



Enrollment guide



Ministère de la Famille group insurance plan

Contract No. N001



For: Centres de la petite enfance et des garderies subventionnées du Québec group insurance plan members.

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This document is for information purposes. This information is not exhaustive and may not apply to all cases. Only the group insurance contract may be used to resolve issues and settle legal matters.

INTRODUCTION

As your insurer, Desjardins Insurance is pleased to provide all the necessary information concerning the terms and conditions related to the group insurance plan that you are required to enroll in.

Please read this document carefully, since it addresses some common questions and contains information about:

- The group insurance plan you're required to enroll in
- Choices you have to make
- Enrollment rules
- How to choose your coverage

WHAT ARE MY CHOICES?

The group insurance plan you are required to enroll in includes health and dental care, life insurance, and short- and long-term disability insurance. Please consult the *Votre régime en bref* document to learn more about these benefits.

Health and dental module options (mandatory)

The health and dental care benefits are mandatory, but you can be exempted if you're already enrolled in a group insurance plan with similar coverage (for example, your spouse's plan). The health and dental care benefit has four coverage options: Module 1, Module 2, Module 3 and Module 4. Page 2 of 8

Choose the coverage that best suits your medical and dental care needs. However, you have to choose the same module (1, 2, 3 or 4) for both your medical and dental benefits.

No matter which of the four medical insurance modules you choose, you'll receive a direct payment card. Just present this card to your pharmacist or any participating healthcare professional and you won't have to submit a claim to Desjardins Insurance to get reimbursed for the eligible expenses you incur. The healthcare professional will be able to tell you right away if you have an amount to pay, as well as the amount covered by Desjardins Insurance, if applicable.

Coverage options

You can choose the health and dental coverage that meets your personal situation. The coverage options are:

- Individual
- Single parent
- Family
- Exempt

You can choose different coverage options for both benefits. For example, you can choose family coverage for medical care and individual coverage for dental care. However, if you choose to cover your dependents for one benefit, but not for the other, you will have to make sure they're covered for the other benefit under another plan. For example, if you cover your dependents for medical care but not for dental, you'll have to make sure they're covered for dental under another plan, and vice versa.

Possible exemption

If you're already covered by another plan (such as your spouse's plan), you can choose to opt out of medical and/or dental coverage as long as you submit proof that you're covered under the other plan.

- When you first enroll, log in to your secure site, go to the enrollment tool, select the module you would have chosen if you were not asking to be exempt, and then select the option to exempt yourself. Choose this module carefully, because it is the module that will apply if you ever lose the coverage you have through the other plan.

Additional life and accidental dismemberment insurance (optional)

You can choose to enroll in additional life insurance and/or additional accidental dismemberment insurance for you, your spouse and/or your dependents. This option requires additional evidence of insurability.

Critical illness insurance (optional)

You have access to critical illness insurance for you, your spouse and/or your dependents. It gives you a lump sum if you are diagnosed with an eligible critical illness or require an eligible surgical procedure. Proof is required.

Long-term disability insurance (mandatory)

You have to choose long-term disability coverage – either with or without a cost of living adjustment. You do not need to provide evidence of insurability if you are enrolling or re-enrolling. However, if you decide to change from 'without cost of living adjustment' to 'with cost of living adjustment' between re-enrollments, you will have to provide evidence of insurability.



Default choice

If you do not enroll (either through the online enrollment tool or through your employer) within 31 days of becoming eligible, you will be given the default choices, which you must maintain for the minimum periods specified in the contract. The default choices are:

- Module 2 in healthcare insurance
 - Dental care coverage is not available in Module 2
- Short-Term Disability, Basic Life and Basic Accidental Dismemberment, Employee Assistance Program
 - All these benefits are mandatory, with no choice to be made when you enroll
- Long-term disability insurance, without indexation

WHEN CAN I CHANGE MY CHOICES?

Two-year period

Please note: No matter which module you choose, you have to keep it for at least two consecutive years before you can make any changes (unless an eligible life event occurs).

You also have to keep your choice of long-term disability insurance (with or without indexation) for two consecutive years before you can make any changes (unless an eligible life event occurs).

Once the two-year deadline has passed, if you want to change your module, you can only move up or down one tier at a time. That means you can switch from Module 1 to Module 2, from Module 2 to Module 3 or from Module 3 to Module 4. The same is true in the other direction; you can switch from Module 2 to Module 1, from Module 3 to Module 2 or from Module 4 to Module 3.

For long-term disability insurance, you will have to submit an evidence of insurability form.

