This document summarizes the coverage offered under the Association des retraitées et retraités de l'enseignement de la FNEEQ (AREF) group insurance plan.

It was designed to make it easier for you to make your coverage selections on enrolment and includes the information most often accessed by insureds.

For a full description of the plan and for information on the applicable exclusions and reductions, please refer to the contract by registering for the Client Centre.

AREF

Secretariat

PO Box 34009 Québec Québec G1G 6P2

1888 513-2494 aref-neq.ca

Beneva

625 rue Jacques-Parizeau PO Box 1500 Québec Québec G1K 8X9

1800 463-4856 beneva.ca



Group insurance plan

Schedule of coverage effective January 1st, 2026

Contract 001011





Eligibility

To be eligible for insurance, retirees must join the AREF and maintain their membership.

All dependents of a participant are eligible for insurance as of the same date as the participant if they are already a dependent, or as of the date on which they subsequently become dependents.

Enrolment

Enrolment in the Life and Health insurance¹ benefits is optional.

All applications must be submitted within 30 days following the date the retiree becomes eligible. **The decision to not enrol is irrevocable.**

The 30-day deadline also applies to retirees who are insured under another group health insurance plan when they retire and who wish to enrol in the AREF's health insurance plan on account of the termination of their coverage under the other plan. Joining the AREF remains mandatory.

On the death of the participant, dependents may remain insured if the spouse becomes a member of the AREF.

Health Insurance Choice of travel insurance coverage

During initial enrolment, the retiree must choose one of the following two options for the duration of his or her travel insurance coverage.

60-Day Option: 60 days of coverage per trip. **This option is irrevocable.**

182-Day Option: provided the person is covered under the RAMQ (typically 182 days)

When a retiree chooses the 182-Day Option, changing to the 60-Day Option is always possible.

Life Insurance

Under no circumstances can the amounts of coverage selected be greater than those immediately held prior to the retirement date.

The Insurer pays the beneficiary the life insurance amount corresponding to the age of the insured at the time of death.

Participant's Basic Life Insurance

Retiree under age 65:

1 times the annual salary at the time of retirement, rounded up to the closest \$500

Retiree age 65 or over \$10,000

When the amount of Basic Life Insurance is reduced due to age, participants may obtain the equivalent amount in units of Optional Life Insurance coverage, without however exceeding the number of units available for their age group.

Dependents' Basic Life Insurance

Spouse:

If the death occurs:

- Before age 65: \$10,000
- On or after the 65th birthday: \$5,000

Dependent child: \$5,000

Participant's Optional Life Insurance

Retirees can reduce the number of units of Optional Life Insurance at any time, but may not increase it.

Under age 70	1 to 15 units of \$5,000	
As of age 70	1 to 8 units of \$5,000	

Spouse's Optional Life Insurance

This coverage is only offered to retirees on or after July 1, 2022.

Spouse under age 70	1 to 15 units of \$5,000	
Spouse age 70 or over	1 to 8 units of \$5,000	

Different terms may apply to individuals who retired before July 1, 2022, namely regarding the basic life insurance amount or the number of additional life insurance units available.

Travel insurance

As of November 2020, changes have been made to travel insurance coverage based on the travel advisory risk level issued by the Government of Canada. Your contract stipulates, among other things, that for a country of destination covered under an advisory "to avoid all non-essential travel", coverage is limited to 30 days.

To be covered under this benefit, insureds who have a known illness or condition must ensure before departure that their health condition is stable and under control, that they can carry out usual daily activities and that they are experiencing no symptoms that may reasonably suggest that any complications may arise or that medical care may be required during the planned stay outside the province of residence.

The insureds should contact the Assistor at least 15 days before departure to obtain confirmation of insurance coverage under this benefit.

CanAssistance, Beneva's travel assistor, will provide information about their eligibility and specific advice about their travel destination.

Call CanAssistance

- In Canada and the United States: 1855 635-9460
- Collect worldwide: 418 780-9460

When travelling, make sure you have your service card. The Assistor's contact information can also be found on the back of the card.

^{1.} This plan does not provide for the reimbursement of prescription drugs on the RAMQ list. Everyone who enrols must register with the RAMQ plan. However, persons under age 65 who are eligible under a group insurance plan (for example spousal coverage) that reimburses prescription drugs on the RAMQ list must participate in that plan.

This table provides a brief description of the coverage included under your health insurance benefit. For a full description of the health insurance benefit and for information on the applicable exclusions and reductions, please refer to the contract, which has been posted on the Beneva website.

