

# Communities make us



# **Your Plan**

At a glance



### GROUP INSURANCE PLAN FOR THE MANAGEMENT PERSONNEL OF THE QUEBEC PUBLIC AND PARAPUBLIC SECTORS

This pamphlet lists only the most often consulted elements of your Group Insurance Plan, but in no way affects the terms and conditions of your insurance contract, which includes certain limitations and exclusions. For a complete description, please refer to your booklet available via the **Customer Centre** at <u>customer-centre.ssq.ca</u>.

### COMPULSORY BASIC ACCIDENT AND HEALTH INSURANCE PLAN

SSQ Insurance recommends that all group insurance participants comply with the Government of Canada's travel advisories. For more information, please consult the FAQ at ssq.ca/en/coronavirus/travel.

Customary and reasonable expenses: to be eligible, expenses incurred for services or supplies must meet the reasonable standards of the common practice of the health

| professionals involved.  |   | ,                        |
|--|---|--------------------------|
| Benefit  | Reimbursement limitations   | Percentage<br>reimbursed |
| Travel Insurance and Assistance  | Maximum reimbursement of \$5,000,000 / trip / insured With prior approval If a trip is scheduled to last more than 180 days, you must contact SSQ in advance for information about applicable conditions.   |                          |
| Trip Cancellation Insurance  | Maximum reimbursement of \$5,000 / trip / insured With evidence deemed satisfactory by SSQ  | 100%                     |
| Hospital expenses in Quebec  | Semi-private room, no limit on days   | -                        |
| Medical expenses outside Quebec **   | 3 times the amount paid by the RAMQ   | 1                        |
| Hospital expenses outside Quebec **  | 1 time the amount paid by the RAMQ  | 1                        |
| Transportation and accommodation fees outside Quebec **  | Maximum reimbursement of \$5,000 / calendar year / insured  | 1                        |
| Prescription drugs and eligible pharmaceutical services *  | Available by prescription only - Mandatory generic substitution   |                          |
| Home care *: - Nursing care - Transportation expenses - Convalescent home - Home assistance services - Childcare expenses        | Within 30 days of hospitalization Eligible expenses of \$60 / day / insured Eligible expenses of \$30 / trip, maximum of 3 trips / week Eligible expenses of \$125 / day / insured Eligible expenses of \$60 / day / insured Eligible excess expenses of \$25 / day / insured |                          |
| Wheelchair - hospital bed *  | Temporary use only  |                          |
| Artificial limbs and external prostheses *   | Customary and reasonable expenses   |                          |
| Wig (following chemotherapy) *   | Maximum reimbursement of 1 wig and of \$500 / 48 months / insured   |                          |
| Intraocular lenses *   | Customary and reasonable expenses   |                          |
| Breast prostheses (following a mastectomy) *   | Customary and reasonable expenses   |                          |
| Surgical brassieres (following a mastectomy or breast reduction) *   | Customary and reasonable expenses   |                          |
| Trusses, corsets, crutches, splints, casts, foot orthoses (specialized laboratory) and other orthoses $\ensuremath{^{^{\circ}}}$ | Customary and reasonable expenses   |                          |
| Blood glucose monitor *  | Eligible expenses of \$300 / 36 months / insured  |                          |
| Therapeutic devices *  | Customary and reasonable expenses   |                          |
| Insulin pump *   | Purchase and maintenance of the pump: Maximum reimbursement of \$7,500 / 60 months / insured Items needed to operate the pump: Maximum reimbursement of \$4,000 / calendar year / insured   |                          |
| Percutaneous or transcutaneous electrical nerve stimulator (PENS/<br>TENS) *   | Eligible expenses of \$1,000 / 60 months / insured  |                          |
| Orthopaedic shoes (specialized laboratory) *   | Customary and reasonable expenses   | 1                        |
| Electrocardiograms, X-rays (including scanner), magnetic resonance, ultrasounds and laboratory analyses *                        | Customary and reasonable expenses   |                          |
| Respirators and oxygen *   | Customary and reasonable expenses   | 1                        |
| Hearing aids   | Eligible expenses of \$1,000 / 48 months / insured  | 1                        |
| Nurse *  | Customary and reasonable expenses   | 1                        |
| Cosmetic surgery *   | Following an accident   | 1                        |
| Support stockings *  | 21 mm Hg or more, 3 pairs / calendar year / insured   | 75% of the first \$3,000 |
| Sclerosing injections  | Substance: eligible expenses of \$20 / treatment / day / insured Professional fees: eligible expenses of \$25 / treatment / day / insured   | 100% thereafter          |
| Dental surgery following an accident   | Treatment received during the 12 months following the accident  | 1                        |
| Ambulance  | Customary and reasonable expenses   | 1                        |
| Vaccines   | Eligible expenses of \$200 / calendar year / insured  | 1                        |
| Transportation and accommodation in Quebec *   | Maximum reimbursement of \$1,000 / calendar year / insured  | 1                        |
| Detoxification treatment *   | In a recognized establishment Eligible expenses of \$50 / day, maximum of 30 days / calendar year / insured   | -                        |
| Optometrist or ophtalmologist  | Maximum reimbursement of \$50 / 24 months / insured   | 1                        |
| Dietitian  | Eligible expenses of \$30 / treatment  Maximum reimbursement of \$500 / calendar year / insured   |                          |
| Naturopath, Homeopath, Phytotherapist  | Eligible expenses of \$30 / treatment Combined maximum reimbursement of \$600 / calendar year / insured   | -                        |
| Acupuncturist, Osteopath, Kinesitherapist, Orthotherapist, Massage therapist   | Eligible expenses of \$30 / treatment Combined maximum reimbursement of \$600 / calendar year / insured   | -                        |
| Chiropractor   | Eligible expenses of \$30 / treatment Maximum reimbursement of \$500 / calendar year / insured, including \$50 / year for X-rays  |                          |
| Physiotherapist, Physical rehabilitation therapist, Certified athletic therapist   | Eligible expenses of \$40 / treatment   |                          |
| Audiologist, Hearing aid specialist  | Eligible expenses of \$60 / audiologist treatment Eligible expenses of \$40 / hearing aid specialist treatment Combined maximum reimbursement of \$500 / calendar year / insured  |                          |
| Occupational therapist   | Eligible expenses of \$40 / treatment Maximum reimbursement of \$500 / calendar year / insured  |                          |
| Speech language therapist  | Eligible expenses of \$60 / treatment  Maximum reimbursement of \$600 / calendar year / insured   |                          |
| Podiatrist   | Eligible expenses of \$40 / treatment  Maximum reimbursement of \$500 / calendar year / insured   |                          |
| Psychiatrist, Psychoanalyst, Psychologist, Psychotherapist, Social worker, Marital and family therapist, Career counsellor       | Customary and reasonable expenses / treatment<br>Combined maximum reimbursement of \$1,000 / calendar year / insured  |                          |
| * Medical prescription required ** Prior authorization by the RAMO required  |   |                          |

