

GROUP
INSURANCE

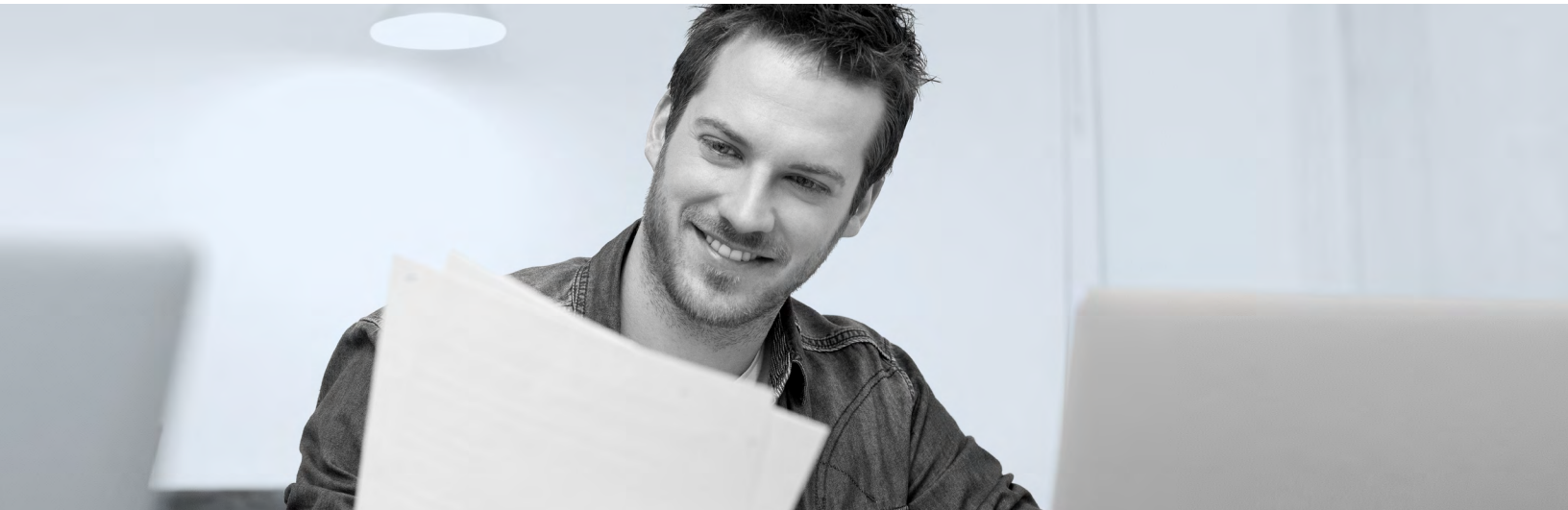


Employees of iA Financial Group

Your Group Insurance Plan

Decision Guide





Overview of Your Group Insurance Plan

The group insurance plan is offered to permanent employees of iA Financial Group after three months of continuous service. The plan is comprised of three pillars to offer you complete coverage. It allows you to choose certain elements that will make up the personal coverage that you and your family need to feel secure and enjoy life. Review your options carefully and use this decision guide to help you build your coverage.

Your group insurance plan is an important part of your overall compensation, providing financial security and helping you maintain a healthy lifestyle. iA Financial Group offers other significant benefits, such as a pension plan, share purchase plan, vacation and redeemable flex day plan and employee assistance plan.

Pillar — 1

HEALTH CARE AND DENTAL CARE

Three modules available for each type of coverage

Pillar — 2

DISABILITY INSURANCE

Short-term disability coverage

Long-term disability coverage

Two income replacement options

Pillar — 3

LIFE INSURANCE AND AD&D INSURANCE

Basic coverage

Basic life insurance
Basic AD&D insurance
Business travel accident insurance

Optional coverage

Optional life insurance
Optional AD&D insurance
Optional dependent life insurance

Pillar — 1

Health care and dental care

In order to adapt to your needs and those of your family, you may choose from various levels of health care and dental care coverage.



