



It's time to get FLEXcited about benefits!

benefits at a glance



regular full-time salaried associates



When it comes
to your benefits,
get **SMART!**

S – share the cost through coordination of benefits

M – make informed decisions

A – ask questions of your healthcare providers

R – review your usage

T – take action to improve your overall health



MyVida Flex Benefits

When it comes to benefits, you have your own particular needs, which are not necessarily the same as those of your colleagues. That's why the plan is designed with built-in flexibility to ensure that we meet as many of your benefit needs as possible. The MyVida Flex Benefit Plan is designed to be:

- Comprehensive, by providing benefit options to meet the needs of our diverse workforce;
- Flexible, by allowing you to select the options and coverage levels that meet your individual or family needs; and
- Market competitive with other leading Canadian employers.

eligibility

Eligibility in the My Vida Benefits Plan is subject to the terms and conditions of your employment contract. Full-time associates and their eligible dependents will participate in the provisions of the plan on their first day of employment.

key features

- benefit year runs from July 1st to June 30th
- choice of prescription drug, health and dental coverage options;
- flexible three-tiered prescription drug coverage
- combined paramedical coverage - focusing on both physical and mental well-being;
- a flex credit structure with an option to "level down" coverage, creating access to additional flex credits;
- Bimbo Canada Benefits Administration Portal (Flexit360) for enrollment.

flex credits

You will be given flex credits to buy your benefit options. Depending on your needs, you can choose to allocate your credits to purchase coverage. In certain cases, this could result in leftover flex credits which can be used to either:

- buy a higher level of coverage for another benefit;
- take advantage of the Health Care Spending Account (HCSA);
- take advantage of a Personal Spending Account (PSA);
- contribute to the Group RRSP; or
- any combination of the above.

You will be able to view your available flex credits when completing the re-enrollment process on the Bimbo Canada Benefits Administration Portal (Flexit360).

Increase your flex credits by "leveling down"

Leveling down – this unique feature of the MyVida plan provides you with the choice to "level down" coverage for Basic Life, Accidental Death & Dismemberment Insurance and Long Term Disability, giving you the flexibility to increase your flex credits and/or decrease your payroll deductions.

enrollment

Enrollment in the My Vida Flex Hourly benefits is for a full benefit year, which runs from July 1 to June 30. You must complete your enrollment during the defined enrollment period by using the Bimbo Canada Benefits Administration Portal (Flexit360). It is important that you take the time to enroll in the MyVida Flex Benefits so that you receive the coverage that best suits your needs while ensuring your beneficiaries are designated accordingly. For new hires, if you do not complete the enrollment process, you will automatically be assigned the default single benefit package of core benefits and Gold only for prescription drugs, extended health and dental coverage. For current associates, if you do not complete the annual re-enrollment process, you will receive the same coverage you elected last year. Once enrollment is closed, you will not be able to change your benefit coverage until the next annual enrollment period, unless you have an eligible Life Event for which you must notify the Bimbo Canada Dedicated Service team within 31 days of the event. Lock-in periods may apply.

Lock-in period: The Platinum option for Prescription Drugs, Extended Health Care and Dental Care has a minimum two-benefit-year lock-in rule. If you select any of the Platinum options, you can only choose a different option level at the completion of the two-benefit year requirement.

Step-up/step-down rule: During re-enrollment you have the option to step-up one option or step-down one option unless you are under the lock-in period described above.

Step-up example: You can change from Silver to Gold but would not be able to move from Silver to Platinum.

Step-down example: You can move from Gold to Silver but would not be able to move from Gold to Bronze.

Coverage status: You can choose Associate only, Associate +1 (spouse or child) or Associate +2 or more (spouse and/or children). You cannot choose to cover different dependents under different plans. The same dependents will be covered under both plans – Extended Health and Dental.

Spouse: Your spouse by marriage or under any other formal union recognized by law; or a person of the opposite sex or of the same sex who is publicly represented as your spouse for a period of at least 12 months. You can only cover one spouse at a time.

