

BENEFITS SUMMARY

NORTHERN EMPLOYEE BENEFITS SERVICES (NEBS) GROUP INSURANCE AND HEALTH BENEFITS PLAN

The information contained in this summary will answer the most common questions of the Benefits Plan; however, the summary is for information purposes. In the case of a discrepancy between this summary and the Policy and contract documents, the terms and conditions of the Policy and contract documents shall be the final basis for settlement of all insured claims.

If your employer is a member of the Northern Employee Benefits Services (NEBS) Group Insurance and Health Benefits Plan you receive coverage under the Basic Insurance Plan and may be eligible for optional coverage under the Optional Benefits Plan.

Should you have any questions you may contact the NEBS office @ (867) 873-4965.

NOT ALL EMPLOYERS PARTICIPATING IN THE NEBS GROUP INSURANCE PLAN HAVE THE SAME COVERAGE. CHECK WITH YOUR EMPLOYER TO FIND OUT WHAT COVERAGE IS OFFERED TO EMPLOYEES.

The Basic Insurance Plan coverage includes:

- Basic Group Life Insurance
- Accidental Death, Disease and Dismemberment Insurance
- Dependent Life Insurance
- Long Term Disability Insurance

The following Optional Benefits Plan coverage may be available:

- Short Term Disability Insurance
- Extended Health Care and Vision Services
- Dental Care
- Elected and Appointed Officials Program



BASIC INSURANCE PLAN

Basic Group Life Insurance Coverage

In the case of your death while employed by a NEBS employer, your beneficiary will receive a benefit payment.

Your employer has two options for life insurance benefits.

Check with your employer to find out which of the following two options they offer employees.

OPTION 1

If you are under 65 years of age at the time of death your beneficiary will be paid 3 times your annual salary rounded up to the next \$1,000, to a maximum benefit of \$300,000.

OPTION 2

- If you are under 65 years of age at the time of death your beneficiary will be paid 1.5 times your annual salary, rounded up to the next \$1,000, to a maximum benefit of \$150,000.
- If you are 65 years of age or older at the time of death your beneficiary will be paid 50% of the amount in effect immediately prior to your 65th birthday.
- If you are 70 years of age or older at the time of your death your beneficiary will be paid 25% of the amount in effect immediately prior to your 65th birthday.
- ♣ Your salary means your regular annual salary, not including bonuses, commissions, overtime, moneys paid in lieu of holidays or for traveling expenses, subsistence allowance, housing allowance, settlement allowance, living allowance, honorarium, fees or any other moneys paid in addition to your ordinary salary or wages.
- If you become terminally ill you may be eligible for Living Assistance Benefits, as an advance payment of life insurance, to help meet your medical or other health and welfare expenses. Certain conditions apply and this benefit is at the sole discretion of the insurance company.

Your basic group life insurance benefit terminates at age 75. You and/or your spouse's optional group life insurance terminates when you are age 70.



ACCIDENTAL DEATH, DISEASE AND DISMEMBERMENT COVERAGE

Accidental Death Benefit

If the insurance company is provided with proof that your death occurred as a direct result of accidental bodily injuries resulting from external, violent, and accidental means without negligence on your part, the insurance company will pay to your beneficiary an additional amount equal to 100% of the basic life insurance benefit, see previous section for basic life insurance information.

Critical Disease Benefit

If, after the effective date your coverage begins with NEBS, you are diagnosed with a critical disease and become totally disabled, as defined under the Policy, and have not been able to work at any occupation for at least 9 months, the insurance company will pay you at an amount equal to 10% of your basic life insurance benefit to a maximum of \$50,000. Benefits are limited to the first covered critical disease in your lifetime. Critical Disease is defined under the policy.

Disease/Dismemberment Benefit:

If the insurance company is provided with proof that you sustained a loss of the use of a part of your body as a direct result of a critical disease or bodily injuries resulting from external, violent, and accidental means, without negligence on your part, the insurance company will pay a percentage of your basic life insurance benefit based on the Loss Schedule indicated in the Policy (i.e. paraplegia, hemiplegia, quadriplegia, limbs, sight, hearing).

Your accidental death, disease/dismemberment benefit terminates at age 75, and critical disease benefit at age 65.

DEPENDENT LIFE COVERAGE

This benefit provides life insurance coverage for your spouse and dependent children.

The amount of the benefit is:

- ♣ Death of Spouse—\$10,000
- Death of Dependent Child -\$5,000

For the purpose of this benefit, spouse includes common-law spouse provided he/she has resided with you a minimum of one year. Dependent child includes all unmarried children: (1) from birth to their 21st birthday, (2) to their 25th birthday if they are in full-time attendance at an accredited educational institute, or (3) of any age provided they suffer from a permanent mental or physical infirmity and are wholly financially dependent upon you, provided they become so disabled while otherwise under either of the previous two conditions.

Your dependent insurance coverage terminates when you reach age 70.



LONG TERM DISABILITY COVERAGE

This benefit provides salary replacement should you become totally disabled as the result of an accidental injury or illness and are unable to work. Your employer has two options for long term disability benefits.

Check with your employer to find out which of the following two options they offer employees.

