



PerformPlus[®]



BENEFIT DETAILS



 **Desjardins**
Insurance
Life • Health • Retirement

Basic life insurance (mandatory)

Up to \$1,000,000 in coverage

Family coverage available for spouse and dependent children

	Plan member basic life insurance	Life insurance for spouse	Life insurance for dependent children
Amount of coverage	Choice: 1, 2, 3, 4 or 5 times salary or a fixed amount Amount rounded to the next multiple of \$1,000 Minimum: \$10,000 Maximum: \$1,000,000	Choice: \$5,000 or \$10,000	50% of spouse's coverage
Reduction	50% at age 65	None	None
Termination	At age 71 or retirement, whichever comes first	Upon termination of plan member's basic life insurance	Upon termination of plan member's basic life insurance

Non-evidence maximum – No evidence of insurability is required for coverage that is less than the amount we specify. This amount is established based on the number of plan members and the group's total amount of insurance.

Living benefit – For any disabled insured with a life expectancy of less than 24 months – payment up to 50% of the life insurance amount subject to a maximum of \$100,000.

Newborn coverage – Choice of start of coverage: 24 hours after birth or at birth.

Optional life insurance

Available for plan members and their spouses. A medical questionnaire must be completed and evidence of insurability is required.

Minimum amount \$20,000	In multiples of \$10,000	Maximum amount (including basic life insurance) \$1,000,000
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Termination: At age 71 or retirement, whichever comes first

Accidental death and dismemberment insurance

Coverage also available for spouse and dependent children

	Maximum amount: \$1,000,000	
	Plan member	Dependents
Amount of insurance	Equal to the amount of basic life insurance	Equal to the amount of dependent life insurance
Termination	At age 71 or retirement, whichever comes first	Upon the termination of dependent life insurance

Critical illness insurance

Critical illness insurance complements traditional disability income insurance. However, unlike disability insurance, the benefit is paid in a lump sum amount as opposed to monthly payments. Plan members can use the benefit as they see fit.

You can offer this coverage to your employees, their spouses and their children on an optional or mandatory basis, or you can combine the two. The group/class size must have at least 10 plan members for mandatory participation and at least 3 plan members for optional participation.

Amount of insurance	
Plan member mandatory benefit	Units of \$10,000 Minimum: \$10,000 Maximum with evidence: up to \$230,000
Dependent mandatory benefit	Same amount as basic dependent life insurance
Plan member and spouse optional benefit	Units of \$10,000 Minimum: \$10,000 Maximum with evidence: \$100,000
Child optional benefit	Units of \$5,000 Minimum: \$10,000 Maximum: \$25,000

Benefit features	
Basic benefit	Enhanced benefit
4 illnesses for adults, 11 illnesses for children	31 illnesses for adults, 38 illnesses for children
Percentage of reimbursement: 100% of the amount of insurance	
Cancer recurrence	
Multiple occurrence coverage	
Payment of 10% of the amount of insurance for coronary angioplasty, prostate cancer, skin cancer or breast cancer	
Waiver of premium	
Conversion privilege	
Termination of coverage: at age 65 or retirement, whichever comes first	

Disability insurance

- Replaces a plan member's income during short-term or long-term disability to help meet any financial obligations and maintain the same quality of life.
- Disability management and prevention services are included with disability insurance because each disability claim is unique, and the sooner a plan member's claim is reviewed, the better the chance of recovery and return to work.
- The Health is Cool 360° platform and the Corporate assistance program 360° are automatically included with long-term disability insurance.

