

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 by registering for the Client Centre.

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Québec Québec G1G 6P2

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aref-neq.ca

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Group insurance plan

Schedule of coverage
effective January 1, 2024

Contract 001011

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beneva

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 the Life and Health insurance¹ benefits 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.

Health Insurance

Choice of travel insurance coverage

During initial enrolment, the retiree must choose one of the following two options for the duration of his or her travel insurance coverage.

60-Day Option: 60 days of coverage per trip. **This option is irrevocable.**

182-Day Option: provided the person is covered under the RAMQ (typically 182 days)

When a retiree chooses the 182-Day Option, changing to the 60-Day Option is always possible.

Life Insurance

Under no circumstances can the amounts of coverage selected be greater than those immediately held prior to the retirement date.

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 \$10,000

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.

Dependents' Basic Life Insurance

Spouse:

If the death occurs:

- Before age 65: \$10,000
- On or after the 65th birthday: \$5,000

Dependent child: \$5,000

Participant's Optional Life Insurance

Retirees can reduce the number of units of Optional Life Insurance at any time, but may not increase it.

Under age 70	1 to 15 units of \$5,000
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As of age 70	1 to 8 units of \$5,000
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Spouse's Optional Life Insurance

This coverage is only offered to retirees on or after July 1, 2022.

Spouse under age 70	1 to 15 units of \$5,000
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Spouse age 70 or over	1 to 8 units of \$5,000
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Different terms may apply to individuals who retired before July 1, 2022, namely regarding the basic life insurance amount or the number of additional life insurance units available.

Travel insurance

As of November 2020, changes have been made to travel insurance coverage based on the travel advisory risk level issued by the Government of Canada. Your contract stipulates, among other things, that for a country of destination covered under an advisory "to avoid all non-essential travel", coverage is limited to 30 days.

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 insureds should contact the Assistor at least 15 days before departure to obtain confirmation of insurance coverage under this benefit.

CanAssistance, Beneva's travel assistor, will provide information about their eligibility and specific advice about their travel destination.

Call CanAssistance

- In Canada and the United States: 1 855 635-9460
- Collect worldwide: 418 780-9460

When travelling, make sure you have your service card. The Assistor's contact information can also be found on the back of the card.

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.

This table provides a brief description of the coverage included under your health insurance benefit. For a full description of the health insurance benefit and for information on the applicable exclusions and reductions, please refer to the contract, which has been posted on the Beneva website.

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.

Unless otherwise indicated, the amount shown, if any, is the maximum amount that can be reimbursed per insured person.

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	60-Day Option 60 days of coverage (first 60 days of a trip) This decision is irrevocable	182-Day Option 182 days of coverage provided the person is covered under the RAMQ
	Lifetime maximum: \$2,000,000	
Trip cancellation insurance	Maximum per trip: \$5,000	
Expenses are reimbursed according to the reimbursement percentage specified by the Régime général d'assurance médicaments du Québec (RGAM)		
Prescription drugs	<p>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.</p> <p>Maximum reimbursement of \$100,000 per calendar year</p> <p>Prescription drugs that are covered by the RAMQ's Basic Prescription Drug Insurance Plan are not eligible for reimbursement.</p>	
Automated payment service	Direct	

Health insurance (cont.)

