

Connects Us consultants Benefits Program

EXTENDED HEALTH CARE

	BRONZE	SILVER	GOLD	
ANNUAL DEDUCTIBLE	Nil	Nil	Nil	
TERMINATION AGE	75 or earlier retirement	75 or earlier retirement	75 or earlier retirement	
	PRESCRIP	PTION DRUGS		
PAY DIRECT CARD	Yes	Yes	Yes	
COVERAGE	70% for mandatory generic drugs	80% for mandatory generic drugs	90% for mandatory generic drugs	
REIMBURSEMENT MAXIMUM	\$1,500 per calendar year	\$2,500 per calendar year	\$5,000 per calendar year	
	PARAMED	ICAL SERVICES		
COVERAGE	80%, up to \$300 per practitioner, Combined maximum \$1,000 per calendar year	90%, up to \$400 per practitioner, Combined maximum \$1,000 per calendar year	100%, up to \$500 per practitioner, Combined maximum \$1,000 per calendar year	
COVERAGE PRACTITIONERS	Acupuncturist, Chiropractor, Massage Therapist, Naturopath, Osteopath, Physiotherapist, Podiatrist/Chiropodist Psychologist/MSW/Counselor, Speech Therapist.	Acupuncturist, Chiropractor, Massage Therapist, Naturopath, Osteopath, Physiotherapist, Podiatrist/Chiropodist Psychologist/MSW/Counselor, Speech Therapist.	Acupuncturist, Chiropractor, Massage Therapist, Naturopath, Osteopath, Physiotherapist, Podiatrist/Chiropodist Psychologist/MSW/Counselor, Speech Therapist.	
	OTHER MEI	DICAL SERVICES		
COVERAGE	100% of eligible expenses	100% of eligible expenses	100% of eligible expenses	
VISION CARE – EYE EXAMS ONLY	\$75/24 months; Child every 12 months	\$75/24 months; Child every 12 months	\$75/24 months; Child every 12 months	
AMBULANCE TO NEAREST HOSPITAL	Unlimited ground and air	Unlimited ground and air	Unlimited ground and air	
PRIVATE DUTY NURSE	\$10,000/2 calendar years	\$10,000/2 calendar years	\$10,000/2 calendar years	
ORTHOPAEDIC SHOES	\$350/calendar year	\$350/calendar year	\$350/calendar year	
CUSTOM ORTHOTICS	\$200/calendar year	\$200/calendar year	\$200/calendar year	
INSULIN PUMP	1/lifetime; maximum \$500	1/lifetime; maximum \$500	1/lifetime; maximum \$500	
HEARING AIDS	\$500/60 consecutive months	\$500/60 consecutive months	\$500/60 consecutive months	
DENTAL ACCIDENT	Reasonable and Customary	Reasonable and Customary	Reasonable and Customary	
	но	SPITAL		
HOSPITAL COVERAGE	Balance between ward semi-private	Balance between ward semi-private	Balance between ward semi-private	
	OUT OF PROVINCE / OUT OF COUNTRY			
OUT OF PROVINCE/COUNTRY TRAVEL	\$5,000,000 maximum / 90 days	\$5,000,000 maximum / 90 days	\$5,000,000 maximum / 90 days	
TRAVEL ASSISTANCE	Included	Included	Included	



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DENTAL CARE

	BRONZE	SILVER	GOLD	
ANNUAL DEDUCTIBLE	Nil	Nil	Nil	
TERMINATION AGE	75 or earlier retirement	75 or earlier retirement	75 or earlier retirement	
BENEFITS BENEFITS				
BASIC TREATMENT	80% with 12 month recall	80% with 12 month recall	80% with 12 month recall	
MAJOR RESTORATIVE	Not available	50%	50%	
COVERAGE BASIS	General fee guide; prov. of residence	General fee guide; prov. of residence	General fee guide; prov. of residence	
COMBINED BENEFIT MAXIMUM	\$750 per person per calendar year	\$1,000 per person per calendar year	\$1,500 per person per calendar year	

LIFE INSURANCE

	BRONZE	SILVER	GOLD
LEVEL BENEFIT	\$25,000; reduces 50% at age 65	\$25,000; reduces 50% at age 65	\$25,000; reduces 50% at age 65
TERMINATES AT AGE	70 or earlier retirement	70 or earlier retirement	70 or earlier retirement