OPTION 1

♣ Your benefit is calculated at 60% of your regular monthly salary to a maximum of \$6,600/month, or 85% of your pre-disability net salary, whichever is less. This benefit is non-taxable.

OPTION 2

♣ Your benefit is calculated at 70% of your monthly salary to a maximum of \$6,600/month or 85% of your pre-disability gross salary, whichever is less. This benefit is taxable.

Your benefit will begin on the 120th day of continuous/consecutive disability.

You are eligible for benefits for a 24 month period from the date of disability if you are unable to perform the usual and customary duties of your occupation. Thereafter, benefits will continue only if you are unable to perform the duties of any occupation.

A Mandatory Rehabilitation Program benefit is included.

Your long term disability benefit terminates at age 65.

OPTIONAL BENEFITS PLAN

Optional Life Insurance Coverage

In addition to your Basic Group Life Insurance, you may wish to apply for an additional amount of life insurance for you and/or your spouse. Optional Life Insurance coverage will take effect the first day of the next month after your application is approved. Optional Life Insurance is available in units of \$10,000, to a maximum benefit of \$200,000.

Optional life insurance terminates when you reach age 70.



Short Term Disability Coverage (Weekly Indemnity)

This coverage provides salary replacement benefits should you become disabled as a result of injury or sickness, require the attendance of a specialist, and unable to perform the usual and customary duties of your occupation. Your employer has two options for short term disability.

Check with your employer to find out if short term disability coverage is offered and which of the following two options you have.

OPTION 1

♣ Your benefit is calculated at 60% of your weekly salary, to a maximum weekly benefit of \$1,535, or 85% of your pre-disability net salary, whichever is less. This benefit is nontaxable.

OPTION 2

▶ Your benefit is calculated at 70% of your weekly salary to a maximum weekly benefit of \$1,535 or 85% of your pre-disability gross salary, whichever is less. This benefit is taxable.

Your benefits will commence on the 1st day if your disability is due to injury and the 8th day if your disability is due to sickness.

Benefits are payable for a maximum of 17 weeks but will terminate if you retire, take another job, refuse to take a medical examination or participate in a rehabilitation program, or on your 65th birthday.

Benefits will be adjusted for any disability benefits you may receive from Workers' Compensation or Canada Pension.

Your claim must be made within 90 days from your disability.

Elected and Appointed Officials Coverage

This coverage provides benefits for elected or appointed officials in the case of their death. In the case of death while serving in office for a NEBS employer, the beneficiary will receive a benefit payment of \$100,000.

If the insurance company is provided with proof that death occurred as a direct result of accidental bodily injuries resulting from external, violent and accidental means without negligence on your part, the beneficiary will receive an additional benefit payment of \$100,000.

This coverage is reduced by 50% at age 65, by 75% at age 70 and is terminated at age 75.



EXTENDED HEALTH AND VISION CARE COVERAGE

Check with your employer to find out if extended health care coverage is offered.

This benefit pays for prescription drugs, a range of paramedical services and vision care costs.

Coverage includes:

- Costs for emergency care while traveling outside of Canada.
- Costs for a semi-private hospital room.
- ♣ Costs for the services of paramedical practitioners are covered to a maximum benefit of \$750 per calendar year for each of the following groupings:
 - Osteopath, Chiropractor, Podiatrist
 - Nutritionist, Dietician
 - Naturopath, Acupuncturist
 - Physiotherapist, Massage Therapist
 - Speech Therapist, Audiologist
 - Psychologist, Licensed Counselor
- ♣ Cost for drugs legally requiring a prescription are covered 100% with no deductible.
- ♣ The cost of the Medical Travel deductible under the government health insurance plan up to \$250.
- **♣** Costs for medical supplies and equipment not supplied by the government health insurance plan.
- ➡ Vision Care costs for the purchases of lenses, frames, or contact lenses prescribed by a licensed optometrist or ophthalmologist, to a maximum of \$350 in any 24 consecutive months for adults, every 12 consecutive months for children. Costs for Laser Eye Surgery to a lifetime maximum of \$1,500.

This is a partial list only and employees are encouraged to contact their employer for complete plan details.

Employees have the choice of single coverage; spouse only coverage or family coverage for their spouse and dependent children.

Your extended health care benefits terminate at age 70.



DENTAL CARE COVERAGE

Check with your employer to find out if dental coverage is offered.

This benefit pays for dental services.

The plan covers:

- ♣ Basic Services—100% of eligible charges
- ♣ Major Services—60% of eligible charges
- ♣ Orthodontic Services—50% of eligible charges

The maximum reimbursement will not exceed the amounts per person indicated below:

- Basic Services
- Major Services
 - Combined annual maximum of \$2,000 per covered person
- Orthodontic Services
 - Dependent children under 19 only
 - \$3,500 lifetime per covered child

The amount of \$25.00 for singles and \$50.00 for families will be deducted from the covered charges incurred in any one calendar year.

Dental Treatment likely to exceed \$400.00 should be submitted to the insurance company for prior approval. This procedure will identify the cost you may be responsible for and will provide you with an opportunity to seek an alternative course of treatment if necessary.

Employees have the choice of single coverage; spouse only coverage or family coverage for their spouse and dependent children.

Your dental insurance terminates at age 70.