

SUMMARY OF GROUP INSURANCE COVERAGE

Pensioners

Effective January I, 2025

TYPES OF HEALTH CARE COVERAGE

SINGLE Coverage for you.



FAMILY Coverage for you and your dependents¹.

EXEMPTION

Pensioners under age 65

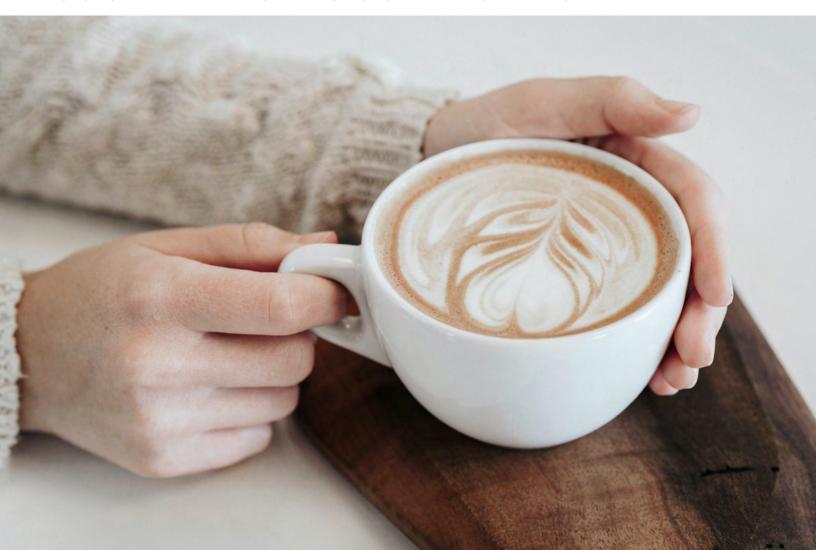
You can waive health care coverage if you are covered by a private insurance plan (e.g., your spouse's group insurance plan). In that case, proof of insurance is required.

Pensioners age 65 and over

You can waive health care coverage and remain covered solely under the drug plan provided by the Régie de l'assurance maladie du Québec (RAMQ)².

¹ Under the plan, children age 21 and over can remain covered as long as they maintain full-time student status in an education institution recognized under the Income Tax Act (Canada), are dependent on you — the member — for financial support and do not have a spouse.

² If you opt out, your decision will be irrevocable, that is, you will not be eligible to participate in Concordia's Group Insurance Plan at any future date.



HEALTH CARE

Unless otherwise indicated, maximums apply per insured person, per Benefit year (January to December) and are subject to Sun Life's reasonable and customary (R&C) limits. Contact Sun Life for more information.

PRESCRIPTION DRUGS

Reimbursement Drugs requiring a prescription by a physician	80% for prescription drugs on the RAMQ list 60% for non-RAMQ drugs
Deductible per prescription (definition available below)	\$3 ²
Annual threshold	\$3,000 of eligible expenses per certificate ³ , applicable to prescription drugs only
Mandatory generic substitution (definition available below)	Yes
Direct payment card	Use your card to only pay out of pocket expenses at the pharmacy
HOSPITALIZATION	
Short-term	100% (semi-private room)
Convalescent/Rehabilitation	100% (maximum 60 days)
PARAMEDICAL SERVICES	
Reimbursement	80%
Psychiatrist, psychologist and psychotherapist	Combined maximum of \$1,500
Acupuncturist, chiropodist, chiropractor, kinesiologist, massage therapist, naturopath, occupational therapist, osteopath, physical rehabilitation therapist, physiotherapist, podiatrist and sports therapist	Combined maximum of \$1,000
Audiologist and speech therapist	Combined maximum of \$1,000

¹ With the exception of out-of-province emergency care and assistance abroad coverage, health and vision care claims are subject to a combined lifetime reimbursement maximum of \$1,000,000 per insured person. Should this maximum be reached, the plan will, however, continue to reimburse prescription drugs on the RAMQ list.
² This deductible also applies to medical products sold at the pharmacy counter that have a Drug Identification Number (DIN).

³ "Per certificate" means all the individuals insured under your coverage, which includes you and your eligible dependents.



WHAT IS THE DEDUCTIBLE PER PRESCRIPTION?

An amount to pay before receiving a reimbursement from the plan. This amount applies to the purchase or renewal of each prescription drug indicated on the physician's prescription.

WHAT IS MANDATORY GENERIC SUBSTITUTION?

It replaces a brand-name drug with a generic substitution that is just as effective but costs less. Therefore, the amount reimbursed depends on the price of the generic drug.

HEALTH CARE (CONT.)

Unless otherwise indicated, maximums apply per insured person, per Benefit year (January to December) and are subject to Sun Life's reasonable and customary (R&C) limits. Contact Sun Life for more information.

OTHER MEDICAL EXPENSES	
Diagnostic tests and laboratory fees	80%, maximums may apply
Pharmacogenomics testing prescribed by a doctor	80%, one test, lifetime maximum of \$500
Other medical services and supplies: nursing care, ambulance, hearing aids, orthotics, etc.	80%, maximums apply
TRAVEL	
Out-of-province emergency care and assistance abroad	100%, maximum 180 days of travel lifetime maximum \$3,000,000
TERMINATION OF COVERAGE	Death ¹

VISION CARE

If applicable

Unless otherwise indicated, maximums apply per insured person, per Benefit year (January to December) and are subject to Sun Life's reasonable and customary (R&C) limits. Contact Sun Life for more information.