ACCIDENTAL DEATH & DISMEMBERMENT

	BRONZE	SILVER	GOLD
LEVEL BENEFIT	\$25,000; reduces 50% at age 65	\$25,000; reduces 50% at age 65	\$25,000; reduces 50% at age 65
TERMINATION AGE	70 or earlier retirement	70 or earlier retirement	70 or earlier retirement

DEPENDENT LIFE (Family Only)

	BRONZE	SILVER	GOLD
SPOUSE/EACH DEPENDENT CHILD	\$10,000/\$5,000	\$10,000/\$5,000	\$10,000/\$5,000
TERMINATION AGE	70 or earlier retirement	70 or earlier retirement	70 or earlier retirement

CRITICAL ILLNESS

	BRONZE	SILVER	GOLD
LEVEL BENEFIT	\$10,000	\$10,000	\$10,000
COVERED CONDITIONS	Tumour, Heart Valve Replacement, Occupatio	n Disease, Aorta Surgery, Heart Attack, Dismemb Inal HIV Infection, Blindness, Paralysis, Cancer, I Artery Bypass Surgery, Major Organ Transplant,	oss of Speech, Parkinson's Disease, Coma,
TERMINATION AGE	65 or earlier retirement	65 or earlier retirement	65 or earlier retirement

MONTHLY COST (British Columbia) Plan offerings cannot be modified. No medical evidence is required for all plans.

	BRONZE	SILVER	GOLD
SINGLE	\$98.92	\$114.49	\$120.79
COUPLE	\$186.76	\$219.28	\$234.05
FAMILY	\$248.46	\$295.70	\$315.94

MONTHLY COST (Alberta) Plan offerings can not be modified. No medical evidence is required for all plans.

	BRONZE	SILVER	GOLD
SINGLE	\$119.96	\$140.24	\$148.59
COUPLE	\$230.92	\$273.26	\$290.28
FAMILY	\$309.24	\$370.11	\$395.98

MONTHLY COST (Manitoba) Plan offerings cannot be modified. No medical evidence is required for all plans.

	BRONZE	SILVER	GOLD
SINGLE	\$92.69	\$109.95	\$118.30
COUPLE	\$174.07	\$205.17	\$221.46
FAMILY	\$231.12	\$275.96	\$297.48

MONTHLY COST (Ontario) Plan offerings cannot be modified. No medical evidence is required for all plans.

	BRONZE	SILVER	GOLD
SINGLE	\$134.87	\$157.12	\$169.73
COUPLE	\$263.53	\$305.01	\$327.41
FAMILY	\$354.47	\$406.14	\$441.66

MONTHLY COST (Saskatchewan) Plan offerings cannot be modified. No medical evidence is required for all plans.

	BRONZE	SILVER	GOLD
SINGLE	\$119.96	\$140.24	\$148.59
COUPLE	\$230.92	\$273.26	\$290.28
FAMILY	\$309.24	\$370.11	\$395.98

MONTHLY COST (Nova Scotia) Plan offerings cannot be modified. No medical evidence is required for all plans.

	BRONZE	SILVER	GOLD
SINGLE	\$146.14	\$171.49	\$181.91
COUPLE	\$283.80	\$336.72	\$358.01
FAMILY	\$381.69	\$457.78	\$490.13

MONTHLY COST (Newfoundland and Labrador) Plan offerings cannot be modified. No medical evidence is required for all plans.

	BRONZE	SILVER	GOLD
SINGLE	\$146.14	\$171.49	\$181.91
COUPLE	\$283.80	\$336.72	\$358.01
FAMILY	\$381.69	\$457.78	\$490.13

MONTHLY COST (New Brunswick) Plan offerings cannot be modified. No medical evidence is required for all plans.

	BRONZE	SILVER	GOLD
SINGLE	\$146.14	\$171.49	\$181.91
COUPLE	\$283.80	\$336.72	\$358.01
FAMILY	\$381.69	\$457.78	\$490.13

MONTHLY COST (Prince Edward Island) Plan offerings cannot be modified. No medical evidence is required for all plans.

