



All about employee benefits

January 2010

FEDERAL AND PROVINCIAL BENEFITS LEGISLATION NOVA SCOTIA – 2010

A WEALTH OF INFORMATION ON:

- ✓ Plans
- ✓ Legislation
- ✓ Eligibility
- ✓ Participation
- ✓ Contributions
- ✓ Benefits

**KEEP THIS DOCUMENT FOR
FUTURE REFERENCE!**

- CANADA PENSION PLAN
- OLD AGE SECURITY AND GUARANTEED INCOME SUPPLEMENT
- EMPLOYMENT INSURANCE
- CANADA CHILD TAX BENEFIT
- WORKERS' COMPENSATION
- HEALTH INSURANCE
- PRIVATE PENSION PLANS
- INCOME TAX

Desjardins Financial Security is pleased to publish a summary of the legislation in force in Nova Scotia affecting employee benefits. This publication is intended for Desjardins Financial Security's customers and group pension and insurance distributors. This document was prepared especially for those interested in establishing and financing employee benefit programs as well as in compensation planning. It was produced by Desjardins Financial Security with the help of the government boards and organizations concerned. We hope that this reference guide will be useful.

You can download this document, as well as those of all the other Canadian provinces, for free, on our Web site. Just type in: www.desjardinsfinancialsecurity.com, click on "Groups and Businesses", "Resource Centre" and "Employee Benefits Legislation".

NOTE: This document was prepared for information purposes only. In case of litigation, the text of the legislation concerned shall prevail. In order to receive most of the benefits listed hereinafter, claimants must submit an application in writing to the appropriate organization.

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1

CANADA PENSION PLAN

1.1 PARTICIPATION

Participation in the Canada Pension Plan (CPP) is compulsory for all employees and self-employed persons aged 18 to 70 who are not recipients of any retirement or disability pension under the CPP and do not participate in the Québec Pension Plan and whose earnings exceed the year's basic exemption of \$3,500.

1.2 CONTRIBUTIONS

The contribution rate is equal to 9.9% of the employment earnings in excess of the basic exemption up to the maximum pensionable earnings (MPE for this year is equal to \$47,200). The employee and the employer must each pay half of the contribution, while the self-employed person must pay the whole contribution.

1.3 RETIREMENT PENSIONS

Eligibility

Any person who has made at least one valid contribution to the plan may be eligible for a retirement pension.

Expected pension

The expected retirement pension is equal to 25% of the average monthly pensionable earnings, adjusted in relation to the average MPE in the year of retirement and the four previous years. The maximum pension payable for a person aged 65 is \$934.17.

Early retirement and postponed retirement pensions

A contributor may receive a retirement pension as of age 60 if such contributor has stopped working or if his/her earnings calculated on an annual basis do not exceed \$11,210 in 2010; to be eligible to an early retirement pension, a contributor must have earned less than \$934.17 in the month before pension begins and in the month it begins. When the pension is paid before age 65, it is reduced by 6% for each year preceding the person's 65th birthday. The contributor may also wait until after age 65 before collecting his/her pension, which is then increased by 6% for each year between

ages 65 and 70 during which the pension is not collected.

Disabled contributor pension

If a contributor became disabled after 1997, his/her retirement pension will be equal to his/her disability pension indexed according to the increase in the Consumer Price Index (CPI).

1.4 BENEFITS PAYABLE TO ELIGIBLE SURVIVORS

Eligibility

Eligibility for a survivor's pension is subject to a minimum contributory period varying between three and ten years. If the contributor made contributions for at least one-third of the years in his/her contributory period, the rightful claimants are eligible to receive a death benefit, and the deceased contributor's spouse and dependent children are eligible for a pension. The death benefit, surviving spouse's pension and orphan's pension are the benefits payable. Same-sex common-law spouses have the same rights and obligations as spouses of the opposite sex.

Death benefit

This lump-sum benefit is equal to the lesser of six times the contributor's monthly retirement pension that would have been payable at age 65 and \$2,500.

Surviving spouse not eligible for a retirement or disability pension

In this case, a surviving spouse under age 35 who is not disabled and has no dependent children is not entitled to a pension; if he/she is aged 35 to 45 at the time of the contributor's death, he/she is entitled to a reduced pension. Otherwise, if the surviving spouse who is not eligible for a retirement or disability pension is under age 65, he/she is entitled to \$166.26 per month, plus 37.5% of the deceased contributor's retirement pension, up to a maximum of \$516.57; if he/she is aged 65 or over, the pension will be equal to 60% of the deceased's retirement pension, up to a maximum of \$560.50.



