

## A BETTER FIT FOR YOUR NEEDS

Your benefits are a key component of Thrive — one of the elements that help make BrokerLink a great place to work.

When it comes to benefits, each of us has our own needs and priorities. That's why the Flex plan offers you the opportunity to choose the level of coverage to best meet your needs.

Recognizing that benefits are a central part of your employee experience, BrokerLink's Flex plan has been designed to:

- ◆ Allow you to choose the benefits that best fit your personal situation
- ◆ Respond to your changing benefits needs throughout your career
- ◆ Ensure the plan is competitive and sustainable over the long term

Please take a moment to understand how your Flex plan works, so you have the information you need to get the maximum value from the plan...**and make it yours!**



## FLEX AT A GLANCE

<b>HEALTH CARE</b>	Basic + HCSA flex dollars <input type="checkbox"/>	Coordination + HCSA flex dollars <input type="checkbox"/>	Comprehensive <input type="checkbox"/>	Enhanced <input type="checkbox"/>
<b>DENTAL CARE</b>	Opt-out + HCSA flex dollars <input type="checkbox"/>	Coordination + HCSA flex dollars <input type="checkbox"/>	Comprehensive <input type="checkbox"/>	Enhanced <input type="checkbox"/>
<b>STD</b> <small>(Short-term disability)</small>	<b>Standard coverage for all</b> 75% weekly earnings up to \$1,500/week up to 17 weeks			
<b>LTD</b> <small>(Long-term disability)</small>	<b>Standard coverage for all</b> 66.7% of earnings up to \$3,000/month Non-taxable benefit + 45% of earnings over \$3,000/month			
<b>LIFE INSURANCE</b> For you	<b>Basic</b> 1 x annual earnings <small>(Employees with Life insurance coverage prior to October 1, 2015, will be grandfathered at the current 2x annual earnings)</small>	<b>Optional</b> <input type="checkbox"/> Up to \$250,000		
<b>LIFE INSURANCE</b> For your dependents	<b>Basic</b> Spouse \$10,000/Child \$5,000	<b>Optional (spouse only)</b> <input type="checkbox"/> Up to \$250,000		
<b>AD&amp;D</b> <small>(Accidental death &amp; dismemberment)</small> For you	<b>Basic</b> 1 x annual earnings <small>(Employees with AD&amp;D coverage prior to October 1, 2015, will be grandfathered at the current 2x annual earnings)</small>	<b>Optional</b> <input type="checkbox"/> Up to \$250,000		

To learn more about eligible expenses and reimbursement levels, please refer to the Summary of Coverage or the insurer's booklet.

## SUMMARY

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- ◆ **TYPICAL SELECTION OF COVERAGE** p3
- ◆ **GREAT QUESTIONS TO CONSIDER** p3
- ◆ **ENROLMENT CHECKLIST** p4

BrokerLink developed this guide to help you select the coverage that's right for you. Take the time to consider key information, assess your benefits needs and available options. In this guide, you will learn basic plan rules and get an overview of coverage scenarios that reflect typical personal and family situations.

# How does the plan work?

## Health and dental care

From Basic to Enhanced coverage, including the dental Opt-out, the Flex plan has options designed just for you and your family.



**MINIMAL CLAIMS  
AND/OR ACCESS TO  
SPOUSE PLAN**

Basic and Coordination:  
These options are fully paid by BrokerLink. You also get annual flex dollars to help you pay for eligible health and dental care expenses.

**REGULAR CLAIMS  
AND/OR NO ACCESS  
TO A SPOUSE PLAN**

Comprehensive and Enhanced:  
These options provide higher reimbursements for health and dental care expenses. BrokerLink pays a large portion of costs, and employee payroll deductions are required on the remainder.

## FINANCIAL SECURITY COVERAGE

The Flex plan includes income protection coverage to help you meet your financial obligations should unexpected events keep you away from work. Coverage costs are shared as follows:

### BrokerLink pays

- ◆ STD coverage
- ◆ Basic Life insurance
- ◆ Basic AD&D insurance

### You pay

- ◆ LTD coverage
- ◆ Basic Dependent Life insurance
- ◆ You can add optional Life insurance and AD&D insurance if needed

## WHO NEEDS COVERAGE?

When selecting coverage, you should consider all your family's needs. So, take the time to discuss what's best for you and your family, and more importantly, make sure your eligible dependents are registered.

Refer to the insurer's booklet for eligibility criteria and definitions, and then select your coverage status from one of the following options for both your health and dental care needs:

- ◆ **Single**
- ◆ **Couple**
- ◆ **Family**

## Enrolling and making changes\*

Each year, during the re-enrolment period, BrokerLink's Flex plan gives you the opportunity to review your selection of coverage based on your personal and family needs. Once you make your new selection, you will be locked-in for the entire one-year period. (Please note that Enhanced health and dental care options require a minimum participation of two years.)

- ◆ If you experience a qualifying life event during the year (such as a birth, death, marriage, divorce, etc.), you will have the opportunity to make changes to your coverage selections and to your benefits options, as required.
- ◆ Remember to keep your personal and beneficiary information up to date at all times.

### \* AT THE FLEX PLAN IMPLEMENTATION YEAR

You must submit your benefit elections by August 31, 2015. Your choices will apply from October 1, 2015 until December 31, 2016.

### SUBSEQUENT ANNUAL (RE)ENROLMENTS

If you do not enrol during the enrolment period, your coverage will default to:

- ◆ your current benefit elections; or
- ◆ the Comprehensive coverage with Single status, for both your health and dental needs, if this is your first time enrolling.

