



Flexible Benefits Program Guide

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Welcome

We're proud to offer a competitive-to-market flexible benefits program at Sysco!

You have the choice of three health and dental options with different levels of coverage and two long-term disability options. We also offer basic life, basic accidental death and dismemberment insurance (AD&D) and short-term disability coverage, as well as optional insurance alternatives – giving you choice and flexibility.



How to use this guide

Navigation bar

Use the navigation bar across the top of each page to click the topic of your choice and go there instantly. The blue buttons are the main sections and the green buttons are sub-sections within them.

Internal and external links

Click on any underlined words to move to the corresponding section of the guide for more details on that topic or to connect to an external link.

Navigate between pages

Click the left and right arrows at the top right of each page to go forward or back in numeric order. Click the HOME button (n) to jump to the Contents page with a list of all topics.

TIP: For best viewing: Open this PDF in Acrobat Reader. If you click an external link in a browser, just hit your back button to return to this PDF.



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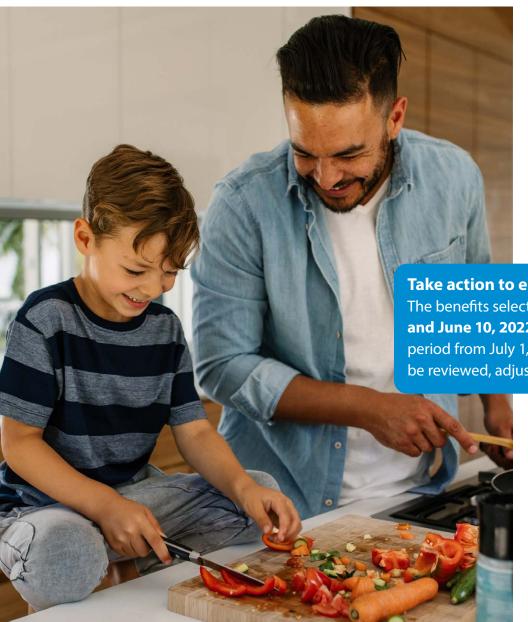
Moving to biennial enrolment

Additional flexibility

Holding the line on premiums

LTD cost reduction

Additional mental health support



Read me first!

We're moving to biennial enrolment

New this year, following a careful analysis of our benefits program and the re-enrolment habits of our associates, we're changing our benefits enrolment period from once every year to once every two years. This will simplify our benefits program administration.

Take action to enrol!

The benefits selections you make between May 30 and June 10, 2022, will be in effect for a two-year period from July 1, 2022 to June 30, 2024. Rates will be reviewed, adjusted and communicated annually.

MAY 30 **JUNE**

The benefit choices you make this year can only be changed during the next open enrolment period in 2024, or if you experience a qualifying life event in the meantime. Take some time to ensure you select the benefits coverage that will best meet your needs over the next two years.



Check out our enrolment video for a quick refresh on your options.



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Additional flexibility

- You can move up or down in your level of coverage following a <u>qualifying</u> <u>life event</u>. Previously, you could only add or remove dependents during a life change event but could not adjust your level of coverage.
- The age restriction limiting eligibility has been removed from our health and dental coverage, Employee and Family Assistance Program and short-term disability program.

Holding the line on premiums!

- To better support our associates through the pandemic, for the third consecutive year, Sysco is not passing along cost increases for health and dental coverage to you. For the 2022/2023 plan year, from July 1, 2022 to June 30, 2023, Sysco will assume all increases in health and dental costs and will not be passing these along to you.
- There will be no per pay cost increases for health and dental coverage.

LTD cost reduction!

• Following Sysco's successful negotiations for a discounted rate with our provider, you'll see a 5% reduction in costs for your choice of Core or Enhanced <u>long-term disability coverage</u>.



Additional mental health support

• If you or your eligible dependents face anxiety or depression, starting in July, you'll have additional support through our new provider, <u>Tranquility by Inkblot</u>. Through Tranquility's interactive learning modules, tools and coaching, you'll have support to develop positive coping strategies to help you feel better. While there is an additional fee for their services, Tranquility is an eligible paramedical expense.