Flexible and diversified coverage

You can choose from three health care modules and three dental care modules to design your personalized coverage. You can choose one health care module and a different dental care module, thus giving you the flexibility you need. Review the modules to determine the level of protection that best meets your needs.

Both individual and family coverage are available. You may also waive health care or dental care coverage if you and your dependents have coverage under your spouse's plan. If this is the case, you will still be eligible to receive an allowance in your health spending account (HSA) as well as in your wellness account (WA).

You must choose a health care module and a dental care module.

HEALTH CARE		
MODULE 1	MODULE 2	MODULE 3
Basic coverage (Includes HSA)	Complete coverage (Includes HSA)	Extended coverage (No HSA)

All modules include a wellness account allowance.

DENTAL CARE		
MODULE 1	MODULE 2	MODULE 3
Preventive and basic care (Includes HSA)	Complete coverage (Includes HSA)	Extended coverage (No HSA)

iA Financial Group provides a set amount based on the individual or family coverage you have chosen regardless of which module you choose.

You therefore pay the cost of the coverage selected in excess of the set amount.

Refer to the following pages to learn more about the coverage offered under each module.

HEALTH CARE

	MODULE 1	MODULE 2	MODULE 3
Prescription drugs (pay direct card)	✓	✓	✓
Reimbursement based on the cost of the generic version	63% (RAMQ*)	75%	90%
Hospitalization (100%)			
— Short-term care			
— Semi-private room	✓	✓	✓
— Private room		✓	✓
— Long-term care			
— Semi-private room			✓
— Private room			✓
Private-duty nurse	✓	✓	✓
— Reimbursement	50%	75%	90%
— Maximum per calendar year	\$5,000	\$10,000	\$15,000
— Location of care	Patient's home	Patient's home	Patient's home or hospital
Home care		✓	✓
— Reimbursement		75%	90%
— Maximum period following release from hospital		30 days	40 days
— Daily maximum		\$60	\$80
Convalescent home or rehabilitation institution	✓	✓	✓
— Reimbursement	50%	75%	90%
— Maximum per day (no more than 180 days per calendar year)	\$20	\$40	\$60
Psychologist, social worker and psychotherapist	✓	✓	✓
— Reimbursement	50%	75%	90%
— Maximum per calendar year	\$300	\$1,000	\$1,250
Paramedical care		✓	✓
— Reimbursement		75%	90%
— Maximum per calendar year for massage therapy/orthotherapy, acupuncture, naturopathy and osteopathy		6 visits per specialist (\$45 per visit)	12 visits per specialist (\$50 per visit)
— Combined maximum per calendar year for all paramedical care (Includes: physiotherapy, physical therapy, kinesiology, speech therapy, audiology, chiropractic, podiatry, occupational therapy, nutrition, dietetics, naturopathy, osteopathy, massage therapy/orthotherapy and acupuncture.)		\$750	\$1,000
Preventive vaccines	✓	✓	✓
— Reimbursement	50%	75%	90%
— Maximum per calendar year	\$100	\$150	\$300
Ambulance services	✓	✓	✓
— Transportation costs	50%	75%	90%
— Transportation and cost of one attendant	Not covered	Not covered	90%
Eye exam (100%)	✓	✓	✓
— Maximum amount per calendar year (limit of 1 exam per 24 months / adult and 1 exam per 12 months/child under 18 years of age)	\$75	\$75	\$75
Glasses, contact lenses, laser surgery		✓	✓
— Reimbursement		75%	90%
— Maximum per 24 months		\$100	\$200
Diagnostic services	50%	75%	90%
— Preventive care check-ups	✓	✓	✓
— Maximum per calendar year for preventive care check-ups	\$100	\$200	\$400
— Other diagnostic services		✓	✓

HEALTH CARE (continued)

