




Your benefits at-a-glance

Following is a high-level summary of your flexible benefits program.




YOUR CORE BENEFITS	
Long Term Disability (LTD)	<ul style="list-style-type: none"> • 67% of monthly earnings up to a maximum benefit of \$5,000 • Payable after 119 days of disability • Benefits are integrated with any disability benefits payable to you under the Canada Pension Plan • Benefit payments are taxable
Accidental Death and Dismemberment (AD&D)	<ul style="list-style-type: none"> • Provides a lump-sum cash benefit of up to \$25,000 if you suffer a serious injury or death because of an accident
Employee Assistance Program (EAP – Contact)	<ul style="list-style-type: none"> • Provides you and your dependents with access to confidential counselling and information services
Best Doctors	<ul style="list-style-type: none"> • Provides you and your dependents with access to a network of medical specialists if you are diagnosed with a serious illness • Allows you to get a complete explanation of your medical condition, verify a diagnosis, and confirm best treatment options

Note: No selection is required for the Core Benefits.

To help you select the plan that best suits your needs and preferences, the following table provides you with a side-by-side comparison of your program choices:

COVERAGE	 GREEN LEAF PLAN	 ORANGE LEAF PLAN	 BLUE LEAF PLAN
Life Insurance			
Employee Basic Life	\$25,000	\$40,000	2 times salary
Dependent Life (spouse)	\$20,000	\$20,000	\$20,000
Dependent Life (child)	\$8,000	\$8,000	\$8,000
Healthcare			
Prescription drugs			
Reimbursement of:			
• Formulary drugs	• 70%	• 80%	• 90%
• Non-formulary drugs	• 50%	• 60%	• 70%
• Dispensing fee cap	\$5 per prescription		
• Drug card	Included		
• Annual out-of-pocket maximum (per person)	\$2,000	\$1,000	\$500
	The plan pays 100% of eligible drug costs for the balance of the year if your out-of-pocket expense exceeds the above maximum for eligible drugs in that year		
Paramedical services	70% reimbursement	80% reimbursement	100% reimbursement
• Physiotherapist	\$1,000 per year	Unlimited	Unlimited
• Psychologist/Social Worker	Up to \$200 per year for each applicable service	Up to \$500 per year for each applicable service	Up to \$750 per year for each applicable service
• Registered Massage Therapist (RMT)			
• Speech Therapist			
• Osteopath			

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COVERAGE	 GREEN LEAF PLAN	 ORANGE LEAF PLAN	 BLUE LEAF PLAN
Healthcare... continued			
<ul style="list-style-type: none"> Chiropractor Naturopath 	Up to \$200 per year for each applicable service	Up to \$500 per year for each applicable service	Up to \$750 per year for each applicable service
<ul style="list-style-type: none"> Podiatrist/Chiropracist Acupuncturist Homeopath Occupational Therapist 	Not included; can be claimed under your HCSA*	Not included; can be claimed under your HCSA*	
Travel insurance			
Emergency out-of-country medical insurance	Up to \$1,000,000 per person, per emergency		
Vision care			
Frames and lenses, contact lenses	Not included; can be claimed under your HCSA*	Up to \$150 every 2 years (every year for eligible child[ren])	Up to \$200 every 2 years (every year for eligible child[ren])
Eye exams		Up to \$50 every 2 years	Up to \$90 every 2 years
Medical services and supplies			
Ambulance services (including air ambulance)	Included		
Private-duty nursing	Up to \$5,000 every 3 years	Up to \$5,000 every 3 years	Up to \$10,000 every 3 years
Orthotics and orthopedic shoes	Not included; can be claimed under your HCSA*	Up to \$300 per year	Up to \$300 per year
Hearing aids		Up to \$300 every 4 years	Up to \$600 every 5 years
Dental care (based on the current fee guide)			
Basic services (e.g., routine, preventive, endodontic, periodontic)	Not included; can be claimed under your HCSA*	80% reimbursement	90% reimbursement
Major restorative services (e.g., crowns, onlays, bridges, and dentures)		Not included; can be claimed under your HCSA*	60% reimbursement
Annual maximum	Not applicable	\$2,000	\$2,000 for all basic and major services combined
Orthodontia	Not included; can be claimed under your HCSA*	Not included; can be claimed under your HCSA*	50% reimbursement (to a lifetime maximum of \$2,000 per person)
Recall exams	Not applicable	Once every 12 months (every 6 months for eligible child[ren])	Once every 12 months (every 6 months for eligible child[ren])
Healthcare Spending Account (HCSA): annual deposit			
<ul style="list-style-type: none"> Member only Member + 1 dependent Member + 2 or more dependents 	\$500 \$1,000 \$1,600	\$250 \$500 \$700	Not included

* Remember, you can claim a wide range of services and procedures under your Healthcare Spending Account – up to the total dollar amount you have remaining in your account.