Surviving spouse entitled to a retirement pension

In this case, the maximum combined pension before adjustment for early retirement is equal to \$1,100.43 if the surviving spouse is under age 65; if the spouse is aged 65 or over, he/she is entitled to the maximum combined pension before adjustment for deferred retirement, that is \$934.17.

Surviving spouse entitled to a disability pension

In this case, the maximum combined pension is limited to the maximum disability benefit of \$1,126.76.

Orphan's pension

The orphan's monthly pension is equal to \$214.85, payable to dependent children only. Orphans may receive double the monthly pension if both parents are deceased and were eligible contributors.

- for four of the last six years of his/her contributory period; or
- since March 3, 2008 for three of the last six years, if the contributory period is at least 25 years; or
- for at least four years if the contributory period is less than six years.

To be considered disabled, the person must be prevented from engaging in any gainful occupation and the disability must be a long-term severe state of incapacity that is likely to result in death or last indefinitely.

Benefits become payable as of...

Benefits are payable monthly as of the fourth month of the beneficiary's disability.

Amount of benefits

The disability benefit is equal to \$426.13 plus 75% of the disabled person's retirement pension, subject to a maximum of \$1,126.76. Children of an eligible disabled person receive the same pension as orphans.

1.5 DISABILITY BENEFITS

Eligibility

A disabled employee is eligible provided he/she has contributed:

1.6 BENEFIT ADJUSTMENT

Monthly benefits are indexed once a year to reflect the rise in the CPI. The benefits are increased by 0.4% beginning January 1, 2010.

1.7 COMPARISON WITH LAST YEAR'S AMOUNTS

	2009	2010
Maximum pensionable earnings (MPE)	\$46,300.00	\$47,200.00
Basic annual exemption	\$3,500.00	\$3,500.00
Maximum contribution		
■ Self-employed person	\$4,237.20	\$4,326.30
■ Employer and employee	\$2,118.60	\$2,163.15
Maximum monthly retirement pension at age 65	\$908.75	\$934.17
Maximum surviving spouse's monthly pension		
a) Not eligible for a retirement or disability pension		
■ Under age 65	\$506.38	\$516.57
■ Age 65 and over	\$545.25	\$560.50
b) Eligible for a retirement pension		
■ Under age 65 (before adjustment for early retirement)	\$1,074.35	\$1,100.43
■ Age 65 or over (before adjustment for deferred retirement)	\$908.75	\$934.17
c) Eligible for a disability pension	\$1,105.99	\$1,126.76
Maximum death benefit	\$2,500.00	\$2,500.00
Maximum monthly disability pension	\$1,105.99	\$1,126.76
Monthly pension for an orphan or a disabled contributor's child	\$213.99	\$214.85
CPI benefit adjustment	2.5%	0.4%



2 OLD AGE SECURITY AND GUARANTEED INCOME SUPPLEMENT

2.1 OLD AGE SECURITY (OAS) PENSION

Eligibility

Any person aged 65 or over is eligible for a full pension, provided he/she has resided in Canada for 40 years or more after his/her 18th birthday. A minimum of 10 years of residence after age 18 is required to be entitled to a partial pension. Same-sex common-law spouses have the same rights and obligations as spouses of the opposite sex.

Amount of pension

As of January 1, 2010, the monthly OAS pension for a person aged 65 or over is \$516.96. This amount is adjusted quarterly to reflect the rise in the Consumer Price Index. OAS pensioners whose net income exceeds \$66,733 in 2010 must repay 15% of their excess net income, up to the full OAS pension.

2.2 GUARANTEED INCOME SUPPLEMENT (GIS)

Eligibility

Any low-income person who receives the Old Age Security pension is eligible for the GIS. Same-sex common-law spouses have the same rights and obligations as spouses of the opposite sex.

Amount

The GIS monthly benefit varies in relation to income, marital status or spouse's age and it is reduced by \$1 per \$2 of income other than the OAS pension. A quarterly adjustment also takes into account any rise in the CPI.

Allowances paid to spouses

If a couple's income is within the limits set by law, an allowance is paid to the spouse (aged 60 to 64) of an OAS pension recipient who is entitled to the GIS; the residence requirements apply to the spouse. This allowance terminates upon the death of the pensioner or as soon as the spouse reaches age 65. Since 1985, when the pensioner dies, the legislation has provided for the payment of an allowance to low-income surviving spouses aged 60 to 64.

Monthly maximums		
	January 1, 2009	January 1, 2010
Single person or pensioner whose spouse under age 60 is not receiving the pension	\$652.51	\$652.51
Couple (per person)	\$430.90	\$430.90
Allowance payable to spouse aged 60 to 64	\$947.86	\$947.86
Maximum allowance for surviving spouses	\$1,050.68	\$1,050.68

3 EMPLOYMENT INSURANCE

3.1 GENERAL INFORMATION

No age discrimination

The *Employment Insurance Act* covers persons who work after age 65 subject to the same criteria as those under age 65.