Eligible expenses are those reasonably incurred and justified by the seriousness of the case as well as by current medical practice and the customary and reasonable charges in force in the area.

Health insurance

Care, service or supply expenses followed by an asterisk (*) require a medical prescription.

Unless otherwise indicated, the amount shown, if any, is the maximum amount that can be reimbursed per insured person.

Annual deductible	None	None		
Expenses reimbursed at 100%				
Hospitalization	Semi-private room			
Extended care	Semi-private room, maximum of 180 days pe	er calendar year		
Travel insurance	60-Day Option 60 days of coverage (first 60 days of a trip) This decision is irrevocable Lifetime maximum: \$2,000,000	182-Day Option 182 days of coverage provided the person is covered under the RAMQ		
Trip cancellation insurance	Maximum per trip: \$5,000			
Expenses are reimbursed according Prescription drugs	Prescription drugs and pharmaceutical serv professional legally authorized to prescribe prescription with directions for use specifical	Régime général d'assurance médicaments du Québec (RGAM) ices that can be obtained only by prescription from a healthcare such drugs. Also eligible for reimbursement are drugs obtained on lly related to treatment of the following pathological conditions: cardiac thritis, Parkinson's disease, epilepsy, cystic fibrosis and glaucoma.		
	Maximum reimbursement of \$100,000 per calendar year			
	Prescription drugs that are covered by the for reimbursement.	RAMQ's Basic Prescription Drug Insurance Plan are not eligible		
Automated payment service	Direct			

Health insurance (continued)

Expenses reimbursed at 80% (including healthcare professionals fees)		
Ambulance	Covered	
Appliance used to manage diabetes* (blood glucose monitor, dextrometer or any other appliance of a similar nature for an insulin-dependent insured)	Maximum reimbursement of \$200 per period of 5 consecutive years	
Appliance for temporomandibular joint*	Covered	
Support stockings	Maximum of 6 pairs per calendar year, compression of 13 mmHg or more	
Rehabilitation centre	Semi-private room, maximum of \$60 per day and 15 days per hospitalization	
Corrective (deep) footwear*	Maximum reimbursement of \$150 per pair, 2 pairs per calendar year	
Orthopedic shoes (custom-made)*	Deductible of \$20 per pair and maximum of 2 pairs per calendar year	
Private clinic for alcohol, drug addiction (excluding tobacco use) and gambling	Maximum reimbursement of \$3,500 per calendar year, lifetime maximum of 2 admissions	
Adult diapers for incontinence*	Maximum reimbursement of \$400 per calendar year	
Wheelchair,* iron lung* or other therapeutic devices*	Covered	
Expenses for travel to receive treatment from a medical specialist not available in the insured's region of residence*	Maximum reimbursement of \$1,000 per trip	
Continuous glucose monitoring device*	Maximum reimbursement of \$4,000 per calendar year	
Artificial limbs,* prosthetic* and orthopedic* equipment	Covered	
Hospital bed	Covered	
Multiservices (home care and assistance)*	Covered (within 30 days following the hospitalization or day surgery)	
Professional fees for nursing care:	Maximum reimbursement of \$48 per day	
Fees for home assistance services (to look after basic needs):	Maximum reimbursement of \$48 per day	
Transportation expenses for medical care or follow-up:	Maximum reimbursement of \$24 per trip, and of 3 return trips per week	
Foot orthotics*	Maximum reimbursement of \$360 per calendar year	
Oxygen therapy* and pharmacogenetic tests*	Covered	
Insulin pump* • Device* • Accessories (tubes, catheters)*	Maximum reimbursement of \$6,000 per period of 5 consecutive years Maximum reimbursement of \$3,200 per calendar year	
Hearing aid*	Maximum reimbursement of \$1,000 per period of 2 consecutive years	
Capillary prosthesis (wig) following chemotherapy*	Maximum reimbursement of \$320 per calendar year	
External breast prosthesis following a mastectomy*	Maximum reimbursement of \$1,000 per period of 2 consecutive years	
Mammography and nuclear medicine imaging performed outside a hospital	Maximum reimbursement of \$400 per calendar year	
Magnetic resonance imaging	Maximum reimbursement of \$750 per calendar year	
Serums and fluids injected for curative purposes*	Maximum reimbursement of \$80 per day	
Curative and preventive vaccinations	Covered	

Health insurance (continued)

Healthcare professionals

All of the healthcare professionals whose fees are covered must be members of a professional order recognized by legislative authority or of a professional association recognized by the Insurer. One visit, treatment or consultation per day, per insured.