Dependent: You or your spouse's children (other than a foster child) who are not married or in any other formal union recognized by law and are under the age of 21 (age 25 if a full-time student, 26 in the province of Quebec). If a child becomes disabled before the maximum age and remains continuously disabled, coverage will continue if they are not able to support themselves financially because of a disability and must rely on you financially.

core benefits

Basic Life, Accidental Death & Dismemberment Insurance <i>Level Down Option</i>	Short Term Disability (STD) Plan	Long Term Disability (LTD) Plan	Business Travel Accident Insurance	Total Health EAP Humanacare Pocket Pills Peopleconnect Maple Headspace
(company paid)	(company paid)	(associate paid)	(company paid)	(company paid)

+

Optional Life Insurance	Optional Accidental Death & Dismemberment Insurance
You can also buy Optional Life Insurance and Optional AD&D Insurance through payroll deductions for yourself, your spouse and/or your eligible dependent children.	

↓

Prescription Drug 4 options plus Opt-out*	Extended Health Care 3 options plus Opt-out*	Dental Care 3 options plus Opt-Out*
Bimbo Canada gives you flex credits that you can use towards the cost of drug, health and dental options.		
*You must have couple or family coverage under your spouse's plan in order to opt-out.		

↓

Health Care Spending Account (HCSA)	Personal Spending Account (PSA)	Group Registered Retirement Savings Plan (RRSP)*
Unused flex credits may be allocated to HCSA, PSA and/or Group RRSP.		

*Requires a minimum of \$60 of unused flex credits per year and you must have a Manulife Group RRSP account open. If you have not already done so, please complete the Manulife Group RRSP application form. Completed forms can be scanned (both sides) and sent to the Bimbo Canada Pension & Benefits Centre at CBPBC@grupobimbo.com.

If your Group RRSP application form is not received by Manulife, your remaining flex credits will be allocated to your Health Care Spending Account (HCSA).

If the cost of the prescription drugs, extended health care and dental options you choose is more than your available flex credits, you pay the difference through payroll deductions. If the cost is less than your available flex credits, or if you opt-out, you may direct the unused flex credits to the options noted above. Once allocated, the credits are converted to the equivalent dollar amounts.

prescription drugs

	Bronze	Silver	Gold (default coverage)	Platinum
Deductible	\$3,000	None	None	None
3 Tiered Coinsurance	Tier 1 - 70% Tier 2 - 40% Tier 3 - 20% Special Authorization - 70%	Tier 1 - 70% Tier 2 - 40% Tier 3 - 20% Special Authorization - 70%	Tier 1 - 80% Tier 2 - 50% Tier 3 - 30% Special Authorization - 80%	Tier 1 - 100% Tier 2 - 70% Tier 3 - 50% Special Authorization - 100%
Out of Pocket Maximum	\$3,000 per benefit year	\$1,200 per benefit year	\$500 per benefit year	No applicable maximum
<small>100% reimbursement of Tier 1 and Special Authorization drug claims, once applicable out of pocket maximum is reached for Bronze, Silver and Gold. Tiered reimbursement comes into effect after the \$3,000 associate paid deductible is satisfied under the Bronze option.</small>				
Fertility	No coverage	\$5,000 per lifetime	\$10,000 per lifetime	\$15,000 per lifetime
Smoking Cessation	No coverage	\$500 per lifetime	\$500 per lifetime	\$500 per lifetime
Sexual Dysfunction	No coverage	\$500 per benefit year	\$500 per benefit year	\$500 per benefit year
Anti-Obesity	No coverage	\$500 per benefit year	\$500 per benefit year	\$500 per benefit year

*For residents of Quebec, any conditions under this plan that do not meet the requirements under the Quebec drug insurance plan (RAMQ) are automatically adjusted to meet those requirements. The Bronze plan does not meet the requirements for RAMQ. Prescription drug coverage must also be extended to an eligible spouse and dependent children as per RAMQ requirements.