Labour disputes

Workers affected by labour disputes may receive sickness, maternity, parental leave, compassionate care or training benefits if they have made arrangements for a leave before the beginning of the labour dispute.



Clawback

The maximum yearly insurable earnings is equal to \$43,200 for 2010. Recipients whose net income for one year exceeds 1.25 times the maximum yearly insurable earnings (\$54,000 in 2010) may have to reimburse 30% of the benefits received or 30% of amount by which net income exceeds \$54,000, if less. This rule does not apply to individuals who claim special benefits for sickness, maternity, parental or compassionate care reasons or to recipients who received less than one week of regular benefits in the preceding 10 taxation years. Regular benefits paid for weeks before June 30, 1996 are not taken into account for this computation.

Reduction of the annual premium

By offering a registered disability income insurance plan, an employer will be entitled to a reduced contribution rate, provided the employer applies for this reduction to the Department and the plan being offered includes provisions that are at least as generous as those under employment insurance in the event of illness. In the case of a weekly indemnity plan, the reduction is equal to \$0.40 per \$100 of weekly insurable earnings when the full reduction is applied provided that the plan meets employment insurance requirements.

In the case of cumulative pregnancy or sick-leave plans, a reduction of up to \$0.41 per \$100 of earnings may be granted if the employer offers a plan that meets employment insurance requirements.

The employer is required to share 5/12 of these reductions with the employees in the form of cash or equivalent benefits.

3.2 REGULAR BENEFITS

Eligibility

Any person who works for an employer is eligible for regular benefits provided that the person worked a certain number of hours during the 52 weeks just preceding his/her application.

The person must have accumulated from 420 to 700 hours of work, depending on the regional unemployment rate, during such 52 weeks period. A person who is employed for the first time or who is re-entering the workforce must accumulate 910 hours of work during such 52 weeks period. Special rules apply to parents re-entering the labour force following an extended absence to raise their children.

Persons who voluntarily leave their employment "without valid reason", who refuse suitable employment or who are dismissed for misconduct are not eligible for benefits. The list of reasons justifying a voluntary departure and for which no penalty is applied is detailed in the Act.

Waiting period

Regardless of the type of benefits to which a person is entitled, a waiting period of two weeks is applied. No benefits are paid during this period.

Benefit rate

For the majority of recipients, benefits are set at 55% of their average insurable earnings over the last 26 weeks, up to a maximum of \$457 per week.

For recipients with dependent children and an annual family income below \$25,921, a family income supplement is available. These recipients receive up to 80% of their weekly insurable earnings (depending on the number of dependent children).

Maximum duration of benefits

Benefits may be paid for a period that varies from 14 to 45 weeks, according to the regional unemployment rate and the number of accumulated hours of insurable employment over the 52 weeks just preceding the application for benefits.



Allowable earnings

Recipients will be able to earn up to 25% of their weekly benefits (\$50 per week if they receive benefits of less than \$200 per week) without decreasing their employment insurance benefits.

However, under a pilot project in effect up to December 4, 2010, claimants are entitled to earn up to 40% of their weekly regular benefits (\$75 for those receiving less than \$188 of benefits per week) without any decrease.

3.3 SPECIAL BENEFITS

Reasons and duration

In addition to regular benefits, compassionate care, special sickness, maternity or parental leave benefits may be payable. The cumulative duration of special benefits cannot usually exceed 50 weeks. Exceptionally, however, this maximum cumulative duration may be extended up to a total of 71 weeks.

Eligibility

The person must have accumulated 600 hours of insurable employment during the 52 weeks immediately prior to the beginning of the payment period.

Sickness

Special sickness benefits may be paid for a maximum of 15 weeks.

Maternity

Maternity benefits are payable as of the eighth week preceding the expected week of delivery or the first day of the week of birth, whichever occurs first, for a maximum period of 15 weeks. Furthermore, benefits cannot be paid later than 17 weeks after the last day of the week of birth and the expected week of delivery, whichever occurs the later, unless the baby is confined to hospital.

Parental leave

Thirty-five weeks of benefits are payable to the natural or adoptive parents who remain at home to care for their newborn or adopted children, either to the father or to the mother, or split between the two as they wish. There is no waiting period for the second claim for parents who share the benefits.

Parents of hospitalized children may have up to 2 years instead of one year to claim parental leave benefits.

In the case of adoption, the parent must provide an adoption certificate; proof of the child's birth as well as a statement declaring that the applicant will stay home to care for the child may also be required.