Acupuncturist, chiropractor and chiropractor X-rays, dietitian, kinesitherapist, massage therapist, nutritionist, ortherapist, osteopath, physiotherapist, physical rehabilitation therapist and podiatrist	Maximum reimbursement of \$55 per treatment, consultation or X-ray, maximum of \$1,500 per calendar year for all of these professionals
Dental surgery (following accident)	Treatment must be provided within 12 months following the date of the accident
Registered nurse* or licensed practical nurse*	Maximum reimbursement of \$200 per day, maximum of \$2,000 per calendar year
Speech therapist, occupational therapist and audiologist	Maximum reimbursement of \$75 per treatment, maximum of \$650 per calendar year for all of these professionals
Psychologist, psychiatrist, psychoanalyst in an outpatient clinic, social worker, career counsellor in private practice, psychotherapist and sexologist	These expenses are reimbursed at 50%, subject to a maximum reimbursement of \$75 per consultation and \$1,500 per calendar year for all of these healthcare professionals. These maximums also apply per consultation in the case of marital therapy for both spouses.

A few details...

Therapeutic devices

The term therapeutic devices refers to a device used for treatment and curative purposes in current medical practice. Domestic devices are not covered.

Corrective (deep) or orthopedic (custom made for the insured from a mould) shoes

These shoes must be sold by a specialized laboratory or establishment licensed and authorized under all applicable legislation in the insured's province of residence. A specialized establishment is one that has a laboratory for making adjustments and modifications on site.

Orthopedic devices

The term orthopedic devices refers to a technical device used to correct a functional deficiency or compensate for it.

Premium rates

Health insurance – Québec residents²

Monthly premium rates in force from January 1st to December 31st, 2026 including a premium holiday

	60-Day Option	182-day option
Individual coverage	\$50,27	\$71,08
Family coverage	\$100,54	\$142,16

Life Insurance

Monthly premium rates in force from January 1st to December 31st, 2025

Participant's Basic Life Insurance (rate per \$1,000 of coverage)		
Participant under age 65	\$0,8483	
Participant age 65 or over	\$1,8369	

Dependents' Basic Life Insurance (fixed rate)		
Participant under age 65	\$2.40	
Participant age 65 or over	\$12.76	

Participant's and spouse's optional life insurance (rate per \$1,000 of insurance coverage)³

Age	Female	Male
Age 49 or less	\$0.097	\$0.147
50 - 54	\$0.138	\$0.219
55 – 59	\$0.210	\$0.346
60 - 64	\$0.320	\$0.531
65 – 69	\$0.521	\$0.861
70 – 74	\$0.883	\$1.433
75 – 79	\$1.553	\$2.350
80 - 84	\$2.586	\$3.836
85 – 89	\$4.447	\$6.247
90 - 94	\$7.618	\$10.120
95 – 99	\$11.953	\$14.676
Age 100 and over	\$15.834	\$18.567

9% sales tax must be added to these premium rates.

Claims

Prescription Drugs – Direct Automated Payment service

When making eligible prescription drug purchases,⁴ simply present your service card to the pharmacist. Beneva will automatically issue payment for the insured portion of prescription drug expenses.

Healthcare Claims

You can submit your health insurance claims directly from the Beneva Client Centre.

 Healthcare professionals: You enter all the required information (type of professional, amount claimed, name of professional, etc.).

It's fast and easy! The reimbursement is deposited in your account in the next 24 to 48 hours.⁵

 Other expenses: You can submit your claims, attaching photos of your receipts. The current processing times apply to all such expenses.

Receipts must be kept for 12 months, in case of an audit.

Download the Client Centre mobile app from the App Store or Google Play.

For questions about your plan or to follow up on your claims

Client Centre

From our website or using our mobile app, you can:

- Obtain details of your coverage
- See your service card
- Access your cumulative amounts for tax purposes

How to register:

- 1. Sign up at beneva.ca
- 2. Click on Log in and follow instructions.

Beneva Customer Service

For business hours, go to beneva.ca

1800 463-4856

625 rue Jacques-Parizeau, PO Box 1500, Québec Québec G1K 8X 9

beneva.ca



Residents outside Quebec under the age of 65: Separate fees including medication coverage equivalent to the Public Prescription Drug Insurance Plan offered in the province of Quebec is available.

The additonnal life insurance premium for the spouse is based on the age of the plan member and the gender of the spouse.

^{4.} Prescription drugs on the RAMQ list are not eligible.

^{5.} This delay may vary according to your financial institution.

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