PRESCRIPTION DRUG COVERAGE

My Vida drug plan provides reimbursement for drugs based on which tier they fall into. Drugs that are the best value when looking at cost and clinical effectiveness usually fall into Tier 1, with the highest reimbursement – meaning you pay less for them. If you're prescribed a drug that's not on Tier 1, there may be an alternative on Tier 1 you can speak with your doctor about. Other drugs that are also effective but at a considerably higher cost, are placed into tiers with lower reimbursements. Visit www.drugfinder.ca to quickly and easily learn what drugs are covered by the plan, identify possible alternative drugs that could cost you less. You will need to create an account and enter as MYVIDA@reformulary as the company access code.

Special Authorization: It's now standard practice for insurers to assess reimbursement for some specialty products, but the process is simple for you.

- You and your doctor will be required to fill out and return the special authorization form provided by Sun Life. Given the confidential nature of your information, Sun Life will issue their response to you in writing.
- If approved, you'll be reimbursed at the highest level (Tier 1).



extended health care

	Silver	Gold (default coverage)	Platinum
Coinsurance	70%	80% (100% for Hospital and Vision)	100%
Private Duty Nursing	No coverage	\$10,000 per benefit year	\$20,000 per benefit year
Semi-Private Hospital	No coverage	\$5,000 per benefit year	Unlimited
Paramedical Practitioners Acupuncturist, Athletic Therapist, Audiologist, Chiropractor, Dietician, Naturopath, Osteopath, Physiotherapist, Podiatrist or Chiropodist, Occupational Therapist	\$500 per benefit year combined	\$1,000 per benefit year combined	\$1,500 per benefit year combined
Massage Therapist	\$250 per benefit year subject to the above combined maximum	\$500 per benefit year subject to the above combined maximum	
Psychologist, Social Worker, Speech Therapist	\$500 per benefit year combined	\$1,000 per benefit year combined	\$1,500 per benefit year combined
Medical Equipment & Supplies	Included	Included	Included
Orthotic Devices & Orthopaedic Shoes	No coverage	\$400 per benefit year	\$500 per benefit year
Hearing Aids	No coverage	\$500 every 5 years	\$1,000 every 5 years
Vision Care	No coverage	\$250 every 24 months	\$400 every 24 months
Eye Exams	1 every 24 months	1 every 24 months	1 every 24 months

dental care

Coinsurance	Silver	Gold (default coverage)	Platinum
Basic Services	70%	80%	100%
Major Restorative	No coverage	50%	60%
Orthodontics (Children under 18)	No coverage	No coverage	50%

Maximums	Silver	Gold (default coverage)	Platinum
Basic Services	\$1,200 per benefit year	\$2,000 per benefit year combined	\$3,000 per benefit year combined
Major Restorative	No coverage		
Orthodontics (Children under 18)	No coverage	No coverage	\$3,000 per lifetime

Fee Guide	Silver	Gold (default coverage)	Platinum
Recall Exam (Adult 16+)	1 every 9 months	1 every 9 months	1 every 9 months
Recall Exam (Child under 16)	1 every 6 months	1 every 6 months	1 every 6 months
Scaling and Root Planing	8 units per benefit year	10 units per benefit year	12 units per benefit year

emergency out of province/country

	Silver	Gold (default coverage)	Platinum
Coinsurance		100%	
Maximums		\$3,000,000 per lifetime	
Number of Days Limited		60 days per trip	

health care spending account (HCSA) and/or personal spending account (PSA)

Allocation

Amount varies based on excess flex credits

total health EAP

Your Total Health EAP benefit program includes;

- Humanacare - Employee Assistance Program
- People Connect - Mental Health Assessment Tool
- Maple - On demand virtual physician care
- Headspace - Personal wellness app
- PocketPills - Online prescription, order and delivery



**Available 24 hours a day,
7 days a week at:**

1.833.527.0465
Humanacare.com

HEALTH CARE SPENDING ACCOUNT (HCSA)

The Health Care Spending Account (HCSA) can be used to pay for Health and Dental expenses that are not covered under your benefit program, such as:

- coinsurance, deductibles or dispensing fees
- vision care, paramedical practitioner or orthodontics
- any Health or Dental expenses in excess of maximum coverage amounts
- medical expenses for eligible dependents recognized under the Income Tax Act

To verify if an expense is eligible visit the CRA website at www.cra-adrc.gc.ca. Please note benefits paid from the HCSA are considered taxable income in Quebec.