Compassionate care leave

Up to six weeks of benefits may be payable to workers who have to be away from work temporarily to provide care or support to a member of their family who is gravely ill with a significant risk of death within 26 weeks. The benefits payable for the compassionate care leave may be divided between two or more workers who make a claim for benefits in respect of the same family member.

Only one waiting period will have to be served when the benefits are shared with other members.

“Member of the family” means:

- your child or the child of your spouse or common-law partner;
- your spouse or common-law partner;
- your father/mother;
- the spouse of your father/mother;
- the common-law partner of your father/mother; and
- any other person mentioned in the regulations.



Effective the week of June 11, 2006, the definition of “member of the family” has been extended to include, among others: brother, sister, grandchild, grandparent, in-law, aunt, uncle, niece, nephew, foster parent, foster children, ward, guardian and some members of your spouse or common-law partner family.

The compassionate care benefits are effective since January 4, 2004.

Allowable Earnings

Beneficiaries can earn up to 25% of their weekly benefits (\$50 per week if they receive less than \$200 in benefits per week) without their parental leave or compassionate care leave benefits being affected. However, under a pilot project in effect up to December 4, 2010, claimants are entitled to earn up to 40% of their weekly parental or compassionate care benefits (\$75 for those receiving less than \$188 of benefits per week) without any decrease

3.4 ACTIVE RE-EMPLOYMENT BENEFITS

Persons who have received regular employment insurance benefits over the past 3 years, or parental or maternity benefits over the past 5 years, may be eligible for more direct complementary employment assistance to find a new job and prepare for it, through one of the re-employment programs. Among others, there are:

- Self-employment assistance
- Skills development
- Employment Assistance Services
- Targeted wage subsidies
- Jobs creation partnerships

3.5 MAXIMUM EARNINGS, BENEFITS AND CONTRIBUTIONS

	2009	2010
Maximum yearly insurable earnings	\$42,300.00	\$43,200.00
Maximum weekly insurable earnings	\$813.00	\$831.00
Maximum weekly benefits	\$447.00	\$457.00
Employee contributions*		
■ Weekly rate per \$100 of insurable earnings	\$1.73	\$1.73
■ Maximum annual contribution	\$731.79	\$747.36
Employer contributions*		
■ Weekly rate per \$100 of insurable earnings	\$2.422	\$2.422
■ Maximum annual contribution	\$1,024.51	\$1,046.30

* *Employment insurance contributions are deducted from total income, as defined under the Employment Insurance Act, and are subject to an annual maximum.*

3.6 TEMPORARY MEASURES

Through Canada’s Economic Action Plan, the federal government has introduced various temporary measures to assist Canadian workers who are unemployed:

- Extension of regular benefits (up to five weeks) for claimants whose benefit period was in effect on March 1, 2009, or whose benefit period begins between March 1, 2009 and September 11, 2010.
- Extension of regular benefits (up to 20 weeks) for long-tenured workers whose benefit period is established between January 4, 2009 and September 11, 2010.
- Sickness, compassionate care, maternity, adoption and parental benefits extended to the self-employed.
- Increase in allowable earnings when receiving regular, parental or compassionate care benefits (measure in effect up to December 4, 2010).



4 CANADA CHILD TAX BENEFIT

4.1 BENEFITS

Benefits are usually paid on a monthly basis to eligible families, for all children under age 18. They are determined, among other things, according to the net family income (total net individual incomes stated on lines 236 of the federal statements of income) and the number of children.

Note: Most Canadian provinces also provide additional benefits to low-income families.

4.2 BASIC COVERAGE UP TO JULY

Annual amounts up to July 2010 are as follows:

- \$1,340 for each child;
- an additional \$93 for the third child and each additional child;
- the Universal Child Care Benefit permits to receive \$100 per month for each child under age 7.

Basic coverage is reduced if the net family income exceeds \$40,726. For families with one child only, it is reduced by 2% of the net family income exceeding \$40,726; for families with two children or more, the reduction percentage is 4%.

4.3 SUPPLEMENTS UP TO JULY

Annual amounts up to July 2010 are as follows:

- **For one-child families:** \$2,076 minus 12.2% of the net family income exceeding \$23,710.
- **For two-children families:** \$3,913 minus 23.0% of the net family income exceeding \$23,710.

- **For families with three or more children:** \$3,913 for the first two children plus \$1,747 for each additional child, the result being reduced by 33.3% of the net family income exceeding \$23,710.

4.4 INCREASE IN JULY

Amounts of the Canada Child Tax Benefit will be increased in July 2010.

Basic coverage as of July

Annual amounts as of July 2010 are as follows:

- \$1,348 for each child;
- an additional \$94 for the third child and each additional child;

Basic coverage is reduced if the net family income exceeds \$40,970. For families with one child only, it is reduced by 2% of the net family income exceeding \$40,970; for families with two children or more, the reduction percentage is 4%.