	MODULE 1	MODULE 2	MODULE 3
Medical appliances and supplies	50%	75%	90%
— Certain durable medical appliances	✓	✓	✓
— Certain medical supplies (e.g., wigs and compression stockings)		✓	✓
— Orthopedic shoes		✓	✓
— Maximum per calendar year (1 pair per adult and 2 pairs per child)		\$200	\$400/adult and \$200/child
— Orthotics		✓	✓
— Maximum per calendar year		\$200	\$400/adult and \$200/child
Hearing aids		✓	✓
— Reimbursement (maximum of \$500 per 24 months)		75%	90%
Trip cancellation insurance (100%)		✓	✓
— Maximum coverage per trip per person (limit: 4 people)		\$5,000	\$5,000
Out-of-province emergency costs (100%)	✓	✓	✓
— Maximum coverage per calendar year	\$1,000,000	\$1,000,000	\$1,000,000
Second medical opinion (no cost)	✓	✓	✓
Health Spending Account (HSA)	✓	✓	
— Amount per calendar year - individual coverage	\$160	\$80	
— Amount per calendar year - family coverage	\$320	\$140	
Wellness Account (WA)	✓	✓	✓
— Amount per calendar year (employee only)	\$100	\$100	\$100

* The Régie de l'assurance maladie du Québec (RAMQ) reviews its reimbursement level each year. Your reimbursement level will be adjusted accordingly.

DENTAL CARE

	MODULE 1	MODULE 2	MODULE 3
Preventive care	✓	✓	✓
— Reimbursement	70%	90%	100%
Basic care	✓	✓	✓
— Reimbursement	50%	75%	90%
Major care		✓	✓
— Reimbursement		50%	60%
Combined maximum per calendar year (preventive, basic and major care)	\$750	\$1,500	\$2,500
Orthodontics			✓
— Reimbursement (child and adult)			50%
— Lifetime maximum per person			\$2,000
Health Spending Account (HSA)	✓	✓	
— Amount per calendar year - individual coverage	\$170	\$40	
— Amount per calendar year - family coverage	\$370	\$110	

Note: There is no deductible for any of the health care and dental care coverage options.



What is a wellness account (WA)?

A WA is used to reimburse expenses for activities that are intended to improve your health. The purpose of the program is to encourage regular and continuous physical activity.

Expenses that are eligible for reimbursement include:

- Fitness membership fees (e.g., YMCA, Curves)
- Sports leagues and facility fees where the main focus is physical activity (e.g., hockey, tennis)
- Registration fees for instructed group exercise classes (e.g., yoga, pilates, martial arts, aerobics)
- Instruction fees for physical activity led by a certified instructor (e.g., personal trainer, and tennis, ski and golf lessons)
- Season passes or annual membership fees for a physical activity (e.g., ski passes, golf club membership)
- Registration fees for participating in a sporting event that requires training (e.g., foot races, ski races)

The WA allowance must be used to reimburse expenses you have personally incurred. You can use WA money between January 1 and December 31. If you do not use all the money within the calendar year, you will lose it.

What is a health spending account (HSA)?

An HSA is very much like a bank account. You can use the money deposited in the HSA to cover health care and dental care expenses that are not reimbursed under your or your spouse's plan, including coinsurance costs, amounts in excess of the maximums provided for under the plan, and your health and dental plan contributions.

The money in your HSA is available as of January 1. You have between January 1 and December 31 in which to spend it. However, HSA money can be carried over. In other words, if you do not use all of the money in your HSA, it will be carried over to the next calendar year. You have two years to spend the money in the HSA. At the end of the second year, if you still have not used the previous year's money, you will lose it.

How can I find out the balance of my HSA or my WA?

Each time you submit a claim under your HSA or your WA, your benefits statement shows the balance remaining. You can also find your balance in My Client Space, the secure member website.

A brochure on the HSA and the WA is available on the **intranet** or from the Human Resources Department. Review it carefully so that you understand how these accounts work and the rules that apply to them.

Telemedicine App



Healthcare professionals at your fingertips!