PERSONAL SPENDING ACCOUNT (PSA)

The personal spending account provides reimbursement for eligible expenses that promote the well-being of eligible associates and their dependents. Expenses may include:

- fitness related services and equipment
- health-related service
- work-life balance – child-care, elder-care expenses

Benefits paid from the PSA are considered taxable income. Claims paid from your PSA will be reported on your pay stub on a quarterly basis.

At the end of the benefit year, any credit balance remaining in your HCSA will be lost. However, if your eligible expenses exceed the available credits in your HCSA, you may carry forward the unclaimed expenses and claim them in the following benefit year.

life and accidental death & dismemberment insurance

benefit schedule*	2x annual earnings
life maximum	\$2,000,000
AD&D maximum	\$2,000,000
reduction schedule	none
termination	age 70 or earlier retirement

*level down option – you may choose to level down to a 1x annual earnings to increase your remaining flex credits.

optional life insurance

(please confirm smoking status on the bimbo Canada Benefits Administration Portal (Flexit360) when applying for optional life insurance as the tool automatically defaults all Associates to smoker status.)

associate benefit schedule	units of \$10,000 to a maximum of \$800,000
non-evidence maximum	\$40,000 for new hire
spousal benefit schedule	units of \$10,000 to a maximum of \$200,000
each child benefit schedule	flat amount of \$5,000
termination	age 70 or earlier retirement

optional accidental death & dismemberment insurance

associate benefit schedule	units of \$10,000 to a maximum of \$350,000
family benefit schedule	Spouse - 60% each dependent child – 15% (20% if there is no spouse)
termination	age 70 or earlier retirement

BENEFICIARY DESIGNATION

You should review your beneficiary designation from time to time to ensure that it reflects your current intentions. If no beneficiary has been designated your benefit will be payable to your estate and subject to additional taxes and delays. For Quebec residents, it is your responsibility to determine if you previously designated an irrevocable beneficiary when submitting a new form.

SUN LIFE FINANCIAL

Sun Life is available to assist you with any claims related questions.

Member Website

- mysunlife.ca
- access claims details
- view your benefits booklets
- submit your claims online
- sign up for direct deposit
- access electronic versions of benefit and travel cards

Mobile App

- submit claims
- access personalized coverage information
- locate the nearest service provider
- drug eligibility search
- download benefit and travel cards

Customer Care Centre

1.800.361.6212
Monday – Friday, 8am-8pm EST
Contract Number: 150897
Have your member ID available

Claims must be submitted 90 days after the end of the benefit year during which a person incurs the expenses, or 90 days upon termination of coverage.

BIMBO CANADA CONTACT CENTRE

If you require changes to your benefits coverage, dependent(s) and beneficiary(ies), have questions related to your Group Benefits Plan or require support in accessing the Bimbo Canada Benefits Administration Portal (Flexit360), please contact the Bimbo Canada Dedicated Contact Centre at People Corporation. You can contact the Bimbo Canada Dedicated Contact Centre at People Corporation by calling 1.833.527.0465 or by email to bimbo canada@peoplecorporation.com.

short term disability

benefit schedule	100% of base salary for the first 6 weeks 70% of base salary for the remaining 20 weeks
benefit period	26 weeks

long term disability

benefit schedule*	60% of the first \$10,000 salary, plus 45% of remaining monthly base salary
maximum	\$20,000 per month
non-evidence maximum	\$16,000 per month
elimination period	26 weeks
definition of disability	24 months own occupation, any occupation thereafter
tax status	non-taxable
termination	age 65 or earlier retirement

*Level down option – you may choose to level down coverage to 50% of base salary. As this is an associate paid benefit, leveling down will decrease your payroll deduction amount.

business travel accident insurance

associate benefit schedule	3x basic earnings
	associates automatically receive company paid business travel accident insurance in the event of accidental death or other eligible losses while you are travelling on company business.
termination	age 70 or earlier retirement