Supplements as of July

Annual amounts as of July 2010 are as follows:

- **For one-child families:** \$2,088 minus 12.2% of the net family income exceeding \$23,855.
- **For two-children families:** \$3,936 minus 23.0% of the net family income exceeding \$23,855.
- **For families with three or more children:** \$3,936 for the first two children plus \$1,758 for each additional child, the result being reduced by 33.3% of the net family income exceeding \$23,855.

5 WORKERS' COMPENSATION

5.1 WORKERS' COMPENSATION ACT

This Act ensures that workers have financial protection in the event of a work injury or an occupational disease and confirms both the right to return to work and to rehabilitation.

5.2 MAXIMUM INSURABLE EARNINGS

Maximum insurable earnings for 2010 are \$50,800.



5.3 INCOME REPLACEMENT BENEFIT

A benefit representing 75% of the worker's net eligible income for the first 26 weeks and 85% thereafter, to the maximum insurable amount, is paid to any eligible worker who is the victim of a work injury that prevents him/her from returning to work or performing the tasks involved in a suitable type of occupation. Two-fifths of the injured worker's net weekly compensation rate are deducted from the first cheque. The amount deducted is reimbursed if the worker is absent from work for more than five weeks.

5.4 BODILY INJURY BENEFIT

Lifetime compensation, sometimes in the form of a lump-sum benefit, is paid to a worker who sustains permanent impairment, based on his/her degree of disability.

The compensation is calculated as 30% of 85% of net eligible earnings, multiplied by the percentage of permanent medical impairment calculated in accordance with the rating schedule.

5.5 DEATH BENEFITS

Death benefits are paid in lump sums.

- **Lump sum:** \$15,000
- **Funeral expenses:** Maximum of \$5,000
- **Cost of transportation of remains:**
Reasonable expenses if outside the province; maximum of \$500 if death occurs inside the province

- **Remarriage allowance:** Benefit continues to be paid after remarriage

5.6 SURVIVOR'S PENSION

Spouse

A pension equal to 85% of the deceased worker's net eligible income (influenced by indexing CPI) is payable to the surviving spouse until he/she turns 65, or until the deceased worker would have turned 65, whichever is later. This pension is then replaced by an annuity calculated by setting aside an additional amount equal to 5% of the spouse's monthly survivor pension benefit in an investment reserve. When eligible, this amount including interest will be paid either in a lump sum or periodic payments.

Child

Each child receives a benefit of \$196 per month until he/she reaches age 18, or age 25 if still attending school at an institution recognized by the WCB, or if physically or mentally incapable of earning, until capable to do so.

5.7 FINANCING

The cost of the plan is paid in full by the employer. The estimated average provincial rate for 2010 is \$2.65 per \$100 of insurable earnings. However, this varies from one employer to the next, depending on the type of business.

6

HEALTH INSURANCE

6.1 GENERAL INFORMATION

A corporation administers the medical, dental, optometry and prescription drug insurance programs on a non-profit basis on behalf of the Nova Scotia government. The Hospital Insurance Plan is administered directly by the government.

They must enroll in the medical services insurance, but enrollment in the hospital insurance is not required.

6.2 ELIGIBILITY

Coverage is available to all residents, regardless of their age, state of health or financial status.

Residents who are temporarily absent may have their coverage continued depending on the circumstances. Full-time students at a school outside the province are covered, provided confirmation of full time attendance is received from the educational institution on a yearly basis.



6.3 INSURED SERVICES

Hospitalization

The following services are insured:

- Room and board in a public ward, with no limit as to the number of days
- Required nursing care
- Laboratory, X-ray and diagnostic procedures
- Drugs prescribed by a physician or dentist and administered in a hospital
- Use of operating rooms, case rooms and anesthetic facilities
- Routine surgical supplies
- Radiotherapy and physiotherapy services
- Blood or therapeutic blood fractions

Extensive outpatient procedures are also covered.

Physicians

- Visits in a doctor's office, hospital or patient's home.
- All necessary surgical services including those of anesthetists and surgical assistants where necessary.
- Obstetrical care and neonatal care, and care related to complications of pregnancy.
- Sterilization procedures for both males and females.
- Treatment of fractures and dislocations.
- Diagnostic services.
- Supervision of home dialysis.
- Specialists' services, provided the patient is referred by another physician; if the patient is not referred, the patient will only be charged the general practitioner rate.
- Physical examinations (medically necessary).
- Well baby care.
- Pap smears and other preventive measures.