This innovative and efficient service provides direct access to excellent nurses, doctors, psychiatrists, psychologists and nutritionists* across Canada, seven days a week, **via a mobile app**.



How does it work?

First, you will chat with a nurse and, if required, schedule an appointment with a doctor at a time convenient for you. Your appointment will then take place **via video conference**.

For many health issues, this service eliminates phone calls to schedule appointments, having to go to the doctor, and long waits!



To install the app:

- Go to the **App Store** or **Google Play**, search for "Dialogue Health" and download the app
- When you open the app, click on "I'm new to Dialogue"
- Create your account using your work email address

To learn more about the sign-up procedure, watch the video or consult the three-step procedure in the group insurance section of the intranet.

More than just speaking to a healthcare professional...

Dialogue offers several other services:

- Prescriptions, prescription renewals, referrals to specialists
- Minor emergencies (allergies, urinary tract infections, other infections, etc.)
- Help with stress, insomnia and anxiety
- Prevention (e.g., concerns about a mole)

Got questions?

Please refer to the Q&A on the intranet.

*As part of your treatment plan, it is possible for your family doctor or Dialogue doctor to refer you to certain paramedical services such as a psychologist, psychotherapist, life coach and/or nutritionist. So, you can choose a healthcare professional from your network or opt for a professional available through the platform at your own cost.

Questions...

Factors to consider when making your decision

When deciding which health care and dental care modules are right for you, consider the following:



Who needs coverage?

Will your spouse and children be covered under your iA Financial Group plan? Or will you, your spouse and your children be covered under a plan offered by your spouse's employer?

Remember that you can **opt out of the health care and dental care plan** only if you and your dependents are covered under your spouse's plan. You will have to **provide proof of your other coverage to the Human Resources Department**. If you opt out of the health care or dental care plans, you will still be entitled to the health spending and wellness accounts.

How do you and your family use health and dental insurance? How much do you generally spend on health care and dental care in a year?

Because the modules offer different levels of coverage and flexibility, it is important for you to identify the level of coverage that best suits your needs. To get a better idea of how you typically use health care and dental care benefits, take a look at the expenses you have incurred in recent years. You can access your claims history in My Client Space. Be careful though – the amount you have spent on health care and dental care in the past may differ from the amount you will have to spend in the future.

Are you and your family members in good health?

Do you or any of your family members need medical tests? Do any of you have a chronic illness that requires medical supplies, regular testing or treatment by prescription drugs? Do any of you often use paramedical services? Do any of you have access to services that are not covered under the plan but that might be eligible for reimbursement under the HSA?

What if my situation changes?

You do not have to wait until the next enrolment period to update your coverage based on your new needs. You will be able to modify your selections.

A change in your situation **could include the following life events:**

- Marriage or any form of union
- Birth or adoption of a child
- Divorce or legal separation
- Loss of a spouse's insurance coverage
- Death of a dependent
- Loss of child coverage based on the plan definition of "child"

Pillar — 2

Disability insurance

Disability insurance covers lost income in the event you are unable to work. You will be able to meet your financial obligations, cover additional expenses related to your state of health and maintain your standard of living.



Consider your disability coverage needs

In order to determine the most appropriate long-term disability (LTD) insurance option, you must consider the level of income replacement required to meet your and your family's needs in the event your disability extends beyond 26 weeks.

Because you pay all LTD insurance premiums, the disability benefits you will receive are not taxable.

Note that under no circumstances will you be able to modify your option selection prior to the next enrolment period (January 1, 2021).

Moreover, if you chose option 1 during the last enrolment period, you are not eligible for option 2 if you have received LTD benefits within the last 24 months or if you are currently receiving STD benefits.

SHORT-TERM DISABILITY (STD) COVERAGE

STD coverage guarantees you weekly salary replacement in the event of disability.

The waiting period is five days and, for the 25 weeks that follow, you will receive 80% of your weekly insurable income.

iA Financial Group pays 100% of STD coverage costs.

Note: Your STD coverage terminates on your 70th birthday.