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Your enrolment checklist

- ✓ Between May 30 and June 10 log into the <u>Benefits Café</u> to enrol.
 - **Tip:** You can use the kiosks at your location or your personal device to enrol.
 - If you're not at work during enrolment, or need help accessing the enrolment tool outside of ADP, contact HR to set up your account with your personal email address.
- ✓ Ensure your eligible dependents are covered.
 - Open enrolment is the only time you may add or change your eligible dependents, unless you experience a gualifying life event.
- Check your Health Care Spending Account (HCSA) or Personal Spending Account (PSA) flexible spending dollar balance.
- ✓ Use any unused flexible spending dollars by June 30, 2022 or you will lose them.

- Enrol in the options that will work best for you over the next two years.
 - Think about planned health and/or dental procedures for you or your dependent children.
 - Consider if you have enough or too much coverage, based on what you spent last year.

REMINDER: The health and dental options come as a "bundle." The Coordination, Core or Enhanced option you choose for health will also be your dental option for you and your eligible dependents.

- ✓ Maximize your reimbursements by co-ordinating benefits with your partner/spouse.
 - If you can submit your medical and dental claims through both programs for up to 100% reimbursement, consider enrolling in an option with lower coverage levels and lower costs. See FAQs for more details.

Enrolment is mandatory!

Even if you wish to keep your current coverage, enrolment is mandatory.

Take a moment to log into the <u>Benefits</u>
<u>Café</u> to confirm your benefit selections, check that your eligible dependents are covered, and ensure your personal information and online beneficiary designations are up-to-date. See the <u>step-by-step instructions</u> for help enrolling.



Scan this QR code to log into the Benefits Café





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What happens if you don't enrol?

If you don't enrol between May 30 and June 10, 2022, you'll default to the same **health and dental coverage** you currently have, based your current dependents on file (i.e., Associate only, Associate + 1 or Associate + 2 or more dependents). **Your coverage will be locked-in for the next two plan years, unless you experience a qualifying life event in the meantime.**

Take action to enrol in your choices to ensure coverage and associated costs will best meet your needs for the next two years!

Opting out of coverage

You can opt out of health and dental coverage altogether, if you have proof of coverage under another program, such as your spouse's program. If you take this route, you won't have any payroll deductions and you won't receive any flexible spending dollars.

If you opt out, you'll only be able to enrol, if you have a qualifying life event. Outside of a qualifying life event, associates who have previously opted out will need to complete a health screen before being allowed to enrol. Coverage in the program would only be effective as of the date Green Shield approves your application.

Qualifying life events

Starting on July 1, 2022, your selections will be locked-in for two years. However, if you experience a qualifying life event between biennial enrolment periods – within 31 days of your life event change – you may add or remove dependents and:

- · Add coverage, if you had originally opted out.
- Move up or down in coverage levels, if you already have coverage.

Qualifying life events include:

- · Birth or adoption of a child
- · Change in marital status
- Loss or gain of spouse's or partner's coverage
- Loss of dependent child coverage
- Death of a dependent

You have **31 days** from the date of the event to register a qualifying life event or you can register your life event change after 31 days with an approved health screen. Otherwise, you will have to wait until the next open enrolment period to change your coverage.

Log into the Benefits Café to register a qualifying life event.



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Step-by-step enrolment instructions

Log into the Benefits Café to access the "Login" page for Flexit360, the enrolment tool.

Benefits Café

Scan this QR code to log into the

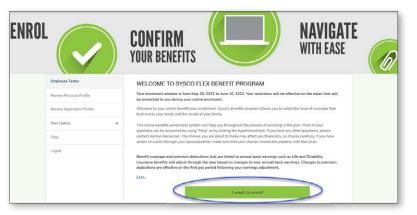
Enter your Login ID.

- ✓ This is your nine-character associate ID that includes both numbers and letters and is located near the bottom of your pay statement.
- ✓ Enter your password to start the enrolment process.

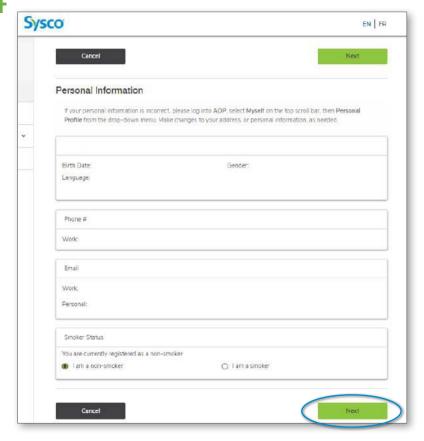
How to re-set your password

- ✓ Click the "Forgot/Need my Password."
- ✓ To re-set your password, you will need to have a personal or company email address set up in ADP.
- ✓ You'll receive a temporary password via email that you can reset by following the simple instructions.