All laboratory and radiology services performed outside a hospital are covered, provided they are considered medically necessary by a physician and rendered in a facility approved by the plan's administration.

Optometrists

The Nova Scotia medical services insurance plan covers the following services for all residents under age 10 as well as for those who are aged 65 or over: One eye examination every 24 months for the purpose of determining the refractive status of the eyes and/or the presence of any abnormalities in the visual system. Where pathology exists or symptoms occur other than refractive disorders, vision analysis is insured for all ages.

Prosthetics

- All residents are entitled to reimbursement for standard arm and leg prostheses, once every four years for a resident 18 years of age or older and once every two years for a resident 17 years of age or younger. The cost of repairs is also covered.
- Ocular prostheses are covered under certain conditions.
- Coverage of mastectomy prostheses is available at a rate of \$150 per prosthesis once every two years. If the beneficiaries are registered with the Canadian Cancer Society and qualify under their program, an amount of up to \$300 per prosthesis and up to \$40 for a supporting bra are also covered.

Dental care

All residents are covered for a certain number of surgical procedures when it is medically required and when these are performed in a hospital. Services include incision and drainage of oral abscesses, removal of oral cysts and tumors, biopsy, treatment of fractures of the jaw and correction of jawbone abnormalities.

The Children's Oral Health Program covers preventive and restorative services for children under age 10 whose families do not have private health insurance. If there is private insurance, the private plan is first payor. Children over 10 without private insurance who meet financial criteria are also eligible.



Plan also covers: residents with severe mental handicaps; residents with a congenital cleft palate/cleft lip deformity under the age of 23 and certain maxillofacial prosthodontics (such as required due to congenital defect or trauma).

Drugs

All drugs prescribed and administered in a hospital are covered for all residents.

Optional coverage is available under the Family Pharmacare Program to all residents enrolled in the Nova Scotia medical services insurance plan provided that they are not simultaneously participating in any other Pharmacare Programs. Families with private coverage are eligible to submit any portion of claims not paid by their private plan(s). There is no premium required; however, reimbursement of eligible claims is subject to a family income-based annual deductible and a 20% co-payment, up to an annual combined out of pocket maximum also determined by income.

Individuals potentially eligible under more than one Pharmacare Program can switch between Programs at their option, subject only to annual open enrolment timelines.

Optional coverage is also available for residents age 65 and over under the Seniors' Pharmacare Program. Annual premium of \$424 (reductions available for low-income seniors, waiver of premium for social assistance recipients), with a co-payment for each prescription equal to 30% of the prescription cost.

Annual co-payment out-of-pocket maximum of \$382. Pharmacare does not reimburse expenses for seniors covered by a private plan (or one that pays first-dollar drug coverage in another Canadian jurisdiction). Seniors with such private coverage are eligible for reimbursement under Pharmacare when private plan costs reach \$806 in a year; however, the private plan remains the first payor.

Disease-specific drug programs include funding for cystic fibrosis, human growth hormone, anti-retrovirals for AIDS and antirejection drugs following a transplant.

Drug assistance for cancer patients, multiple sclerosis funding assistance, Diabetes Program, under 65 – Long-term care Pharmacare Plan Program and Community Services Pharmacare Program are also available.

Outside-of-province covered expenses

In Canada – When a Nova Scotia resident is in another province, all hospital expenses are covered, in addition to all medical fees covered by the province concerned, are reimbursed up to the maximum rates established under that province's health insurance plan. The Quebec government reimburses physicians at Quebec rates.

Outside Canada – Limited coverage is granted for emergency inpatient care received outside Canada. The reimbursement rate is equal to the rate applicable in Nova Scotia, which is currently \$525 per day. Residents referred by a Nova Scotia specialist to an out-of-country physician for services not available in Canada and who have obtained prior approval from the government will have all reasonable charges for insured medical services paid.

Long Term Care

Residents of Nova Scotia are eligible for Long Term Care if they have, or are in the process of applying for, a health card and are referred by a professional such as a physician.

- **Home Care** – There are no fees for home nursing care delivered by registered nurses or licensed practical nurses. Fees for home support, and home oxygen vary according to income.
- **Co-payment by Recipient** – Client fees for home support services are \$11.21 per hour with a monthly maximum of \$672.57 plus a monthly maximum of \$403.54 for oxygen services. Program includes a sliding fee scale and is based on income and family size. Low income individuals receive free home support services.

Long Term Care services are also available, jointly funded by the province and residents.



6.4 FINANCING

The Nova Scotia hospital and medical care insurance plans are entirely financed through

public provincial funds; no individual premiums are required.

