



myBenefits

THE POWER TO CHOOSE



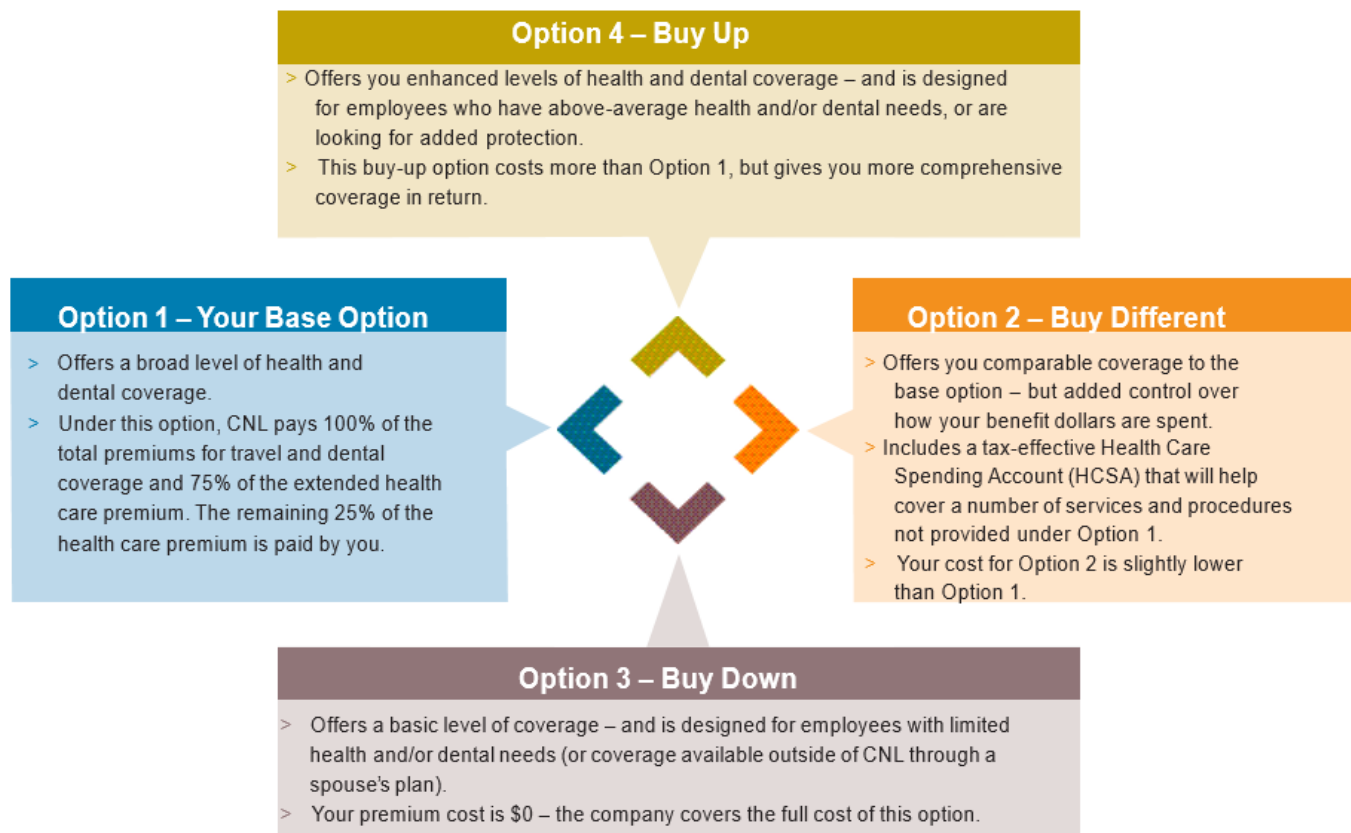
Benefits At-a-Glance for all Full Time and Regular Part Time myBenefits Employee Groups

The myBenefits program gives you the power to choose the benefits that serve your specific needs and preferences. Just as important, it gives you the flexibility to update your benefit selections every two years – so that the program continues to meet your changing needs and circumstances.

Bottom line: your myBenefits program is all about your power to choose. In addition to a range of company-paid core benefits and optional coverages, myBenefits gives you an opportunity to select your preferred health and dental coverage from a range of benefit options. As illustrated below, you can:

- > choose a competitive base option that provides a wide range of health and dental coverage, or
- > choose to “Buy Up”, “Buy Different,” or “Buy Down” depending on your personal needs.

The choice is yours!