	Short-term disability	Long-term disability
Percentage of salary <i>Taxable benefits</i>	<ul style="list-style-type: none"> • 55, 60, 66⅔, 70 or 75%; or • 66⅔% of the first \$500 per week + 50% of the next \$500 + 40% of the balance 	<ul style="list-style-type: none"> • 60, 66⅔, 70 or 75%
Percentage of salary <i>Non-taxable benefits</i>	<ul style="list-style-type: none"> • 55, 60 or 66⅔%; or • 66⅔% of the first \$500 per week + 50% of the next \$500 + 40% of the balance 	<ul style="list-style-type: none"> • 60 or 66⅔%; or • 66⅔% of the first \$2,250 per month + 50% of the balance
Maximum benefit amount	Up to \$2,000 (without evidence of insurability)	Up to \$5,400 (without evidence of insurability) Up to \$12,000 (with evidence of insurability)*
Termination	At age 71 or retirement, whichever comes first	At age 65 or retirement, whichever comes first
Waiting period	6 possible combinations (Accident/Hospitalization/Illness) • 0/0/3, 0/3/3, 0/0/7, 0/7/7, 7/7/7 or 14/14/14 days	15, 16, 17 or 26 weeks
Maximum benefit period	15, 16, 17 or 26 weeks	2 years, 5 years, or to age 65
Payment basis	7 calendar days or 5 business days	–
Definition of total disability	–	<ul style="list-style-type: none"> • 24 months/own occupation • 5 years/own occupation**
Cost of living adjustment	–	As per the Consumer Price Index Maximum of 3% Starting after 1 year

* For long-term disability insurance: benefit amounts available with evidence of insurability based on the size of the group.

Number of plan members	Maximum (with evidence of insurability)
3 to 4	\$4,000
5 to 9	\$6,000
10 to 24	\$8,000
25 or more	\$12,000

** Not available to groups with less than 10 plan members. For groups with 10 to 19 plan members, this option is only offered to office employees.

Extended healthcare insurance (drugs)

Payment card included and accepted by participating pharmacists in Canada.

Deductible	4 options: \$0/\$0, 25/50, 50/100, 100/200 or choice of co-pay
Plan and percentage of reimbursement	<p>With mandatory generic substitution and reimbursement of 70, 75, 80, 90 or 100% (or percentage in compliance with RAMQ for Quebec groups)</p> <p>With mandatory generic substitution and reimbursement tiers:</p> <ul style="list-style-type: none"> • 90% of the generic drug or the cost of the generic equivalent and 75% of the brand name drug if no generic drug is available • 100% of the generic drug or the cost of the generic equivalent and 80% of the brand name drug if no generic drug is available <p>No generic substitution and reimbursement of 70, 75, 80, 90 or 100% (or percentage in compliance with RAMQ for Quebec groups)</p>
Caps on mark-ups and dispensing fees	<ul style="list-style-type: none"> • Reimbursement limited to our standards, or • Dispensing fees limited to \$1 to \$25*, and mark-ups limited to our standards, or • Dispensing fees not reimbursed* and mark-ups limited to our standards
Maximum contribution	<ul style="list-style-type: none"> • None, or • Maximum contribution of \$500, \$1,000 or \$1,500 per calendar year for both plan members and their spouses (applies to all drugs)

Patient support program for specialty drugs*

Options (some restrictions may apply)

- Active Pharmacy service to encourage plan members to choose safe, approved, lower-cost maintenance drugs that are delivered by free standard shipping to any address of their choice*
- Smoking cessation aids*
- Fertility drugs or treatments (lifetime amount of up to \$3,000 per insured)
- Sexual dysfunction products or drugs

* Available in all provinces except Quebec.



Extended healthcare insurance

Deductible	Combined with drug deductible or separate deductible \$0/\$0, 25/50, 50/100 or 100/200
Percentage of reimbursement	Fixed: 70, 75, 80, 90 or 100%
Termination	At retirement

Healthcare professionals

Services of the following healthcare professionals are covered:

- acupuncturist
- osteopath
- audiologist or hearing therapist*
- speech therapist
- chiropractor
- homeopath
- occupational therapist
- naturopath
- psychologist, psychotherapist, social worker, registered clinical counsellor, psychoeducator or guidance counsellor*
- podiatrist or chiropodist*
- physiotherapist, physiatrist, physical rehabilitation therapist or sports therapist*
- dietician or nutritionist
- massage therapist

* The maximum benefit amount applies to all specialists in these fields.