Once you are logged in, select "I want to enrol."



Review your personal information, update if needed and select "Next."





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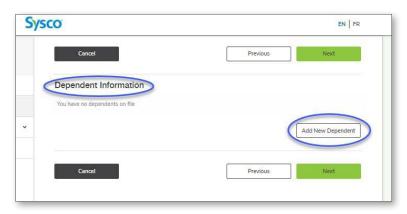
Opting out

Step-by-step Instructions

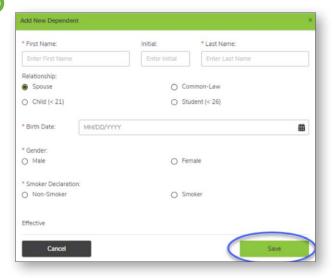
Step-by-step enrolment instructions (continued)

∇erify/update your dependent information.

✓ Complete additional information about dependents you wish to add.



Click Save.



7 Choose your options.

- ✓ The tool will pre-populate with your default options based on your current health and dental and LTD coverage.*
- ✓ Check the applicable boxes if you wish to make changes that will be effective from July 1, 2022 to June 30, 2024.
- ✓ Click Next.
- * Note: If you wish to move up to Enhanced LTD, you'll need to complete and submit a detailed health statement to Sun Life for approval.





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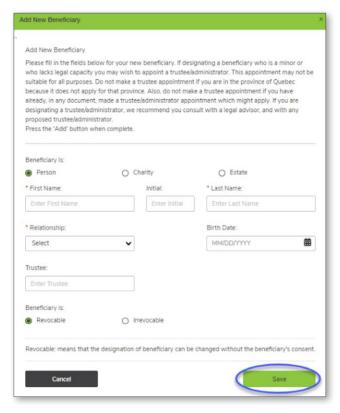
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Step-by-step Instructions

Step-by-step enrolment instructions (continued)

- Provide your life insurance beneficiary information.*

 Click Save.
 - * Note: The beneficiary you select for Basic Life Insurance will also apply to Basic AD&D Insurance.



9 Select your choice of AD&D insurance.

✓ Click Next

Flex S Av			Remaining		ay Deductions
\$150.00	~	\$0.00		\$17.63 🗸	
ssociate	AD&D Insurance	0			
Option 1	\$30,000.00				0
	Annual Cost \$0.00		Flex \$ Applied \$0.00		Per Pay \$0.00
30,000					
Optional A	AD&D Insurance	- Associate (9		
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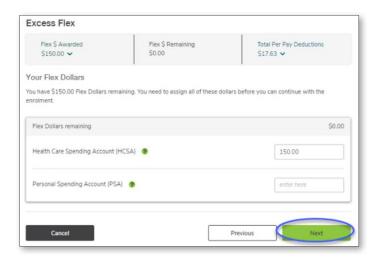
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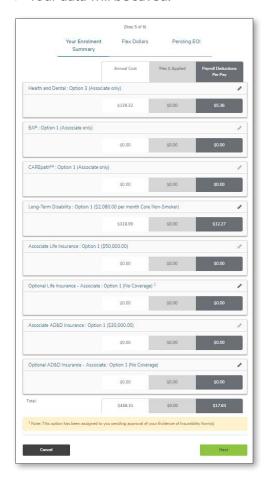
Step-by-step Instructions

Step-by-step enrolment instructions (continued)

- Allocate your flex dollars to your Health Care Spending Account and/or your Personal Spending Account, if you are enrolling in the Coordination or Core option.
 - ✓ Click the ? icon if you have questions.
 - ✓ Click Next.



- **1** Review your enrolment summary.
 - ✓ You may go back and make changes, including logging out and returning later during the enrolment window.
 - ✓ Your data will be saved.