LONG-TERM DISABILITY (LTD) COVERAGE

LTD coverage guarantees you monthly salary replacement if you are still disabled after 26 weeks.

You may choose from two options:

Option 1 70% of the first \$1,500 of your monthly insurable income
 + 50% of the next \$3,000
 + 45% of the remainder
Maximum of \$10,000 per month

Option 2 70% of the first \$2,500 of your monthly insurable income
 + 56% of the next \$4,000
 + 47% of the remainder
Maximum of \$15,000 per month
Evidence of insurability required over \$10,000 per month

You pay 100% of LTD coverage costs.

Note: Your LTD coverage terminates on your 65th birthday.

Pillar — 3

Life insurance and accidental death and dismemberment (AD&D) insurance

Life insurance provides a lump-sum payment in case of death. AD&D insurance provides a lump-sum payment in case of accidental death or dismemberment.

You have the option of increasing your coverage with optional insurance.



Think about your insurance needs!

When deciding how much optional insurance coverage you need, don't forget to consider any individual insurance coverage you or your spouse may already have. For example, did you take out individual life insurance when you made an important purchase such as your home or your vehicle?

Remember: the life insurance and AD&D insurance you obtain through the group insurance plan offered by iA Financial Group is term coverage. It remains in force as long as you are employed at iA Financial Group and cannot be converted when you retire.

BASIC INSURANCE

Basic life insurance	2x your annual insurable income
Basic AD&D insurance	2x your annual insurable income
Basic business travel insurance	\$100,000

iA Financial Group pays 100% of the basic insurance costs.

Note: The basic life insurance and basic AD&D insurance benefits are automatically reduced by 50% on your 65th birthday.

On your 70th birthday, the basic life and basic AD&D insurance ends and your basic life insurance is reduced to the retiree life insurance amount.

OPTIONAL INSURANCE

Optional life insurance	1x your annual insurable income
Optional AD&D insurance	1x your annual insurable income
Dependent life insurance	Spouse: \$25,000 Each child: \$10,000

You pay 100% of the optional insurance costs.

Note: The optional life and AD&D insurance end on your 70th birthday.

Basic and optional life insurance have a combined maximum amount of \$1,000,000. Similarly, basic and optional AD&D insurance have a combined maximum amount of \$1,000,000.

Plan rules

For the enrolment period

Your module selections are valid until December 31, 2020.

If you do not make a selection during the enrolment period, you will automatically retain your current modules for your health care, dental care and long-term disability coverage.

About health care and dental care

You can choose different modules for health care and dental care, but you must select the same coverage (individual or family) for both components. You are allowed to move up or down only one module at a time.

You cannot make any changes before December 31, 2020, unless you have a life event.

About long-term disability (LTD)

If you chose option 1 for LTD insurance in the previous enrolment period, you are not eligible for Option 2 if you have received LTD benefits in the last 24 months or if you are currently receiving STD benefits.

Once you have selected an LTD coverage option, you will not be able to change your selection until January 1, 2021, even if you have a life event.

In general

You can opt out of health care or dental care only if you and your dependents are covered under your spouse's plan. You will have to provide proof of that coverage to the Human Resources Department.

If you live in Quebec and your spouse and dependents do not have access to another private insurance plan, you must include them under the group insurance plan offered by iA Financial Group.

Determine your costs

It is important for you to take the time to determine the costs associated with each option.

Use the calculation sheet on the iA Financial Group [intranet](#) or contact the Human Resources Department for a copy. If you live in Quebec, remember that when choosing options, contributions made by iA Financial Group to your plan and any amounts withdrawn from your HSA and from your wellness account are considered taxable benefits. In the rest of Canada, only the amounts withdrawn from your WA are taxable benefits.

Do you still have questions about your group insurance plan?