| * Medical prescription required | $\ensuremath{^{\circ\circ}}$ Prior authorization by the RAMQ required |
|---------------------------------|---|
| Bi-weekly rates from Jan        | uary 1 to December 31, 2021 (1)                                       |

| Bi-weekly rates from January 1 to December 31, 2021 (1) |          |          |                                   |          |          |          |                                   |              |          |          |                                   |          |
|---|----------|----------|-----------------------------------|----------|----------|----------|-----------------------------------|--------------|----------|----------|-----------------------------------|----------|
|   |          | Indiv    | ridual                            |          |          | Single-  | parent                            | arent Family |          |          |                                   |          |
| Plan  | Employer | Employee | Premium<br>holiday <sup>(2)</sup> | Total    | Employer | Employee | Premium<br>holiday <sup>(2)</sup> | Total        | Employer | Employee | Premium<br>holiday <sup>(2)</sup> | Total    |
| Under age 65  | \$27.90  | \$47.21  | \$2.48                            | \$77.59  | \$29.42  | \$49.77  | \$2.62                            | \$81.81      | \$56.39  | \$95.41  | \$5.02                            | \$156.82 |
| Age 65 or over  | \$27.90  | \$25.48  | \$1.34                            | \$54.72  | \$29.42  | \$28.04  | \$1.48                            | \$58.94      | \$56.39  | \$51.96  | \$2.74                            | \$111.09 |
| Additional premium - age 65                             | \$ -     | \$106.61 | \$ -                              | \$106.61 | \$ -     | \$123.10 | \$ -                              | \$123.10     | \$ -     | \$229.34 | \$ -                              | \$229.34 |

Premiums do not include the 9% provincial sales tax.

<sup>11</sup> All premium rate changes applicable subsequent to an age change are effective as of the first day of the pay period coinciding with or following the age change.

Please note that a premium holiday of 5% is granted to the employee for the mandatory Accident and Health Insurance.
 Additional premiums paid by participants age 65 or over, starting as of the first day of the pay period coinciding with or following their 65th birthday, if opting for prescription drug coverage under the group insurance plan rather than under the RAMQ plan.