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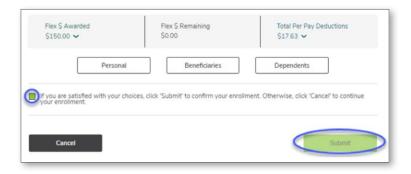
Opting out

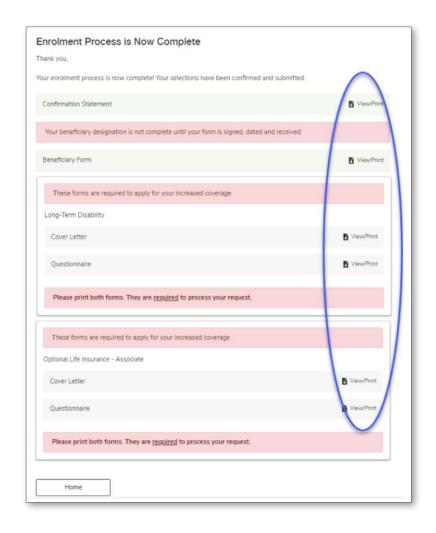
Step-by-step Instructions

Step-by-step enrolment instructions (continued)

1 Click "Submit" to submit your final selections.

- Your enrolment process is now complete.
 - ✓ Print a copy of your Confirmation Statement.
 - ✓ Submit a copy of your signed and dated Beneficiary Form to HR as instructed on the form, to complete your beneficiary designation request.
 - ✓ Submit your Long-Term Disability Cover Letter and Questionnaire as instructed for processing your request if you are increasing coverage.
 - ✓ Submit your Optional Life Insurance Cover Letter and Questionnaire as instructed for processing your request.







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Flexible Benefits Program

Who's eligible

Under the flexible benefits program – in addition to picking the Coordination, Core or Enhanced health and dental option that best fits your needs – you select from three levels of coverage.

Each level covers a different number of dependents, such as your spouse and any dependent children, as illustrated below.

Three levels of coverage:



Associate only



Associate + 1 dependent





Associate + 2 or more dependents



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Health coverage

Here's a summary of what's available under each option. Maximums noted are per covered person.

HEALTH	Coordination	Core	Enhanced	
Prescription drugs	No coverage	80% generic	90% generic	
		70% brand name	80% brand name	
Dispensing fee	No coverage	Associate paid (not applicable in Quebec)	Associate paid (not applicable in Quebec)	
Smoking cessation	No coverage	One 12-week trial of Zyban or Champix every benefit year, plus optional pharmacy coaching	One 12-week trial of Zyban or Champix every benefit year, plus optional pharmacy coaching	
Vision	No coverage	100%	100%	
• Eye exams	No coverage	\$60 per exam	\$90 per exam	
Prescription glasses, contacts, and laser eye surgery	No coverage	\$100 every 24 months	\$250 every 24 months	
Hospital accommodation	70% for semi-private	80% for semi-private	90% for semi-private	
Paramedical services	No coverage	80%	90%	
• Practitioners include: chiropractor, chiropodist or podiatrist, naturopath,		\$500 combined maximum for all practitioners*	\$1,000 combined maximum for all practitioners*	
homeopath, osteopath, athletic therapist, acupuncturist, registered massage therapist, master of social work (MSW), physiotherapist, speech therapist and psychologist		*Claims for services of Dieticians who are part of Green Shield's Dietician Health Coaching Program (located at participating grocery stores) can accumulate toward the combined paramedical services maximum.		

Did you know...

Generic drugs are equivalent to brand-name drugs. They contain the same active ingredients in the same amount. The main differences are the fillers and non-medical ingredients, colours, packaging and, most significantly, the cost.

You can reduce your own out-of-pocket costs by asking your doctor to prescribe a generic equivalent drug, if available.



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Health coverage (continued)

HEALTH	Coordination	Core	Enhanced
Medical supplies and services	70%	80%	90%
Custom made foot orthotics	Maximum of \$400 every 12 months	Maximum of \$400 every 12 months	Maximum of \$400 every 12 months
 Diabetes supplies 	70% (excluding pump)	80% (excluding pump)	90% (excluding pump)
• Hearing aids	Maximum of \$300 every three years	Maximum of \$300 every three years	Maximum of \$300 every three years
Private duty nursing	Maximum of \$10,000 per benefit year; \$25,000 lifetime maximum	Maximum of \$10,000 per benefit year; \$25,000 lifetime maximum	Maximum of \$10,000 per benefit year; \$25,000 lifetime maximum
Ambulance	With paid receipt or written request to pay hospital directly	With paid receipt or written request to pay hospital directly	With paid receipt or written request to pay hospital directly
Out-of-country travel	100%	100%	100%
	60 day trip limit, \$1,000,000 every 12 months	60 day trip limit, \$1,000,000 every 12 months	60 day trip limit, \$1,000,000 every 12 months
Out-of-pocket maximum (excludes vision, hospital and out-of-country travel)	None	100% after reaching \$2,000 of out of pocket allowed/ reasonable & customary	100% after reaching \$1,000 of out of pocket allowed/reasonable & customary
		expenses	expenses



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Here's a summary of the dental coverage available under each option. Maximums noted are per covered person.

