

This document summarizes the coverage offered under the Association des retraitées et retraités de l'enseignement de la FNEEQ (AREF) group insurance plan.

It was designed to make it easier for you to make your coverage selections on enrolment and includes the information most often accessed by insureds.

For a full description of the plan and for information on the applicable exclusions and reductions, please refer to the contract, which has been posted on the La Capitale website or by registering for the Client Centre.

AREF

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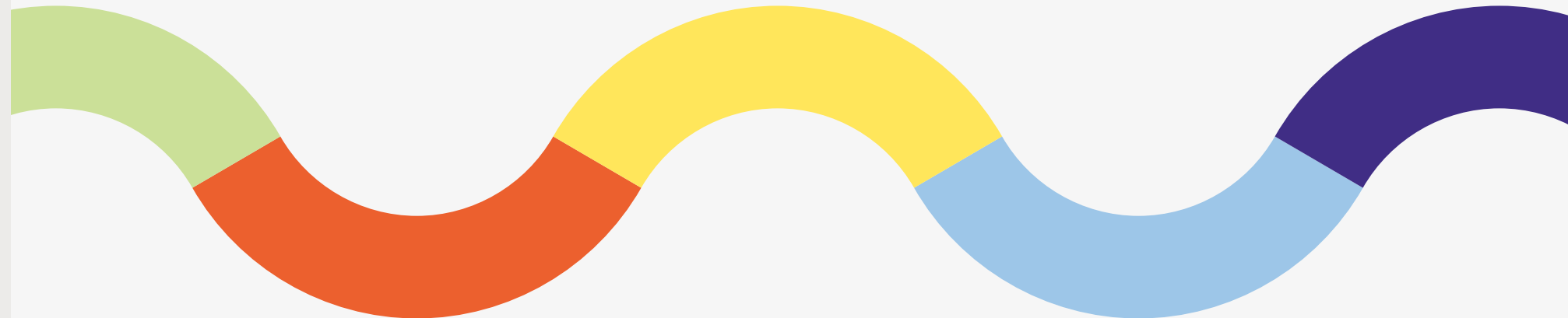
lacapitale.com



Group insurance plan

Schedule of coverage
effective January 1, 2022

Contrat 001011



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by La Capitale 

Beneva designates La Capitale Civil Service Insurer Inc. as insurer.
This document is not a contract. It merely provides an overview of the coverage available. Only the contract may be used to settle legal issues.
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PI045E (2021-11)

The Insurer pays the beneficiary the life insurance amount corresponding to the age of the insured at the time of death.

Participant's basic life insurance

Retiree under age 65:

1 times the annual salary at the time of retirement, rounded up to the closest \$500

Retiree age 65 or over: \$5,000

Dependents' basic life insurance

Spouse:

If the death occurs:

- before the 65th birthday: \$10,000
- on or after the 65th birthday and before the 70th birthday: \$4,000
- on or after the 70th birthday: \$2,000

Dependent child: \$4,000

Participant's optional life insurance

Retirees can reduce the number of units of optional life insurance at any time, but may not increase it.

Persons retired on or after January 1, 2004

Under age 65 1 to 10 units of \$5,000

As of age 65 1 to 10 units of \$5,000

As of age 70 1 to 8 units of \$5,000

When the amount of basic life insurance is reduced due to age, participants may obtain the equivalent amount in units of optional life insurance coverage, without however exceeding the number of units available for their age group.

Persons retired before January 1, 2004

Retirees age 65 or over but under age 70:
1 to 8 units of \$5,000

Retirees age 70 or over on January 1, 2004:
1 to 2 units of \$5,000

Retirees who are age 70 on or after January 1, 2004: can maintain the amount of optional life insurance they held immediately before reaching age 70.

General information

Eligibility

To be eligible for insurance, retirees must join the AREF **and maintain their membership**.

All dependents of a participant are eligible for insurance as of the same date as the participant if they are already a dependent, or as of the date on which they subsequently become dependents.

Enrolment

Enrolment in health insurance coverage¹ and life insurance is optional.

All applications must be submitted within 30 days following the date the retiree becomes eligible.

The decision to not enrol is irrevocable.

The 30-day deadline also applies to retirees who are insured under another group health insurance plan when they retire and who wish to enrol in the AREF's health insurance plan on account of the termination of their coverage under the other plan. Joining the AREF remains mandatory.

On the death of the participant, dependents may remain insured if the spouse becomes a member of the AREF.