Change in personal situation (eligible life event)

As long as you're covered by the plan, you can change your type of coverage and the module you've chosen (up or down one tier at a time) within 31 days of one of the following life events:

- Marriage, civil union, newly eligible common-law partner
- Birth of your first child (or new adoption or legal guardianship)
- Arrival of a dependent in Canada
- Separation, divorce, dissolution of civil union
- Last dependent child is no longer eligible
- A dependent child returns to school
- Death of spouse or dependent child
- New access or loss of access to spouse's group insurance plan for a reason other than personal choice
- Position is made permanent

In this case, the new coverage type will be effective as of the date of the event. The new module will be effective as of the first day of the month following the date Desjardins Insurance receives the request—as long as the request is made within 31 days after the event.

WHAT ARE THE COSTS?

There is a rate sheet and a cost simulation calculator on your secure site. You can use these tools to run a cost simulation for your group insurance plan.

HOW DO I ENROLL?

For a new enrollment

You'll need to contact your employer to enroll. They'll ask you for some information and then they'll submit your enrollment request to Desjardins Insurance. Once your employer receives your identification number, they'll send it to you and you'll be able to sign up using the online enrollment tool on your secure site. Make sure you provide all of the information requested, and then click the **SUBMIT** button.

You'll have access to a number of online tools that will tell you all about the modules available, costs, etc. For example, you can use the cost simulation tool to calculate and compare the salary deductions and taxable benefits that will apply depending on the insurance module you choose.

HOW CAN I BE SURE I'M MAKING THE RIGHT CHOICES?

We've prepared a few questions that will help you choose the right module for dental and health benefits and decide whether you should opt for additional life insurance for yourself.

Dental care

To choose the module that best suits your needs, you have to take into account the amount you expect to pay for dental expenses, the cost of the module you're thinking of choosing, the amounts you'll get back from your plan and the amounts you'll be required to pay out of pocket. Review your dental care needs:

- Are your dental expenses minimal, moderate or high? Take a look at how much you've spent at the dentist over the last two years.
- Are you expecting additional expenses over the next two years?
- If you only go to the dentist once a year for a routine check-up, you can choose the module that only covers basic and preventive care. However, you won't be covered for major dental work if you end up needing it.

Healthcare

To choose the module that best suits your needs, you have to take into account the amount you expect to pay for healthcare, the cost of the module you're thinking of choosing, the amount you'll get back from your plan and the amount you'll be required to pay out of pocket. Review your healthcare needs:

- What kinds of expenses have you incurred for you and your dependents over the past few years?
- Are you expecting additional expenses over the next two years?
- Are you willing to pay more for coverage to get higher reimbursements for your eligible fees?
- Is the additional coverage worth the extra cost?

Remember that you have to choose the same module (1, 2, 3 or 4) for health and dental care, but you can choose a different coverage type for each one (individual, single parent, family or exempt).

Double coverage for health and dental care

If you and your family members are eligible for coverage under another health and dental care plan (for example, your spouse's plan) you have a number of options. You can:

- Choose not to enroll in this group plan and ask for an exemption.
- Choose a module that offers reduced coverage—which will cost you less—and coordinate your benefits with your spouse's plan so you'll be covered for up to 100% of your eligible expenses.
- Choose individual insurance coverage and insure your other family members under the other plan, or vice versa, depending on the cost and coverage of each plan.
- Choose the maximum coverage for all plans and pay higher premiums.

Long-term disability insurance

The information below will help you decide whether to select long-term disability insurance with indexation or without indexation, depending on what best suits your needs:

- What is indexation? It's an automatic adjustment to your disability insurance benefits based on a specific economic indicator.
- When you choose the 'with indexation' option:
 - Indexation will go into effect on April 1st following the change of definition period (which is after the first 20 weeks of long-term disability)
 - Based on the previous year's Consumer Price Index (CPI) up to a maximum of 2%.

The maximum annual insurable salary is \$134,260 until further notice.

Additional life insurance

Ask yourself the following questions to figure out how much life insurance you should take out:

- Do you really need additional insurance on top of your basic coverage?
- How much money would your surviving family members need to take care of their financial obligations?
- Do you have any dependent children? Are they very young? If something happened to you, how much money would be needed to cover daycare costs, post-secondary education, etc.?
- What other living expenses would your spouse have to cover? Will they be making mortgage or other debt payments?
- Will your family have special needs such as dependent parents or special care for one or more family members? What other income sources can your family count on?

We hope this guide gives you all the information you need to understand your group insurance plan. If you still have questions about your plan or the enrollment process, please contact your employer.

Critical illness insurance (optional benefit)

The information below will help you decide whether this benefit is right for you:

- This benefit provides a payment while the insured person is alive if they are diagnosed with a covered critical illness and they live through the survival period stipulated in the contract.
- Here are a few examples of eligible illness
 - cancer, paralysis, multiple sclerosis, Alzheimer's disease, etc.

Evidence of insurability is required.

Contract Administration Group and Business Insurance



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