DENTAL	Coordination	Core	Enhanced
Recall exams	No coverage	Every 6 months	Every 6 months
Basic preventative services	No coverage	80%	90%
Major restorative services	No coverage	50%	50%
Maximums	No coverage	\$1,000 combined for basic preventative and major restorative services	\$1,500 for basic preventative services and \$1,500 for major restorative services
Orthodontics for dependent children	No coverage	No coverage	50% with a \$1,500 lifetime maximum





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Flexible Spending Dollars

If you select either the **Coordination** or **Core** coverage option during open enrolment, you'll receive an annual allocation of flexible spending dollars for the coming plan year, starting July 1, based on the level of coverage you choose and the number of dependents you cover, as shown below.

On July 1, 2023, you will receive your annual allocation of flexible spending dollars for the 2024 plan year based on the selections you made during open enrolment 2022.

	Coordination	Core	Enhanced	Opt out
Associate only	\$250	\$150	None	None
Associate + 1	\$500	\$300	None	None
Associate + 2 or more	\$750	\$450	None	None
dependents				

If you choose to opt out because you have proof of coverage elsewhere (such as through your spouse's or partner's program), you won't receive an allocation of flexible spending dollars.

If you still have unused flexible spending dollars in your HCSA and/or PSA, you must use these by June 30, 2022 or you will lose them!



Did you know...

Our records show that 48% of associates are leaving money on the table because they don't use all of their flex spending dollars!





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Here's how flexible spending dollars work:

If you enrol in either the Coordination or Core coverage, you have two options for using your flexible spending dollars and you don't have to pick just one option. They're the:

- Health Care Spending Account (HCSA)
- Personal Spending Account (PSA)

Here's an overview of how each account works:

Health Care Spending Account (HSCA)

- Covers premiums or medical, prescription, dental and vision expenses not covered under the base program, along with other eligible expenses as defined by the <u>Canada Revenue Agency</u>
- Submit claims online or by paper
- Amounts are considered a taxable benefit* for Quebec associates – added to Relevé 1 – not taxable for all other associates
- Dollars must be used in the benefit year in which they are given, or they will be lost

Personal Spending Account (PSA)

- Covers fitness, sports and wellnessrelated expenses, for example, workout equipment and classes
- Submit claims online or by paper
- Amounts are considered a taxable benefit* for all associates – added to T4 or Relevé 1
- Dollars must be used in the benefit year in which they are given, or they will be lost

^{*} When flexible spending dollars are considered a taxable benefit, associates will see the taxes deducted from their pay.





Did you know...

You can use flexible spending dollars in your Personal Spending Account to cover fitness-related expenses. Submit your claims before June 30, 2022!





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Wellbeing Benefits

Employee and Family Assistance Program (EFAP)

If you or your eligible dependents need support, take advantage of the Employee and Family Assistance Program (EFAP), a company-paid, confidential resource, provided by HumanaCare.

You and your dependents can contact HumanaCare at any time, 24/7, for assistance regarding mental health, stress management, relationships, financial management, financial advice, wellness coaching and much more!

When you contact HumanaCare, you will be assigned a dedicated registered nurse who will be your Care Specialist point of contact throughout your entire service experience and will have your confidential case history readily available.



To learn more about the services or to contact HumanaCare, <u>click here</u>, scan this QR code, or phone 1-800-661-8193. Use Sysco code: SY04162.

Access to virtual care

Starting June 1, 2022: Connect with a doctor online through Maple Instead of visiting a doctor in person, Maple's virtual care service lets you and your eligible dependents access a network of over 1,000 Canadian licensed physicians virtually.