Travel insurance

To be covered under this benefit, insureds who have a known illness or condition must ensure before departure that their health condition is stable and under control, that they can carry out usual daily activities and that they are experiencing no symptoms that may reasonably suggest that any complications may arise or that medical care may be required during the planned stay outside the province of residence.

The insured must contact the Assistor at least 15 days before departure to obtain confirmation of insurance coverage under this benefit.

CanAssistance, La Capitale's travel assistor, will provide you with information about your eligibility and specific advice about your travel destination.

Call CanAssistance

- In Canada and the United States: 1 800 363-9050
- Collect worldwide: 514 985-2281

You should always have your service card with you when travelling. The Assistor's contact information is printed on the back of it.

Client Centre

From our website or using our mobile app, you can:

- Obtain details of your coverage
- See your service card
- Access your cumulative amounts for tax purposes

How to register:

1. Register at lacapitale.com
2. Select Client Centre from the drop-down menu in the upper right corner of the screen and follow the instructions.

Claims

Prescription drugs – direct automated payment service

When making eligible prescription drug purchases,² simply present your service card to the pharmacist. La Capitale will automatically issue payment for the insured portion of prescription drug expenses.

Healthcare Claims

You can submit your health insurance claims directly from the La Capitale Client Centre.

- **Healthcare professionals:** You enter all the required information (type of professional, amount claimed, name of professional, etc.).

It's fast and easy! The reimbursement is deposited in your account in the next 24 to 48 hours.³

- **Other expenses:** You can submit your claims, attaching photos of your receipts. The current processing times apply to all such expenses.

Receipts must be kept for 12 months, in case of an audit.

Download the Client Centre mobile app from the App Store or Google Play.

¹ This plan does not provide for the reimbursement of prescription drugs on the RAMQ list. Everyone who enrolls must register with the RAMQ plan. However, persons under age 65 who are eligible under a group insurance plan (for example spousal coverage) that reimburses prescription drugs on the RAMQ list must participate in that plan.

² Prescription drugs on the RAMQ list are not eligible.

³ This delay may vary according to your financial institution.

This table provides a brief description of the coverage included in your insurance plan. For a full description of the plan and for information on the applicable exclusions and reductions, please refer to the contract, which has been posted on the the La Capitale website at: lacapitale.com/aref/en.

Eligible expenses are those reasonably incurred and justified by the seriousness of the case as well as by current medical practice and the customary and reasonable charges in force in the area.

Health insurance

Care, service or supply expenses followed by an asterisk (*) require a medical prescription.

The maximums shown are per insured.

Annual deductible	None
Expenses reimbursed at 100%	
Hospitalization	Semi-private room
Extended care	Semi-private room, maximum of 180 days per calendar year
Travel Insurance and Assistance	Coverage period: As long as the insured is covered under the Health Insurance Plan of the province of residence Maximum lifetime: \$2,000,000
Trip cancellation insurance	Maximum per trip: \$5,000

Expenses are reimbursed according to the applicable percentage specified by the Régime général d'assurance médicaments du Québec (RAMQ)

Prescription drugs	Prescription drugs and pharmaceutical services that can be obtained only by prescription from a healthcare professional legally authorized to prescribe such drugs . Also eligible for reimbursement are drugs obtained on prescription with directions for use specifically related to treatment of the following pathological conditions: cardiac disorders, pulmonary disorders, diabetes, arthritis, Parkinson's disease, epilepsy, cystic fibrosis and glaucoma. Maximum of reimbursement of \$100,000 per calendar year Prescription drugs that are covered by the RAMQ's basic prescription drug insurance plan are not eligible for reimbursement.
Automated payment service	Direct

Expenses reimbursed at 80% (including healthcare professionals fees)