Important

This document is a summary only and does not include all details, provisions, exclusions and limitations. In the event of a discrepancy between this summary and the Group Contracts, the terms of the Group Contracts (which are retained in Human Resources) will apply. For further details, refer to the specific section outlined in the myBenefits booklet. Queries regarding your health and dental coverage should be directed to **Sun Life at 1-800-361-6212**. For information regarding other benefit coverage, contact HR Service Delivery at ext. 20000 option #3.

myBenefits Prescription Drugs and Extended Health Options				
Coverage	1. Base Option	2. Buy Different	3. Buy Down	4. Buy Up
Extended Health Care (EHC)				
Prescription drugs	100% of eligible prescription drugs	90% of eligible prescription drugs	80% of eligible prescription drugs	100% of eligible prescription drugs
Over-the-counter prescription drugs for all employee groups except : CRPEG; USW 1568; SPEA-SPEA TT and WPEG	Excluded, except for life sustaining drugs	Excluded, except for life sustaining drugs	Excluded	Excluded, except for life sustaining drugs
Over the counter prescription drugs for CRPEG; USW 1568; SPEA-SPEA TT and WPEG	Included	Included	Excluded, except for life-sustaining	Included
Out-of- pocket maximum	Not applicable	\$1,500 per person	\$3,000 per person	Not applicable
Annual deductible	\$25 per person \$50 per family	None	None	None
Dispensing fee cap	No cap	\$8.00 per prescription	\$8.00 per prescription	No cap
Paramedical services for all employee groups except CRPEG; USW 1568; SPEA-SPEA TT and WPEG Limits are based on reasonable and customary per visit charges for each specified service listed Maximums are based on a per person, Policy year (April 1- March 31)	<ul style="list-style-type: none"> > Physiotherapy/Athletic therapy: \$1,000 > Massage therapist: \$400 > Chiropractic: \$400 > Psychologist \$1,000 > Speech therapy: \$500 > Osteopath or Chiropodist: \$100 plus \$25 for related x-rays > Podiatrist: \$100 plus \$25 for related x-rays > Naturopath \$200 > Homeopath: \$200 	Up to a combined annual per person max of \$1,000 for the same specified services list as Option 1, plus additional services of: <ul style="list-style-type: none"> > Nutritionist/Dietitian > Acupuncturist 	Annual \$200 per person max for each of the same specified services list as Option 1	Up to a combined annual max. of \$1,500 per person for the same specified services list as Option 1, plus additional services of: <ul style="list-style-type: none"> > Nutritionist/Dietitian > Acupuncturist



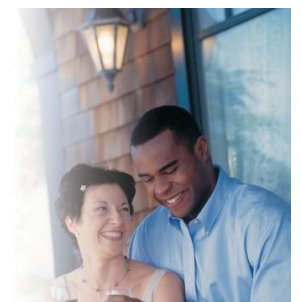
<p>Paramedical services for CRPEG; USW 1568; SPEA-SPEA TT and WPEG</p> <p>Limits are based on reasonable and customary per visit charges for each specified service listed</p> <p>Maximums are based on a per person, Policy year (April 1- March 31)</p>	<ul style="list-style-type: none"> > Physiotherapy/Athletic therapy: \$1,000 > Massage therapist: \$400 > Chiropractic: \$400 > Psychologist \$1,000 > Speech therapy: \$500 > Osteopath or Chiropracist: \$100 plus \$25 for related x-rays > Podiatrist: \$100 plus \$25 for related x-rays > Naturopath \$200 	<p>Up to a combined annual per person max of \$1,000 for the same specified services list as Option 1, plus additional services of:</p> <ul style="list-style-type: none"> > Nutritionist/Dietitian > Acupuncturist 	<p>Annual \$200 per person max for each of the same specified services list as Option 1</p>	<p>Up to a combined annual max. of \$1,500 per person for the same specified services list as Option 1, plus additional services of:</p> <ul style="list-style-type: none"> > Nutritionist/Dietitian > Acupuncturist
<p>Vision care</p>	<p>\$500 per person over 24 months</p>	<p>\$400 per person over 24 months</p>	<p>\$250 per person over 24 months</p>	<p>\$500 per person over 24 months</p>
<p>Laser Eye Surgery for all employee groups except CRPEG; USW 1568; SPEA-SPEA TT and WPEG</p>	<p>\$2500 per person Lifetime maximum</p>	<p>\$2500 per person Lifetime maximum</p>	<p>Excluded</p>	<p>\$2500 per person Lifetime maximum</p>
<p>Laser Eye Surgery for CRPEG; USW 1568; SPEA-SPEA TT and WPEG</p>	<p>Excluded</p>	<p>Excluded</p>	<p>Excluded</p>	<p>Excluded</p>
<p>Hospital</p>	<p>Semi-private</p>	<p>Semi-private</p>	<p>Ward</p>	<p>Semi-private</p>
<p>Private-duty nursing for all employee groups except: CRPEG; SPEA USW 1568; SPEA TT and WPEG</p>	<p>Annual per person max of \$50,000</p>	<p>Up to \$10,000 per person, per year</p>	<p>Not covered</p>	<p>Annual per person max of \$50,000</p>
<p>Private-duty nursing for CRPEG; USW 1568; SPEA, SPEA TT and WPEG</p>	<p>Unlimited</p>	<p>Up to \$10,000 per person, per year</p>	<p>Not Covered</p>	<p>Unlimited</p>
<p>Premium sharing</p>	<ul style="list-style-type: none"> > CNL pays 75% > You pay 25% 	<ul style="list-style-type: none"> > CNL pays 75% > You pay 25% 	<ul style="list-style-type: none"> > CNL pays 100% > You pay 0% 	<ul style="list-style-type: none"> > CNL pays the same dollar amount as under Option 1 > You pay the difference in total premium cost