7

PRIVATE PENSION PLANS

7.1 INTRODUCTION

- Participants must be informed of their rights and obligations under the plan.
- The funds committed must be sufficient to enable the plan to meet its obligations.
- Integration of benefits with the CPP is limited to 1/35 per year of credited service. Integration with the OAS pension is limited to 1/35 per year of credited service before 1988.
- Since 1988, sex discrimination is prohibited with respect to employee contributions, eligibility for the plan, benefits and values.
- In the event of a marriage breakdown, the splitting of pensions accumulated during the conjugal relationship of the spouses is limited to 50% of their commuted value.
- The minimum interest rate applied to employee contributions to a defined benefit plan is the rate of return of the pension fund less the investment fees, or the average on 12 months of the five-year personal term deposits.
- The law recognizes same sex spouses.
- Two unmarried individuals (regardless of their sex) who live together in a conjugal relationship may register as "domestic partners". Upon registration, "domestic partners" will be granted the same rights and obligations as married individuals (such as pension survivor benefits).

7.2 ELIGIBILITY

To become eligible, an employee must have completed 24 months of continuous employment. However, a part-time employee is eligible only if his/her earnings have reached at least 35% of the YMPE in each of the two preceding calendar years or if he/she has completed 700 hours of employment in each of these years.

7.3 VESTED PENSIONS

- Pensions accrued after 1987 are vested and locked in after two years of plan membership. The employer must finance at least 50% of the value of the contributory pension vested and accrued after 1987, in the event of retirement, termination of employment or death. The excess contributions are reimbursable.
- Pensions accrued before 1988 are vested and locked in if the participant has completed at least 10 years of service or plan membership and has attained at least age 45. However, a maximum reimbursement of 25% of the commuted value of the pension vested and locked in before 1988 is allowed.
- It is possible to transfer the commuted value of the vested pension in the event of termination of employment prior to eligibility for early retirement.
- Upon termination of employment, refund of 100% of the commuted value of the pension if the annual pension is less than 4% of the YMPE or the commuted value of the pension does not exceed 10 % of the YMPE.

7.4 DEATH BEFORE RETIREMENT

In the event of death before retirement, 60% of the commuted value of the pension vested and accrued after 1987 plus any excess contributions are reimbursed to the spouse. In the absence of a spouse, or where the participant and spouse are living separate and apart at the time of death and had previously divided the participant's pension benefit, the participant's beneficiary or estate is entitled to a lump-sum refund of the participant's post-1987 contributions with interest.

Group life insurance benefits paid by the employer may affect the benefit where the spouse is the beneficiary.



7.5 RETIREMENT PENSION

- Upon retirement, the participant who has a spouse must choose a joint and survivor annuity payable to the spouse. The annuity must provide for a reduction of no more than 40% of the pension in the event of the death of the participant or the spouse. An actuarial reduction is allowed. The participant may be exempted from this obligation by presenting a written waiver signed by the spouse.
- The survivor pension must be maintained in the event of remarriage.
- Early retirement must be permitted during the 10-year period prior to the normal retirement age. An actuarial reduction is allowed.
- In the event of deferred retirement, the pension continues to accumulate.

8

INCOME TAX

8.1 CANADA PENSION PLAN

Benefits are taxable. Employer contributions are deductible and employee contributions are eligible for a tax credit at federal and provincial levels.

8.2 OLD AGE SECURITY PENSION

The Old Age Security (OAS) pension is taxable. Persons whose net income (according to the definition in the *Income Tax Act*) exceeds \$66,733 in 2010 must repay 15% of this excess amount, up to the OAS pension amount. OAS benefits are reduced at the time of payment to reflect the clawback.

8.3 GUARANTEED INCOME SUPPLEMENT

The Guaranteed Income Supplement is not taxable.

8.4 EMPLOYMENT INSURANCE

Employment Insurance benefits are taxable. Employer contributions are deductible. Employee contributions entitle the employee to a tax credit. A portion of the Employment Insurance benefits received by a taxpayer during the year may have to be reimbursed.

8.5 CANADA CHILD TAX BENEFIT

The benefit is not taxable and is not recovered by the government when income tax returns are filed.

8.6 WORKERS' COMPENSATION PLANS

Benefits are generally tax-exempt; employer contributions are deductible.

8.7 HEALTH PLANS

- **Government plans:** Compulsory employer contributions are not taxable for the employee, but they are deductible for the employer.
- **Private plans:** Employer contributions are deductible for the employer and not taxable for the employee. Employee contributions are not deductible, but they may be included in the calculation of the medical expenses credit.
- **Expenses reimbursed:** Expenses reimbursed under both private and government plans are tax-exempt.