Adult diapers for incontinence*	Maximum of \$400 per calendar year
Ambulance	Covered
Appliance for temporomandibular joint*	\$100 per period of 24 consecutive months
Appliance used to manage diabetes* (blood glucose monitor, dextrometer or any other appliance of a similar nature for an insulin-dependent insured)	\$200 per period of 5 consecutive years
Artificial limbs,* prosthetic* and orthopedic* equipment	Covered
Capillary prosthesis (wig) following chemotherapy*	Maximum of \$320 per calendar year
Corrective (deep) footwear*	\$150 per pair, 2 pairs per calendar year
Curative and preventive vaccinations	Covered
Expenses for travel to receive treatment from a medical specialist not available in the insured's region of residence*	\$500
External breast prosthesis following a mastectomy*	Maximum of \$400 per calendar year
Foot orthoses	Maximum of \$360 per calendar year
Hearing aid	\$500 per period of 3 consecutive years
Insulin pump* and a continuous glucose monitoring device	\$1,750 per period of 5 consecutive years
Magnetic resonance imaging	Maximum of \$400 per calendar year
Multiservices (home care and assistance)*	Covered (within 30 days following the hospitalization or day surgery)
<ul style="list-style-type: none"> Professional fees for nursing care: 	Maximum of \$48 per day
<ul style="list-style-type: none"> Fees for home assistance services (to look after basic needs): 	Maximum of \$48 per day
<ul style="list-style-type: none"> Transportation expenses for medical care or follow-up: 	Maximum of \$24 per trip and of 3 return trips per week
Orthopedic shoes (custom-made)*	Deductible of \$20 per pair and maximum of 2 pairs per year
Oxygen therapy*, laboratory tests*, pharmacogenetic tests*	Covered
Private clinic for alcoholism, drug addiction (excluding tobacco use) and gambling	\$3,500 per calendar year, lifetime maximum of 2 admission
Rehabilitation centre	Semi-private room, maximum of \$60 per day and 15 days per hospitalization
Serums and fluids injected for curative purposes*	Maximum of \$80 per day
Support stockings	6 pairs per calendar year
Wheelchair,* iron lung* or other therapeutic devices*	Covered
X-rays, mammographies and ultrasound examinations (other than fetal)	Maximum of \$400 per calendar year

Healthcare professionals

All of the healthcare professionals whose fees are covered must be members of a professional order recognized by legislative authority or of a professional association recognized by La Capitale. One visit, treatment or consultation per day, per insured.

Acupuncturist, chiropractor and chiropractor X-rays, dietitian,* kinesiologist, massage therapist,* nutritionist,* orthotherapist, osteopath, physiotherapist, physical rehabilitation therapist and podiatrist	\$50 per treatment, maximum of \$1,500 per calendar year for all of these professionals
Dental surgery (following accident)	Treatment must be provided within 12 months following the date of the accident
Psychologist,* psychiatrist, psychoanalyst in an outpatient clinic, social worker,* career counsellor in private practice,* psychotherapist* and sexologist*	These expenses are reimbursed at 50% , subject to a maximum reimbursement of \$75 per consultation and \$1,500 per calendar year for all of these healthcare professionals. These maximums also apply per consultation in the case of marital therapy for both spouses.
Registered nurse* or licensed practical nurse*	\$200 per day, maximum of \$2,000 per calendar year
Speech therapist, occupational therapist and audiologist	\$75 per treatment, maximum of \$650 per calendar year (maximum for both of these professionals)

Premium rates

Monthly rates in effect from January 1 to December 31, 2022

Health insurance – Quebec residents⁴

Benefit	Rates
Individual coverage	\$41.69
Family coverage	\$83.38

Benefit			
Participant's basic life insurance	Required rate	Premium holiday	Payable rate
Rate per \$1,000 of insurance	\$0.9405	\$0.2451	\$0.6954
Dependents' life insurance		Rates	
Participant under age 65		\$2.35	
Participant age 65 or over		\$5.67	

Participant's optional life insurance

(rate per \$5,000 of insurance)

Age	Male	Female
Under age 55	\$1.029	\$0.552
55 to 59	\$1.842	\$0.998
60 to 64	\$2.924	\$1.458
65 to 69	\$5.071	\$2.760
70 to 74	\$7.704	\$4.635
75 to 79	\$11.814	\$7.777
80 to 84	\$19.186	\$15.041
85 to 89	\$20.165	\$15.808
90 or over	\$20.972	\$16.440

The 9% sales tax is not included in these premium rates.

⁴ Residents outside Quebec: A separate rate sheet including prescription drug coverage equivalent to that of the basic prescription drug insurance plan offered in the province of Quebec is available.

A few definitions...

Therapeutic devices

The term therapeutic devices refers to a device used for treatment and curative purposes in current medical practice. Domestic devices are not covered.

Corrective (deep) or orthopedic (custom made for the insured from a mould) shoes

These shoes must be sold by a specialized laboratory or establishment licensed and authorized under all applicable legislation in the insured's province of residence. A specialized establishment is one that has a laboratory for making adjustments and modifications on site.

Orthopedic equipment

The term orthopedic equipment refers to a technical device used to correct a functional deficiency or compensate for it.