myBenefits Emergency Travel and Dental Options



Coverage	1. Base Option	2. Buy Different	3. Buy Down	4. Buy Up
Travel				
Out-of-country emergency medical	For first 60 days of travel	For first 60 days of travel	For first 60 days of travel	For first 60 days of travel
Premium sharing	<ul style="list-style-type: none"> > CNL pays 100% > You pay 0 	<ul style="list-style-type: none"> > CNL pays 100% > You pay 0 	<ul style="list-style-type: none"> > CNL pays 100% > You pay 0 	<ul style="list-style-type: none"> > CNL pays 100% > You pay 0
Dental Care				
Basic services	80%	80%	80%	100%
Major restorative services	75%	75%	75%	75%
Annual maximum (major restorative)	\$1,250 per person	\$1,250 per person	\$1,250 per person	\$2,000 per person
Orthodontia	50% of eligible services, to a lifetime max. of \$3,000 per person	50% of eligible services, to a lifetime max. of \$3,000 per person	Not applicable	50% of eligible services, to a lifetime max. of \$3,000 per person
Premium sharing*	<ul style="list-style-type: none"> > CNL pays 100% > You pay 0 	<ul style="list-style-type: none"> > CNL pays 100% > You pay 0 	<ul style="list-style-type: none"> > CNL pays 100% > You pay 0 	<ul style="list-style-type: none"> > CNL pays the same dollar amount as under Option 1 > and you pay the difference
Health Care Spending Account				
Health Care Spending Account	Not applicable	<ul style="list-style-type: none"> > \$200 single > \$400 family > can purchase a wide range of medical and/ or dental services and procedures (to the extent that they are not covered under Option 2) > allows you to pay for these services with pre-tax dollars 	Not applicable	Not applicable

* Regular part-time employees (working less than 80% of full-time work schedule) will pay an additional premium for dental coverage equal to 40% of the Total Dental premium under Options 1 and 2, and no premium under Option 3. Under Option 4, CNL pays the same dollar amount as under Option 1, and a regular part-time employee pays the difference.





myBenefits Core Insurance Options

Coverage	1. Base Option	2. Buy Different	3. Buy Down	4. Buy Up
Basic Life Insurance				
Benefit	1 times annual earnings	1 times annual earnings	1 times annual earnings	1 times annual earnings
Premium sharing	> CNL pays 100% > You pay 0	> CNL pays 100% > You pay 0	> CNL pays 100% > You pay 0	> CNL pays 100% > You pay 0
Supplemental Life				
Benefit	1 times annual earnings	1 times annual earnings	> Coverage is optional	1 times annual earnings
Premium sharing	> CNL pays 1/6th > You pay 5/6th	> CNL pays 1/6th > You pay 5/6th	> You pay 100%	> CNL pays 1/6th > You pay 5/6th
Long Term Disability				
Benefit	66 ² /3% of base earnings to a monthly maximum of \$28,000	66 ² /3% of base earnings to a monthly maximum of \$28,000	66 ² /3% of base earnings to a monthly maximum of \$28,000	66 ² /3% of base earnings to a monthly maximum of \$28,000
Taxes	Benefit payments are taxable as income	Benefit payments are taxable as income	Benefit payments are taxable as income	Benefit payments are taxable as income
Opt-out	May waive coverage with 25 years or more of pensionable service	May waive coverage with 25 years or more of pensionable service	May waive coverage with 25 years or more of pensionable service	May waive coverage with 25 years or more of pensionable service
Premium sharing	> CNL pays 50% > You pay 50%	> CNL pays 50% > You pay 50%	> CNL pays 100% > You pay 0	> CNL pays 50% > You pay 50%

myBenefits Optional Insurance Options



Optional Group Life Insurance & Accident Insurance

Optional Benefit

Employee	> Units of \$10,000 to a maximum of \$500,000 > Can select Optional Group Life only and Optional Accident Insurance
Spouse	> Units of \$10,000 to a maximum of \$500,000 > Can select Optional Group Life only and Optional Accident Insurance

Optional Critical Illness Insurance

Employee	> Units of \$10,000 to a maximum of \$250,000 > Benefit is tax-free and payable to you (employee)
	> Non Evidence Maximum of \$30,000
Spouse	> Units of \$10,000 to a maximum of \$250,000 > Benefit is tax-free and payable to you (employee) > Non Evidence Maximum of \$30,000
Dep Child	> Units of \$10,000 to a maximum of \$100,000 > Benefit is tax-free and payable to you (employee) > Non Evidence Maximum of \$10,000

The myBenefits benefit period runs for two years from April 1st of the first calendar year to March 31st of the third calendar year. Optional insurances are 100% employee-paid, and employees can enroll or cancel at any time.