

Benefit Summary

Quote#: 1.4

Benefit	Details	
Eligible Employees	Class A: All Other Employees	
Basic Life *	Benefit Maximum Non-Evidence Maximum Benefit Reduction Living Benefit Waiver of Premium Conversion Privilege Termination	1.0 times annual earnings \$250,000 \$250,000 Benefit reduces 50.00% at age 65 0.00% at age 70, to max of \$25,000 Included Included Included Earlier of age 85 or retirement
AD&D *	Benefit Maximum Benefit Reduction Waiver of Premium Conversion Privilege Family Benefits Termination	1.0 times annual earnings \$250,000 Equivalent to Basic Life Benefit Included Included Included Earlier of age 85 or retirement
Dependent Life *	Benefit Definition of Dependent Waiver of Premium Conversion Privilege Termination	Spouse: \$10,000 Child: \$5,000 From live birth Included Included Earlier of age 85 or retirement
Weekly Indemnity	Benefit Maximum Non-Evidence Maximum Payable From Benefit Duration Taxability Waiver of Premium Termination	70.00% of weekly earnings \$1,000 \$1,000 1st day hospitalization and accident, 8th day for sickness 16 weeks Taxable Included Earlier of age 65 or retirement
Long Term Disability	Benefit Maximum Non-Evidence Maximum Elimination Period Benefit Duration Definition of Disability Taxability Cost of Living Allowance Benefit Offsets Survivor Benefit All Source Maximum Waiver of Premium Termination	66.67% of monthly earnings \$10,000 \$4,000 16 weeks To age 65 2 year own occupation Taxable Not Included Primary CPP 3 months 85% Included Earlier of age 65 or retirement
Extended Health Care	Deductible Coinsurance	Nil 100% drugs / 100% other Note: deductibles and coinsurance do not apply to Hospital, Vision or Out-of-Province/Canada Emergency Coverage

Benefit	Details	
	Drugs - Deductible - Coverage - Maximum Hospital Paramedical Practitioners - Covered Practitioners - Doctor's Referral - Maximum Hearing Aids Orthotics & Orthopaedic Shoes Smoking cessation Vision Care Eye Exams Out-of-Province/Canada Emergency Coverage Private Duty Nursing Accidental Dental Employee Assistance Program Virtual Doctor Services Second Opinion Program Overall Plan Maximum Survivor Benefit Large Claim Pooling Threshold Termination	Pay-Direct Card \$10 dispensing fee maximum Mandatory Generic Unlimited Semi-Private Enhanced Plan: Speech Therapist/Audiologist, Clinical Psychologist/Social Worker, Osteopath, Chiropractor, Physiotherapist/Athletic Therapist, Naturopath/Dietician, Acupuncturist, Chiropracist/Podiatrist, Massage Therapist Not Required \$750/calendar year/practitioner \$500/3 consecutive years \$200/shoe, overall \$400/calendar year \$350 per calendar year \$300/24 consecutive months (every 12 months for dependents 18 and under) Included, every 24 months, reasonable and customary Included, up to 90 consecutive days, maximum \$5,000,000 per calendar year Included, up to \$10,000 per calendar year Included, up to \$5,000 per accident Included Included Included Unlimited Included, up to 24 months \$10,000 per individual per year Earlier of age 85 or retirement Target Loss Ratio:74.5 %
Dental Care	Deductible Coinsurance Coinsurance - Basic Service Coinsurance - Major Restorative Coinsurance - Orthodontia Maximum Maximum - Basic Service Maximum - Major Restorative Maximum - Orthodontia Recall Examinations Fee Guide Survivor Benefit Termination	Nil 90% 50% 50% (Coverage only available to dependent children 18 years of age or under) \$1,500 annual maximum per person Combined with Basic \$2,500 per lifetime Every 6 months Current General Practitioner Fee Guide Included, up to 24 months Earlier of age 85 or retirement Target Loss Ratio:75.0 %

* Mandatory benefits include Life, AD&D, Dependent Life, plus two other benefits (Weekly Indemnity, Long Term Disability, Extended Health and Dental Care)

Unless otherwise stated above, our standard internal maximums and limits apply.