Reimbursement	80%
Eye exam, glasses, contact lenses and laser eye surgery	l eye exam every 24 months Combined maximum of \$160 per 24 months (12 months for children under age 18)
TERMINATION OF COVERAGE	Death ²

¹ With the exception of out-of-province emergency care and assistance abroad coverage, health and vision care claims are subject to a combined lifetime reimbursement maximum of \$1,000,000 per insured person. Should this maximum be reached, the plan will, however, continue to reimburse prescription drugs on the RAMQ list.
² To be all other province emergency care and assistance abroad coverage, health and vision care claims are subject to a combined lifetime reimbursement maximum of \$1,000,000 per insured person. Should this maximum be reached, the plan will, however, continue to reimburse prescription drugs on the RAMQ list.

 2 To be eligible for survivor coverage, your covered dependents must be actively enrolled in the health plan (i.e., not exempt).

MODIFICATION RULES

FOLLOWING A LIFE EVENT

Please note that you cannot add dependents acquired after your retirement or dependents who were not eligible at the time of your retirement. That said, you can update your list of insured dependents within 31 days of the following life events:

- A change in marital status (divorce, legal separation or termination of a common-law relationship)
- A dependent child reaching the age of 21
- The death of a dependent
- The loss or gain of your spouse's group insurance coverage



TIPS AND TRICKS FOR BEING AN INFORMED CONSUMER



HEALTH CARE SPENDING ACCOUNT (HCSA)

Each year, you'll receive money in your Health Care Spending Account.

AMOUNT ALLOCATED	Varies according to your age and type of coverage. Please refer to Pensioner's Corner for the details.
Description	To reimburse health and vision care insurance premiums as well as expenses that are not covered or partially covered by the plan
Eligibility	You, your spouse and any other person listed as one of your dependents on your income tax return
Carry forward unused amounts ²	l year

¹ For the complete list of eligible expenses, consult the <u>Canada Revenue Agency website</u>.

² On December 31, the unused amount will be carried over for one reference year (January 1 to December 31), after which it will be lost. For example, if you are given \$100 for Year 1 and you only claimed \$60 as at December 31, the remaining \$40 will be carried over for a single reference year. Therefore, you will have until December 31 of Year 2 to use this amount.

BASIC LIFE INSURANCE

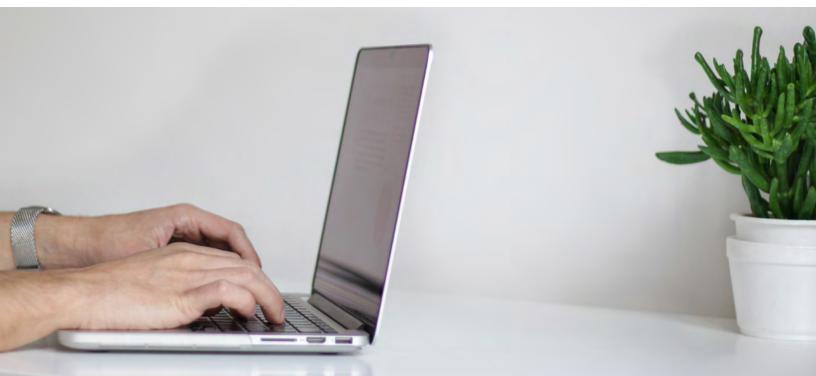
If applicable

This insurance provides your beneficiaries with a lump sum amount in the event of your death. Consult Pensioner's Corner for the details.

MODIFICATION RULES

AT ANY TIME

• Change your beneficiaries if applicable



TELEMEDICINE SERVICE

With this online platform, you and your dependents have access to a multitude of health services, free of charge, any time, from the comfort of your home:

- Schedule a same-day or next-day appointment
- Renew or refill a prescription
- Complete online medical assessments
- · Get specialist referrals and lab requests

Fully confidential and available 24/7 Lumino Health Virtual Care



PLAN COSTS

YOUR EMPLOYER PAYS

50%

of the total cost of health and vision care (premium and HCSA)

100% of the premium for basic life insurance

YOU PAY

50% of the total cost of health and vision care

HEALTH AND VISION CARE CLAIMS

You can submit your claims to your insurer in three simple ways.



Online at <u>mySunLife.ca</u> or via the <u>my Sun Life mobile app</u>



With the pay-direct drug card for the pharmacy and paramedical services, as applicable



By mail Download paper claim forms from <u>mySunLife.ca</u>



Questions

For more information

Contact Sun Life: 1-800-361-6212

Contact Human Resources: <u>hr-employeeservices@concordia.ca</u>

Sun Life's business hours

From Monday to Friday, 8 a.m. to 8 p.m. (ET)

You will have to identify yourself using the following:

- Your contract number (103424)
- Your employee number

This summary contains an overview of the main provisions of your group insurance plan. This plan is governed by official documents, such as insurance contracts, and by applicable legislation. If there are any discrepancies between this summary and the plan's official documents, the latter shall prevail. The employer reserves the right to modify or terminate the coverage offered or to modify the group insurance plan's cost, eligibility or cost-sharing rules. Should this occur, the employer shall notify you of any changes as soon as possible.

Effective as of January 1, 2025.