| COMPULSORY BASIC LIFE INSURANCE PLAN                           |   |          |   |                 |         |  |  |
|--|---|----------|---|-----------------|---------|--|--|
| Plans - Coverage   |   |          | Bi-weekly rates from<br>January 1 to December 31, 2021 (as % of salary) |                 |         |  |  |
|  |   | Employer | Employee  | Premium holiday | Total   |  |  |
| Participant's Basic Life Insurance                             | 50% of annual earnings                  | -%       | 0.066%  | 0.000%          | 0.066%  |  |  |
| Spouse's Life Insurance<br>Dependent Children's Life Insurance | \$17,200<br>\$5,000 / child             | -%       | 0.018%  | 0.000%          | 0.018.% |  |  |
| Participant's, Spouse's and Dependent Childre                  | en's Accidental Dismemberment Insurance | -%       | 0.006%  | 0.000%          | 0.006%  |  |  |
| Total  |   | -%       | 0.090%  | 0.000%          | 0.090%  |  |  |
| Premiums do not include the 9% provincial sales tax.           |   |          |   |                 |         |  |  |

| COMPULSORY BASIC LONG TERM DISABILITY INSURANCE PLAN  |          |  |                 |        |  |  |  |
|---|----------|--|-----------------|--------|--|--|--|
| Plans - Coverage  |          | Bi-weekly rates from<br>January 1 to December 1, 2021 (as % of salary) |                 |        |  |  |  |
|   | Employer | Employee   | Premium holiday | Total  |  |  |  |
| Compulsory Basic Long Term Disability Insurance Plan 65% of the gross monthly earnings as of the 105th week of total disability                                     | 0.686%   | -%   | -%              | 0.686% |  |  |  |
| Compulsory Additional Long Term Disability Insurance Plan (CAP) Supplementary income that complements, in part, the income received from rehabilitation employment. | 0.015%   | -%   | -%              | 0.015% |  |  |  |
| Premiums do not include the 9% provincial sales tax.  |          |  |                 |        |  |  |  |

#### PARTICIPANT'S AND SPOUSE'S OPTIONAL LIFE INSURANCE PLAN Plans - Coverage **Evidence of insurability** • Participants aged less than 40: required for any request exceeding 3 times the annual earnings when submitted within 60 days of Participant's Optional Life Insurance • Participants aged between 40 and 49: required for any request exceeding \$167,800 when submitted within 60 days of eligibility 1, 2, 3, 4 or 5 times annual • Participants aged 50 or over: required for any request exceeding \$69,900 when submitted within 60 days of eligibility earnings • Required at all times if the request for adding or increasing Optional Life coverage is submitted more than 60 days after the eligibility date Spouse's Optional Life Insurance Required at all times In increments of \$10,000, maximum \$100.000

| Bi-weekly rates from January 1 to December 31, 2021 |                              |                          |                              |                         |  |  |
|---|------------------------------|--------------------------|------------------------------|-------------------------|--|--|
|   | Rate per \$1,000 of coverage | Rate as % of salary (1)  | Rate per \$1,000 of coverage | Rate as % of salary (1) |  |  |
|   | Male / Sm                    | noker <sup>(2) (3)</sup> | Male / Non-smoker (2) (3)    |                         |  |  |
| Age 34 and under                                    | \$0.019                      | 0.050%                   | \$0.010                      | 0.026%                  |  |  |
| Age 35 to 39  | \$0.031                      | 0.081%                   | \$0.013                      | 0.034%                  |  |  |
| Age 40 to 44  | \$0.046                      | 0.120%                   | \$0.022                      | 0.057%                  |  |  |
| Age 45 to 49  | \$0.076                      | 0.198%                   | \$0.039                      | 0.102%                  |  |  |
| Age 50 to 54  | \$0.127                      | 0.331%                   | \$0.074                      | 0.193%                  |  |  |
| Age 55 or over                                      | \$0.199                      | 0.519%                   | \$0.135                      | 0.352%                  |  |  |
|   | Female / S                   | moker (2)(3)             | Female / Non-smoker (2) (3)  |                         |  |  |
| Age 34 and under                                    | \$0.013                      | 0.034%                   | \$0.003                      | 0.008%                  |  |  |
| Age 35 to 39  | \$0.022                      | 0.057%                   | \$0.012                      | 0.031%                  |  |  |
| Age 40 to 44  | \$0.040                      | 0.104%                   | \$0.019                      | 0.050%                  |  |  |
| Age 45 to 49  | \$0.059                      | 0.154%                   | \$0.031                      | 0.081%                  |  |  |
| Age 50 to 54  | \$0.096                      | 0.250%                   | \$0.053                      | 0.138%                  |  |  |
| Age 55 or over                                      | \$0.137                      | 0.357%                   | \$0.097                      | 0.253%                  |  |  |

Premiums do not include the 9% provincial sales tax.

 $^{(1)}$  The rates as percentage of the salary apply only to the Participant's Optional Life Insurance.

(2) Rates for Spouse's Optional Life Insurance are determined based on the spouse's gender and smoking habits (smoker or non-smoker) but on the participant's age.

(3) All premium rate changes applicable subsequent to an age change are effective as of January 1 coinciding with or following the age change.

## **Customer Centre**

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#### **Head Office**

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