Eligible or payable reimbursement:

Maximum per specialist or combined maximum for all specialists per calendar year: \$300, 500, 750 or 1,000

Hearing aids

Maximum of \$500 every 36 months

Hospitalization expenses

Up to the maximum of the eligible cost for a semi-private room

In case of hospitalization in Canada, 100% of the hospitalization expenses are reimbursed.

Home nursing care

Maximum of \$10,000 per year

Convalescent/Rehabilitation centre

\$40 per day, maximum of 180 days per hospitalization period

Other coverage included

- Eye exams – \$100 per insured every 24 months (adults) or every 12 months (children)
- Orthopaedic shoes and podiatric orthotics
- Preventive immunizations
- Medical equipment

Travel insurance

Emergency expenses: maximum payable amount of \$5 million

Health Assistance service

Travel Assistance service

Options

- Eyeglasses and contact lenses
 - 100% of expenses are reimbursed, not subject to a deductible
 - Maximum every 24 months per adult and every 12 months per child
 - Choice of maximum: \$75, 100, 150, 200, 250 or 300
- Convalescent care (at home)
- Addiction treatment (room and board expenses)*
- Benefit extension in the event of the plan member's death: 24 months
- Waiver of premium*

* Some restrictions may apply

Dental care insurance

- Wide choice of deductibles
- Several options for the percentage of reimbursement and annual maximum payable
- Composite restorations (white fillings) automatically included with dental care insurance

Deductible	Choice of: \$0/\$0, 25/50, 50/100 or 100/200
Percentage of reimbursement	Percentage reimbursed based on the number of plan members (please refer to table below) Options: <ul style="list-style-type: none"> • Eligible expenses reimbursed according to the fee guide of the province of residence • Eligible expenses reimbursed according to the fee guide of the province where treatment is given
Annual maximum payable	Options: <ul style="list-style-type: none"> • Groups of less than 10 members: \$500, 750, 1,000 or 1,500 • Groups of 10 or more members: \$500, 750, 1,000, 1,500, 2,000, 2,500 or unlimited for certain services
Termination	At retirement

Percentage of reimbursement

Number of plan members in the group	Preventive services	Basic, endodontic and periodontic services	Major restorative services	Child orthodontics
3 to 4	50, 60, 70, 80, 90 or 100%	50, 60, 70, 80, 90 or 100%	–	–
5 to 9	50, 60, 70, 80, 90 or 100%	50, 60, 70, 80, 90 or 100%	50 or 60%	–
10 or more	50, 60, 70, 80, 90 or 100%	50, 60, 70, 80, 90 or 100%	50, 60, 70* or 80*%	50 or 60%

* Some restrictions may apply.

Options

- Recall exams every 6, 9 or 12 months
- Benefit extension upon the death of the plan member
- Waiver of premium (some restrictions may apply)



Health spending account (HSA)

Plan prerequisites	To add an HSA, your plan: <ul style="list-style-type: none"> • Must include the extended healthcare benefit with travel insurance • Must have at least three plan members
Who is eligible	All plan members and their dependents, including those exempt from the extended healthcare benefit
Eligible expenses	Eligible health and dental expenses are those that are eligible for federal refundable tax credits for medical expenses
Credits	<ul style="list-style-type: none"> • Different deposit frequencies are available: annually, bi-annually, quarterly or monthly • A dollar amount must be set for each certificate • There is an annual minimum of \$250 per plan member and \$2,500 for the group
Carryovers	Unused credits can be carried over to the next year. However, if they're not used in the carryover year, they will be lost.
Reimbursements	Exclusively with our direct deposit service. Reimbursements are processed more quickly and deposited directly into plan members' bank accounts
Billing	Self-insured with monthly billing in arrears