Review all information available on the intranet or from your Human Resources Department, which includes the following:

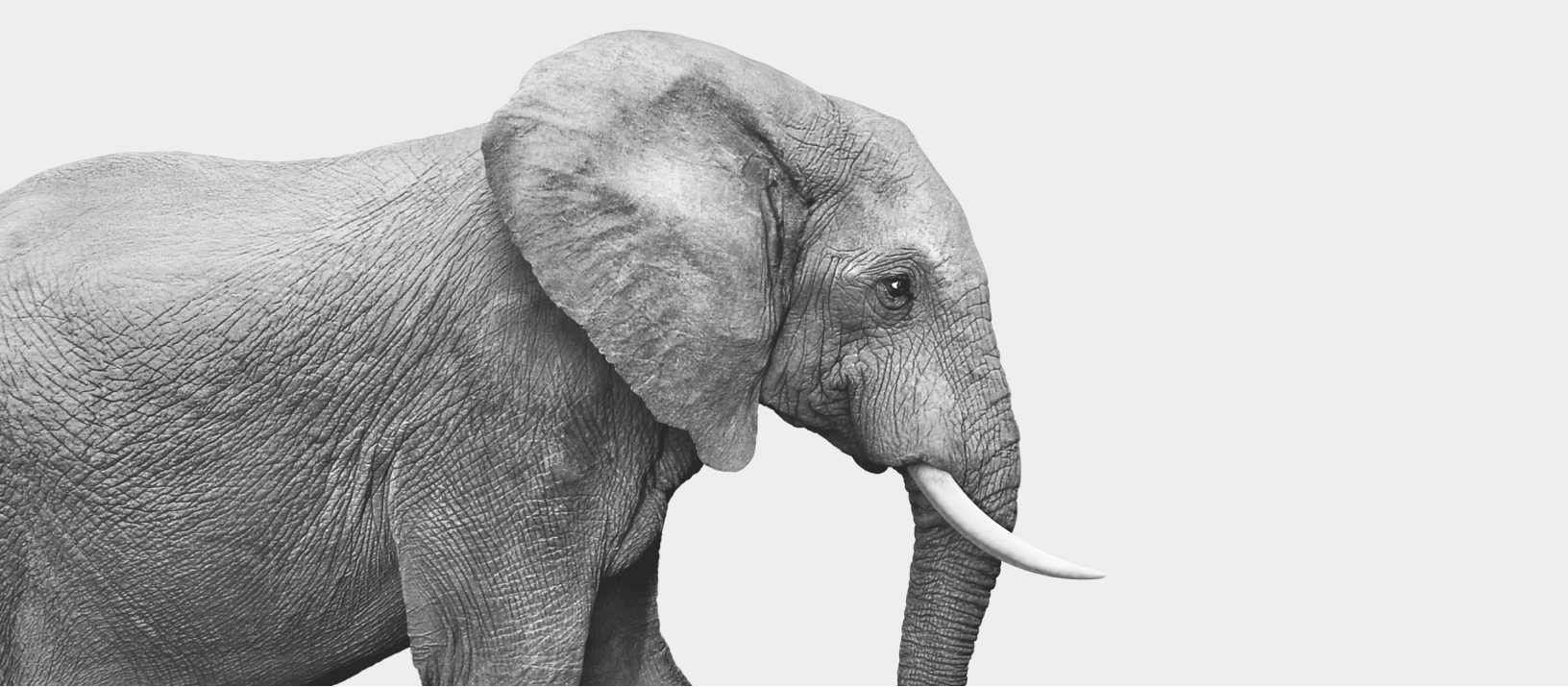
- A calculation sheet showing your portion of the cost of each option
- Frequently Asked Questions
- Claim forms
- A brochure indicating the expenses for which you can use the money in your HSA
- Wellness account brochure
- Premiums table

Contact us

Contact the Group Insurance Department, indicating you are a member of group 1000, at:

groupinsurance@ia.ca

514-499-3800 1-877-422-6487



iA Financial Group reserves the right to amend or terminate the plan at any time. This guide is intended as an overview of the group insurance plan offered by iA Financial Group. In the event of a discrepancy between this guide and official plan documents, the latter shall take precedence.

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