



April 16, 2025

To: REGIONAL VICE PRESIDENTS  
BRANCHES & FACILITIES

## Enhanced Benefits Agreement

As most members know, negotiations to improve our benefits have been underway for over 2 years. We are pleased to announce that the NAV Canada Joint Council (NCJC) Benefits Committee has finally reached an agreement to revise active represented employee (represented by the NAV Canada Bargaining Agents Association) benefits as part of the benefits cyclical review exercise.

This includes important enhancements for eligible members and their families, aimed at supporting various health and wellness commitments. Your input has been critical in shaping these decisions, ensuring that our benefits remain competitive.

These changes to the active represented employees benefit plan will become **effective July 1, 2025**. Expenses incurred before July 1, 2025 for services not previously covered under this plan will not be eligible for reimbursement. Key changes include increased coverage for mental health services with an expanded list of eligible providers, as well as enhancements to dental, vision care, and fertility drug coverage. A combined maximum is being introduced for certain paramedical services, along with a new benefit for gender-affirming care and a newly established annual maximum for physiotherapy.

An article in NAV Canada Now was published today. You can access the article [here](#).

Here is a summary of changes:

- **Co-insurance** will be set at 80% for all paramedical and physiotherapy services except for Mental Health Practitioners and Gender-affirming care provisions below. The co-insurance for all other provisions of the plan remains unchanged.
- Increase to mental health benefits from \$1,000 to **\$1,750, with an expanded list of mental health practitioners**. This means that in addition to registered psychologists, employees will have coverage for social workers, psychotherapists, marital and family therapists, psychiatrists, clinical counsellors and psycho-educators.

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- A physician's prescription is not required to access these services. Services must be provided, however, by a licensed, registered, or certified practitioner in their respective provincial licensing body or professional organizations.
- Increase to vision care from \$225 to **\$350** every two years which includes glasses, contacts and laser eye surgery.
- Increase to dental care from \$1,750 to **\$2,500** for Basic and Major Services (combined) per person, per year, and Orthodontics services increasing from \$2,500 to **\$3,000** per person, lifetime.
- The current coverage—\$300 for acupuncturists, chiropodists/podiatrists, naturopaths, osteopaths, and registered massage therapists; \$500 for chiropractors and speech-language pathologists; and \$20 per visit for electrologists—**will be combined into a single maximum of up to \$1,200 per person, per year, for any practitioner within this category.** The list of eligible practitioners remains the same.
  - Eligible claims will be covered at 80%, until the maximum \$1,200 annual reimbursed amount is attained.
  - A physician's prescription is not required to access these services. Services must be provided, however, by a licensed, registered or certified practitioner in their respective provincial licensing body or professional organizations.
  - Note: as of implementation date (July 1, 2025), all incurred paramedical claims for the period of January 1, 2025 to June 30, 2025 will be calculated and applied against the \$1,200 annual maximum coverage for the year ending on December 31, 2025. For clarity, the annual maximum will not reset at \$0 if there were incurred paramedical claims in 2025. For employees whose combined claims exceed the \$1,200 annual maximum before the implementation date, no recovery will be undertaken.
- Physiotherapy modified from unlimited to **\$1,200** per person, per year. Coverage now extends to include athletic therapists.
  - Eligible claims will be covered at 80%, until the maximum \$1,200 annual reimbursed amount is attained.
  - Doctor's referral will no longer be required. Services must still be provided by a licensed, registered, or certified practitioner in their respective provincial licensing body or professional organizations.
  - For coverage over \$1,200, employees will require a physician's note indicating the need to continue treatment.
  - Additional details will be provided in the updated benefits booklets closer to the effective date.

- **New** gender-affirming care benefit to a lifetime maximum of \$10,000. This coverage includes surgical procedures to align feminine or masculine features to the transitioned gender. Full list of enhanced coverage is based on Sun Life's offering under this category. Eligibility: minimum age of 18 and requires diagnosis of gender dysphoria from a doctor. All procedures must be performed in Canada.
- **Update to** fertility drug benefit to a lifetime maximum of \$5,000
  - Previously this coverage was provided on an ad-hoc basis which is now streamlined for a wider access by all active represented employees
- **New** optional life and critical illness insurance at the employee's cost.

On behalf of the CATCA Executive Board,

Nick von Schoenberg  
President

Scott Loder  
Executive Vice-President

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