# What's your fit?

These four scenarios help you explore how the Flex plan fits the various needs of its participants. Take a few minutes to understand how your personal situation can compare with these typical situations.



## DAVID

Age: 53

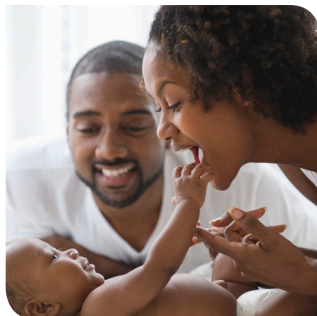
Status: Couple

### Health and dental care usage:

Each year, David claims thousands of dollars for health care expenses for himself and his spouse. Chronic conditions management requiring several prescription drugs, vision care and health practitioners' services are very important to David and his spouse. They visit the dentist once a year for annual exams and require only basic and preventive services.

### David's selection of coverage

1. Health care: Enhanced
2. Dental care: Comprehensive



## MARY

Age: 36

Status: Family

### Health and dental care usage:

Mary recently became a mother. As a healthy family, she and her husband make claims occasionally and both have access to excellent benefits plans from their respective employers. As BrokerLink's plan is more flexible, Mary will select both low-cost Coordination options and use her flex dollars to help pay for health and dental care expenses not covered by either plan.

### Mary's selection of coverage

1. Health care: Coordination (+Annual flex dollars)
2. Dental care: Coordination (+Annual flex dollars)



## CATHY

Age: 41

Status: Family

### Health and dental care usage:

Cathy's family is active and healthy. They rarely make health claims but she is expecting her kids may need orthodontics. Since her spouse doesn't have access to a dental plan, she cannot select the Coordination option. So the Basic health care option will be enough and the Enhanced dental care coverage will provide her good value.

### Cathy's selection of coverage

1. Health care: Basic (+Annual flex dollars)
2. Dental care: Enhanced



## JAYSON

Age: 32

Status: Single

### Health and dental care usage:

Jayson is young and healthy. While a safety net is important to Jayson, financial security becomes his top priority as he is single and just bought a new condo.

### Jayson's selection of coverage

1. Health care: Basic (+Annual flex dollars)
2. Dental care: Opt-out (+Annual flex dollars)
3. Additional optional Life insurance and AD&D to reinforce his financial security

## Great questions to consider

### How much...

do you spend on health and dental care (every year)?

- ◆ Total amount of your claims (low, high)?
- ◆ Frequency of claims (almost never, sometimes, every month)?
- ◆ Any expected changes in your claims pattern?
- ◆ If you do not submit claims often, you might consider more limited coverage.

### Do you have coverage...

under another plan such as your spouse's health and dental care plan?

- ◆ You may be able to coordinate benefits under both plans and receive up to 100% reimbursement for many health and dental care expenses.
- ◆ Plus the Coordination options come with annual allocation of flex dollars.

### What about...

your financial security needs?

- ◆ What level of coverage would be enough to keep you and your dependents financially secure should the unexpected happen?
- ◆ Should you consider additional optional coverage for Life insurance or AD&D?

### What is your overall situation...

with regard to group benefits?

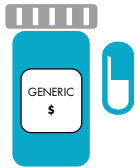
- ◆ What is your and your dependents' general health condition?
- ◆ Are you facing important financial obligations?
- ◆ Do you have or are you expecting a significant change in your personal situation?

# SAVVY CONSUMER BEHAVIOURS CAN BE REWARDING

Health care premium costs are directly linked to our claims experience, which makes it everyone's responsibility to make smart choices. This is where tiered formulary drugs and mandatory generic substitutions come in. By following these simple guidelines, we will keep good quality coverage sustainable for years to come.

## What is a tiered formulary?

It's a list of drugs, divided in two groups, that are covered under the drug plan:



### Preferred and Specialty drugs

Most generic drugs, complex or ongoing medical conditions, etc.



### Non-preferred drugs

Such as brand-name medications that have therapeutically equivalent generics available at lower cost, etc.

Choosing a Preferred/Specialty drug could mean you will pay less in out-of-pocket expenses. Check out the Summary of Coverage for drug reimbursement levels.

## About mandatory generic substitution

A generic equivalent has exactly the same active medication in the same strength, and works the same as the brand-name drug. It also had to be proven to Health Canada that there is no difference in the safety, quality, purity or effectiveness.

The mandatory substitution means that the maximum the plan will pay is based on the cost of the lowest-priced available generic drug.

### Visit GSC's website or its On the Go mobile app to:

- ◆ find out whether your drug is covered
- ◆ the applicable tier
- ◆ the lowest cost alternative that would be reimbursed

**Each claim made for less expensive treatment helps maintain the plan's cost at a reasonable level for both the Company and all participants and reduces future premium cost increases.**

## Enrolment checklist

1. Read the information and make sure you clearly understand how your plan works
2. Decide who needs coverage
3. Evaluate all your options, including access to coverage under a spouse's plan
4. Access the enrolment tool
5. View coverage costs and test different option selections
6. Enrol

**Make it yours!**

Please note that this document is intended to be a summary only and does not contain all of the provisions detailed in the contract. If any statements in this guide are inconsistent with applicable laws and regulations or official plan documents and contracts, those regulations and documents will prevail in all cases. Broker-Link reserves the right to amend or terminate any benefit, coverage or provisions under the Plan, at any time, for any reason. No provision of any benefit is to be considered a contract of employment between you and the Company.