their approval at a subsequent quarterly meeting. If approved by the CCSB, the SAF Administrator will then make the payment to the individual.

Why would my request be declined for reimbursement?

The SAF is not intended to be a replacement or a substitution to the health care coverage currently available to CBC/Radio-Canada employees, retirees and their dependents.

If a reimbursement was received from the CBC/Radio-Canada SHCP the claim is not eligible under the SAF and the request will be declined, unless the request is an approved exception.

If the request has never been submitted under the CBC/Radio-Canada SHCP and therefore not paid, but it is an eligible expense under the SHCP, then it is ineligible under the SAF and the request will be declined.

Your request will also be declined if:

- Government coverage is available or a grant payment is available from any source;
- You have reached the maximum reimbursement allowed under the SAF;
- Your request is submitted later than 15 months after the date the expense was incurred.

Who can I contact for help?

If you have any questions, you can call the SAF Administrator's call centre at 1 877-340-9082. You will need to provide your CBC/Radio-Canada employee ID number.

The SAF Administrator will be able to advise:

- If the claim qualifies as a medical expense under the Income Tax Act;
- When you are next eligible to make a claim request for claims with a specific reimbursement maximum under the SAF;
- How much has been incurred toward the maximum, lifetime or otherwise, if you have submitted requests under SAF in the past. The SAF Administrator has a record of all previous reimbursements and will continue accruing toward the individual lifetime maximum.

They will not be able to confirm/guarantee that the claim in question will be approved for reimbursement by the CCSB or provide direction on whether other programs, such as individual, group, provincial, association, etc. are available to you for the claim in question.

You may also wish to discuss your request as follows:

- Union-affiliated employees can contact their union representative;
- Retirees can contact the Pensioners National Association;
- Non-affiliated employees can email specialassistancefund@cbc.ca.

The CCSB is composed of union, CBC Pensioners National Association and management representatives and is responsible for making recommendations about employee-paid benefits.

The existence and provisions/conditions of the SAF are subject to change, without notice, and as amended from time to time. This document replaces and supersedes all previous versions related to the Special Assistance Fund.