Maple offers you the following confidential services:

- An instant virtual connection to a doctor, available in English or French, through web or mobile app
- The choice to use text, audio or video to chat securely with a doctor for advice to safely and accurately diagnose and address the majority of common illnesses and medical issues that you might otherwise visit a doctor in person to discuss
- Digital health records for managing your own health data, digital prescriptions, lab and imaging requisitions

Maple is included in Sysco's core benefits. There is no cost to you if you and/ or your eligible dependents use this service.



Starting June 1, 2022, to register for Maple, visit <u>getmaple.ca/greenshield</u> or scan this QR code. Enter your date of birth and GSC ID number. After registering, you'll be able to access General Practitioners on Maple on an unlimited basis.



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Wellbeing Benefits (continued)

Pocketpills: Brings the pharmacy to your doorstep!

To save you time and money when filling prescriptions, access Pocketpills, a full-service digital pharmacy.

With Pocketpills, you'll get free delivery of your pre-sorted, easy-to-open, prescription medications and vitamins, and save money with a low dispensing fee. You may chat, text, call or email the Pocketpills pharmacy team any time.

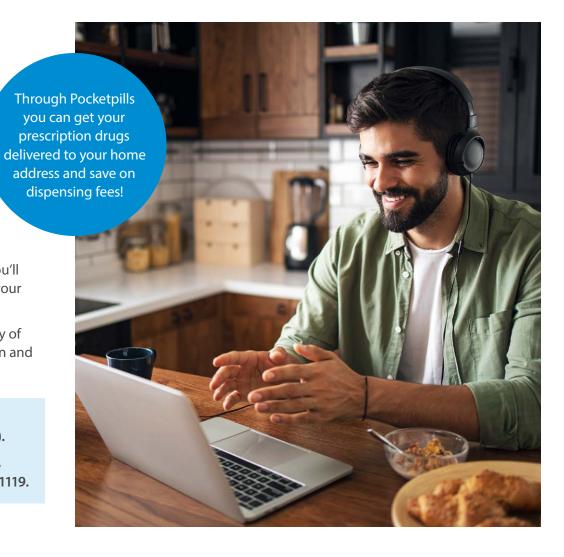
Transferring your existing prescriptions from other pharmacies is easy. Pocketpills will contact your doctor to manage your refills. Your claims can be easily coordinated with our drug plan with Green Shield and you'll be reimbursed based on your current drug coverage for yourself and your eligible dependents.

If you are a caregiver, you can add family members to track the delivery of their medications from your phone or online and view their medication and history on their behalf.



Visit <u>pocketpills.com/gsc</u> or scan this QR code to register or call 1-833-HELLO-RX (1-833-435-5679).

For more information about your drug coverage, contact Green Shield Canada (GSC) at 1-888-711-1119.





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Wellbeing Benefits (continued)

Phzio Canada: Virtual physiotherapy

Through the Phzio Canada's Phzio platform, you can connect with a registered physiotherapist using a virtual experience – at a discounted price as a Green Shield Canada (GSC) plan member!

How it works

During a live video call on the Phzio platform, a registered physiotherapist will complete a 30–40 minute evaluation/assessment to determine if a virtual experience is right for you and your medical condition/issue.

If you're a good fit, Phizo's registered physiotherapist will create a customized treatment plan for you and will monitor your progress along the way.

You and your eligible dependents have access to exclusive discounted rates of \$59.00 for the initial 30–40 minute evaluation/assessment and \$49.00 for each follow-up visit. Reimbursement is subject to your existing physiotherapy coverage limitations.

Check your benefits plan coverage for physiotherapy treatment before you book your appointment. You'll only pay out-of-pocket for the amount not reimbursed by your benefits plan, and you won't need to submit a claim since your Phzio physiotherapist will submit your claim directly to GSC following your virtual visit.



Click <u>here</u> or scan this QR code to visit Phzio Canada's MSK360 portal to:

- Book your assessment and
- Access a range of free self-service resources, including videos featuring stretches and best practices for creating an ergonomically correct workspace to address and prevent musculoskeletal issues.

Additional mental health support

Tranquility by Inkblot uses internet-based Cognitive Behavioral Therapy (iCBT) to help people with mild to moderate anxiety and depression take control of their mental health.

By accessing immediately available, interactive learning modules, tools and coaching, you, your spouse or eligible dependents, age 15 or older, can develop coping strategies to help you feel better from the comfort of your home. You'll

learn how thoughts and behaviours impact mood and will learn strategies to manage and reduce symptoms.