	BRONZE	SILVER	GOLD
SINGLE	\$146.14	\$171.49	\$181.91
COUPLE	\$283.80	\$336.72	\$358.01
FAMILY	\$381.69	\$457.78	\$490.13

^{*}PLEASE NOTE THAT RATES DO NOT INCLUDE TAXES, IF APPLICABLE. The taxes will be calculated based on province and can be viewed once registered.

OPEN ENROLMENT ELIGIBILITY

All conects Us consultants.

- We have negotiated an open enrolment for January 1, 2017, all consultants are eligible to participate in the connectsUs benefits program. Coverage will commence on January 1, 2017. Your enrollment must be completed and received by Effortless Admin Inc. by December 10, 2016 to avoid providing medical evidence. Your billing will start January 1, 2017. No exceptions. As premiums are billed in advance of the due date, it is important to have your enrollment received by Effortless Admin as soon as possible (prior to December 10, 2016) to avoid being charged for more than one month at a time.
- After January 1, 2017, you will be eligible for benefits if you have been an new contract with connectsUs for 60 days. Coverage will commence 60 days immediately following the contract start date. Your enrollment must be completed and received by Effortless Admin Inc. within 31 days of the effective date to avoid providing medical evidence. Coverage will be billed as of your calculated effective date regardless of the date your information is received. No exceptions. As premiums are billed in advance of the due date, it is important to have your enrolment received by Effortless Admin as soon as possible (prior to effective date) to avoid being charged for more than one month at a time.
- Applications received after the enrolment period may result in restricted benefits, medical questionnaires, pre-existing exclusions, etc.
- All eligible dependents must be included on the initial application dependents can be exempted from the health and dental benefits as long as alternate coverage information is provided on the application (eg. spouse has coverage). If you are exempting coverage, and later lose the alternate policy, ensure you notify Effortless Admin within 31 days in order to activate your health and dental coverage without providing medical evidence!
- Associates will have the option to modify their coverage up or down by one level (bronze/silver/gold) every 24 months of active coverage, or at the time of a life event. A life event is defined as an event that would result in a change to your dependent status (single/couple/family), such as marriage, divorce or having your first child. You will be notified within 31 days of reaching 24 months of coverage. You will then have 31 days to select one level up or down. If we are not notified within the 31day period, you will not be able to make a change for another 24 months.

MEDICAL REQUIREMENTS FOR LATE ENROLMENTS

- If an application is received after 31 days from the date coverage was to commence, medical evidence will be required before the member and/or dependent can join the plan.
- An eligible dependent who was not added at the time the member enrolled, would be required to provide medical evidence if they wish to join at a later date.
- If coverage is cancelled, it cannot be applied for until after 12 months from the date of termination, and medical evidence will be required.
- Upon medical approval, there is a dental restriction of \$250 per insured for the first 12 months of coverage.

MEMBER ENROLLMENT PROCESS

- Email John D. Ash, Rogersworks Inc. @ johnash@rogersworks.com with:
 - your name
 - date of birth
 - email address
 - plan choice (Bronze, Silver, Gold)
 - family status (single, couple, family)
- You will receive an email prompting you to log in and complete your enrolment.
- The unique link in the email is tied to your personal information. You will be required to verify your identity using your name and date of birth.
- The enrolment wizard will walk you through a series of steps to add your contact, dependent, beneficiary, and alternate coverage information.
- Once completed you will be instructed to print the forms, sign where indicated and return the original to Effortless Admin.
- You are required to send in the original enrolment forms, along with a copy of a void cheque for pre-authorized withdrawal of the monthly premiums.
- If the original forms are not received within two weeks, a reminder notice will be sent. Failure to return the original forms with banking details within six weeks will result in termination of coverage retroactive to the initial effective date.

Once the original forms and payment have been received, a benefit package will be sent to your home with your "Benefits-At-A-Glance" booklet, benefit statement, pay direct drug cards, and brochures on how to submit claims using the online system, or mobile app.



For more information please contact:

John Ash, Employee Benefit and Pension Specialist

johnash@rogersworks.comwww.rogersworks.comTel: (604) 802-0099Toll free: 1-866-695-3143#401 – 1489 Marine DriveWest Vancouver, BC V7T 1B8