8.8 PRIVATE PENSION PLANS

Tax credit

A tax credit for pension income may be claimed at federal and provincial levels on the total of the following amounts:

- Life annuity from a registered pension plan (RPP);
- Annuity from a DPSP, an RRSP or an RRIF and the taxable portion of other annuities if the taxpayer is aged 65 or over, or at any age, if the annuity is paid as a result of the spouse's death.



Registered Pension Plans (RPPs)

Total employer contributions to a defined benefit RPP are deductible, with no limit, subject to the approval of the tax authorities. Total permissible current service employee contributions to a defined benefit RPP are deductible. Past service employee contributions are deductible, subject to certain limits.

Total employer and employee contributions to a defined contribution RPP are limited to the lesser of 18% of earnings and \$22,450 in 2010.

Deferred Profit-Sharing Plans (DPSPs)

Employer contributions may not exceed the lesser of 18% of compensation and \$11,225, subject to a comprehensive limit if the employee also participates in an RPP. Allowable contributions are fully deductible.

Since January 1, 1991, employee contributions to a DPSP are no longer allowed. No contribution can be made on behalf of a significant shareholder or of one of his/her relatives.

Pension Adjustment (PA)

When an employee participates in an RPP or a DPSP, a pension adjustment (PA) is calculated by the employer. The PA represents participation in an RPP or DPSP and reduces the maximum amount the employee may contribute to an RRSP. The PA is indicated on the T4 slip and, generally speaking, it is equal to:

- **Defined benefit RPP** – (9 x benefits earned during the year) minus \$600
- **Defined contribution RPP** – Total employer and employee contributions made during the year (plus contributions paid by the employer for a year during the first two months of the following year)
- **DPSP** – Total employer contributions made during the year (plus contributions paid by the employer for a year during the first two months of the following year)

Registered Retirement Savings Plans (RRSPs)

For this year, RRSP contributions are limited to the lesser of \$22,000 and 18% of the earned income of the previous year, less the employee's PA for the previous year, if any, and the employee's applicable past service pension adjustment. If the PSPA is exempt from certification, it reduces the RRSP deduction limit for the year following the year of the benefit enhancement (past service event). If the PSPA is not exempt from certification, it reduces the RRSP deduction limit for the year of certification by the Canada Revenue Agency.

Since 1991, a person who has not made the maximum RRSP contribution may carry forward the unused contribution portion. RRSP contributions may also be increased by the pension adjustment reversal (PAR) calculated for an individual who ceases to participate in an RPP or in a DPSP.

Funds accumulated in an RRSP can be withdrawn totally or partially at any time prior to the end of the year during which an individual reaches age 71. These funds can be used to purchase a life annuity or a fixed-term annuity payable to age 90, or transferred to a registered retirement income fund (RRIF).

Furthermore, subject to certain conditions, up to \$20,000 may be withdrawn tax free from an RRSP or a spousal RRSP to purchase a qualifying home. RRSP withdrawals must be repaid in full over a maximum of 15 years.

Subject to certain conditions, funds may be withdrawn tax free from an RRSP or a spousal RRSP to cover the cost of a training or full-time study program of at least three months. Withdrawals may not exceed \$10,000 per year, subject to an overall maximum of \$20,000 for four years. Generally, withdrawn amounts must be totally reimbursed over a ten-year period beginning on the sixth year following the year of the first withdrawal.



The tax-free transfer of a retiring allowance to an RRSP is limited to \$2,000 per year of service prior to 1996 plus \$1,500 for each year of service prior to 1989 for which employer contributions to an RPP or a DPSP were not vested to the employee.

Contribution limits

Year	RPP	DPSP	RRSP
2008	\$21,000	\$10,500	\$20,000
2009	\$22,000	\$11,000	\$21,000
2010	\$22,450	\$11,225	\$22,000

Tax-free Savings Account (TFSA)

Canadian residents aged 18 or older can contribute up to \$5,000 to a TFSA in 2010, plus any unused TFSA contribution room at the end of 2009. The contributions are not deductible for income tax purposes. TFSA holders can make withdrawals at any time, and the total amount of the withdrawals in a calendar year is added to the contribution room for the following year. Unused contribution room can be carried forward indefinitely.

8.9 DISABILITY INCOME INSURANCE

Benefits paid under a plan to which an employer contributes are taxable for an employee. Employee contributions are deductible from taxable benefits; employer contributions are not considered to be a taxable benefit for employees. Lump sum amount in settlement of future benefits under a group long term disability policy is not taxable to the employee. Benefits paid under an employee-pay-all plan are not taxable.

8.10 GROUP LIFE INSURANCE

Premiums paid by an employer under a group life insurance plan are a taxable benefit to an employee, excluding accidental death and dismemberment premiums.

8.11 INSURANCE PREMIUM SALES TAX

An 8% sales tax is applied to the group insurance premiums.