Expenses reimbursed at 80% (including healthcare professionals fees)	
Ambulance	Covered
Appliance used to manage diabetes* (blood glucose monitor, dextrometer or any other appliance of a similar nature for an insulin-dependent insured)	Maximum reimbursement of \$200 per period of 5 consecutive years
Appliance for temporomandibular joint*	Covered IMPROVED
Support stockings	6 pairs per calendar year, compression of 13 mmHg or more
Rehabilitation centre	Semi-private room, maximum of \$60 per day and 15 days per hospitalization
Corrective (deep) footwear*	Maximum reimbursement of \$150 per pair, 2 pairs per calendar year
Orthopedic shoes (custom-made)*	Deductible of \$20 per pair and maximum of 2 pairs per calendar year
Private clinic for alcohol, drug addiction (excluding tobacco use) and gambling	Maximum reimbursement of \$3,500 per calendar year, lifetime maximum of 2 admissions
Adult diapers for incontinence*	Maximum of \$400 per calendar year
Wheelchair,* iron lung* or other therapeutic devices*	Covered
Expenses for travel to receive treatment from a medical specialist not available in the insured's region of residence*	Maximum reimbursement of \$1,000 per trip IMPROVED
Continuous glucose monitoring device*	Maximum reimbursement of \$4,000 per calendar year IMPROVED
Artificial limbs,* prosthetic* and orthopedic* equipment	Covered
Multiservices (home care and assistance)* <ul style="list-style-type: none"> Professional fees for nursing care: Fees for home assistance services (to look after basic needs): Transportation expenses for medical care or follow-up: 	Covered (within 30 days following the hospitalization or day surgery) Maximum of \$48 per day Maximum of \$48 per day Maximum of \$24 per trip, and of 3 return trips per week
Foot orthotics*	Maximum of \$360 per calendar year
Oxygen therapy* and laboratory tests, pharmacogenetic tests*	Covered
Insulin pump* <ul style="list-style-type: none"> Device* Accessories (tubes, catheters)* 	Maximum reimbursement of \$6,000 per period of 5 consecutive years IMPROVED Maximum reimbursement of \$3,200 per calendar year IMPROVED
Hearing aid*	Maximum reimbursement of \$1,000 per period of 2 consecutive years
Capillary prosthesis (wig) following chemotherapy*	Maximum of \$320 per calendar year
External breast prosthesis following a mastectomy*	Maximum of \$1,000 per period of 2 consecutive years IMPROVED
X-rays, mammography and ultrasound examinations (other than fetal), and nuclear medicine imaging performed outside a hospital	Maximum of \$400 per calendar year
Magnetic resonance imaging	Maximum of \$750 per calendar year
Serums and fluids injected for curative purposes*	Maximum of \$80 per day
Curative and preventive vaccinations	Covered

Health insurance (cont.)

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 the Insurer. One visit, treatment or consultation per day, per insured.

Acupuncturist, chiropractor and chiropractor X-rays, dietitian, kinesiologist, massage therapist, nutritionist, orthoptist, osteopath, physiotherapist, physical rehabilitation therapist and podiatrist

\$50 per treatment, consultation or X-ray, 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

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 for all of these professionals

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.

A few details...

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 devices

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

Premium rates

Health insurance – Québec residents²

Monthly premium rates **in force from June 1, 2023 to December 31, 2024** including a premium holiday

	60-Day Option	182-day option
Individual coverage	\$35.08	\$45.33
Family coverage	\$70.16	\$90.65

Life Insurance

Monthly premium rates **in force from January 1, 2024 to December 31, 2024**

Participant's Basic Life Insurance (rate per \$1,000 of coverage)	
Participant under age 65	\$0.7928
Participant age 65 or over	\$1.7167

Dependents' Basic Life Insurance (fixed rate)	
Participant under age 65	\$2.40
Participant age 65 or over	\$12.76

Participant's and spouse's optional life insurance (rate per \$1,000 of insurance coverage)		
Age	Female	Male
Age 49 or less	\$0.097	\$0.147
50 – 54	\$0.138	\$0.219
55 – 59	\$0.210	\$0.346
60 – 64	\$0.320	\$0.531
65 – 69	\$0.521	\$0.861
70 – 74	\$0.883	\$1.433
75 – 79	\$1.553	\$2.350
80 – 84	\$2.586	\$3.836
85 – 89	\$4.447	\$6.247
90 – 94	\$7.618	\$10.120
95 – 99	\$11.953	\$14.676
Age 100 and over	\$15.834	\$18.567

9% sales tax must be added to these premium rates.

Claims

Prescription Drugs – Direct Automated Payment service

When making eligible prescription drug purchases,³ simply present your service card to the pharmacist. Beneva will automatically issue payment for the insured portion of prescription drug expenses.

Healthcare Claims

You can submit your health insurance claims directly from the Beneva 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.⁴

- **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.

For questions about your plan or to follow up on your claims

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. Sign up at beneva.ca
2. Click on Log in and follow instructions.

Beneva Customer Service

For business hours, go to beneva.ca

1 888 235-0606

625 rue Jacques-Parizeau, PO Box 1500, Québec
Québec G1K 8X9

beneva.ca

2. Residents outside Quebec: Separate fees including medication coverage equivalent to the Public Prescription Drug Insurance Plan offered in the province of Quebec is available.

3. Prescription drugs on the RAMQ list are not eligible.

4. This delay may vary according to your financial institution.