A self-guided program is available for \$75 + applicable taxes, or a coach-assisted program for \$325 + applicable taxes for Green Shield plan members in Canada. These costs may be fully, or partially, covered through your benefits plan, based on your coverage.



Visit <u>tranquility.app/gsc</u> or scan this QR code for more information.

New to
Sysco Green Shield
members this year:
mental health support
from Tranquility by
Inkblot!



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Insurance

Basic life*

This insurance is part of your core benefits.



1× your base salary

It reduces to 50% when you reach age 65 and ends at age 70 or when you leave the company or retire, whichever is earlier

Basic AD&D

Basic accidental death and dismemberment (AD&D) insurance is another core benefit.

Coverage

\$30,000 flat amount paid as lump sum

It reduces to 50% when you reach age 65 and ends at age 70 or when you leave the company or retire, whichever is earlier

Optional insurance

During open enrolment, you can buy optional life and accidental death and dismemberment (AD&D) insurance for you and your eligible dependents. This is a great time to gauge your risk tolerance and take a longer-term view of your needs. Ask yourself, do I have enough insurance?

Purchasing optional life and/or AD&D insurance coverage helps you prepare for the unexpected and gives you the peace of mind that you could still take care of those who matter most to you.

- Life insurance provides a lump sum payment to your beneficiaries in the event of your death.
- AD&D insurance provides a lump sum payment to you, if you are seriously hurt in an accident, or to your beneficiaries, in the event of your accidental death.

With completion of a health screen application and approval by Sun Life, you can purchase optional life insurance in addition to the basic coverage Sysco provides.

Optional life insurance

Coverage

- For you and your spouse Units of \$10,000 to a maximum of \$500,000
- For your dependent children \$5,000, \$10,000 or \$15,000 (one premium insures all eligible dependent children regardless of the number of children you have)

Coverage ends when you reach age 65, or when you leave the company or retire, whichever is earlier

If you'd like optional AD&D insurance above the company-paid basic accident insurance, it's available through AIG.

Optional Accidental Death and Dismemberment (AD&D) insurance

Coverage

- For you and your spouse Units of \$10,000 to a maximum of \$500,000
- For your dependent children
 A flat amount of \$10,000 for dependent children

Coverage reduces to 50% when you reach age 65 and ends at age 70 when you leave the company or retire, whichever is earlier

^{*}If you experience an earnings adjustment during the year, any benefit coverage changes for basic life insurance that are linked to your annual basic earnings will adjust automatically, based on changes to your annual basic earnings.



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Disability Coverage

Short-term disability

Short-term disability (STD) coverage also falls under core benefits.

Disability period (as of date of Disability)	STD benefit amount of base salary	Method of Payment
First 7 consecutive calendar days of Disability	100%	Through regular payroll for the
8 th consecutive calendar day of Disability to the 4 th consecutive week of Disability	70%	duration of your STD leave, once approved by
5 th consecutive week of Disability to end of 26 weeks (or 182 calendar days) of Disability	65%	the Disability adjudicator



Long-term disability

You select from two long-term disability (LTD) options – Core or Enhanced – and pay the premiums. Both options include a monthly maximum benefit of \$15,000.

Because you pay the premiums for your coverage, if you go on LTD, you won't have to pay any income tax on the monthly benefit you would receive. See page 23 for details on costs and below for more on the two LTD options.

If you go on LTD, your income from all sources (including government payments) can't be more than 80% of your pre-disability income.

During open enrolment, you can move down from Enhanced to Core level coverage. If you want to move up from Core to Enhanced, you'll need to complete a health screen application that must be approved by Sun Life before your coverage can be changed.

	Core	Enhanced	
Coverage	50% of your monthly income	60% of the first \$2,500 of your monthly income, <i>plus</i> 40% of your remaining monthly income (with cost-of-living adjustments)	
Maximum Duration	Five years	Up to age 65	
Definition of disability	continue if you're unable to peroccupation. After 24 months of	ing the first 24 months of disability, your LTD benefits will tinue if you're unable to perform the duties of your own upation. After 24 months of disability, your LTD benefits continue if you're unable to perform any occupation.	



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Note: Although

your choices will

be locked-in for two

years, the rates are

subject to change

annually.

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Health and dental

For the 2022/2023 plan year, from July 1, 2022 to June 30, 2023, Sysco will assume all increases in health and dental costs and will not be passing these along to you. As a result, there will be no per pay cost increases for health and dental coverage.

The three health and dental options have different costs. The level of coverage you choose

- Associate only, Associate +1 dependent or Associate +

2 or more dependents – also affects the cost of the option you choose. You can model your costs on the enrolment tool before you submit your final selection.

Your health and dental costs will depend on:

• The health and dental option you choose and your level of dependent coverage.

Starting with your first pay in July, you'll see the following deductions plus, if applicable, provincial sales tax.

If you're on a **bi-weekly** pay:

	Coordination	Core	Enhanced
	You pay	You pay	You pay
Associate only	\$2.00	\$5.36	\$19.00
Associate + 1	\$4.00	\$10.60	\$ 34.00
Associate + 2 or more dependents	\$6.00	\$15.86	\$ 47.00

If you're on a weekly pay:

	Coordination	Core	Enhanced
	You pay	You pay	You pay
Associate only	\$ 1.00	\$ 2.68	\$ 9.50
Associate + 1	\$ 2.00	\$ 5.30	\$17.00
Associate + 2 or more dependents	\$ 3.00	\$ 7.93	\$ 23.50



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Long-term disability rates

Good news! Your long term disability rates are decreasing by 5%!

- Your long-term disability costs will depend on your choice of long-term disability coverage (Core or Enhanced).
- Your annual salary is used to determine your premiums*.
- See the enrolment tool for details.
- Rates are shown for \$100 units of coverage, and what you pay is determined using your base salary.

Optional insurance rates

- Any voluntary options, such as optional life insurance* or optional accidental death and dismemberment (AD&D) insurance for which you have applied must be approved.
- There are no changes this year to the rates for optional life and AD&D insurance.
- Both are available in units of \$10,000.
- What you pay for optional life insurance is determined using your age and smoking status.
- What you pay for optional AD&D insurance is determined using a flat rate.
- See the enrolment tool for details.

Tips to help manage benefits costs

- ✓ If you have coverage with your spouse's or partner's benefit program, to maximize your reimbursement, you can coordinate your benefits.
- Use your flexible spending dollars if your level of coverage offers them.
- ✓ When you're prescribed a medication, while you're still in your doctor's office, use <u>Green Shield mobile app</u> to check for lower cost alternatives.
- ✓ Consider using <u>Pocketpills</u> when filling prescriptions to save on dispensing fees.
- ✓ Order a three-month supply when filling maintenance medications to reduce dispensing fees.
- Ask your health care provider about fees and if alternative lower-cost options are available before accepting any service.
- Check how much is being billed to your benefits program and ensure that you've received the quantity and quality of items being billed.
- ✓ If you need a costly treatment (such as a major dental procedure), ask for a pre-determination of costs before the service starts. Submit this to Green Shield to confirm what the plan will cover and how much it will pay.

^{*} Benefit coverage and premium deductions that are linked to annual basic earnings such as for longterm disability coverage or optional insurance will adjust through the year based on changes to your annual basic earnings. Changes to premium deductions are effective on the first pay period following your earnings adjustment.



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During enrolment, can I pick a different selection than the one I chose last year?

Yes, you have the chance to change your health and dental option. The three options are Coordination, Core or Enhanced.

You can also change your choice of LTD coverage. You can move down from Enhanced to Core for your LTD coverage or move up from Core to Enhanced. To move up, you'll need to complete a health screen application that must be approved by Sun Life before your coverage can be changed.

Remember that unless you experience a qualifying life event between biennial enrolment periods, the choices you make when you enrol between May 30 and June 10, 2022 will be locked in for two years until June 30, 2024.



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What should I consider before enrolling?

When choosing your bundled health and dental coverage option consider:

- How much did you claim last year versus how much your premiums cost?
- What future needs are you expecting over the next two years?

 For example, if you anticipate orthodontic care for dependent children, coverage is only available under the Enhanced option.
- Are you covered under your spouse's or partner's program?
 If you can coordinate your claims between both programs to maximize your reimbursements, consider enrolling in an option with lower coverage and costs, to receive more flexible spending dollars.



Consider this:

Coordination

- Offers the lowest premium costs, the least amount of coverage and the highest level of flexible spending dollars.
- Designed to supplement coverage under your spouse's or partner's program by paying for some of the expenses that may not be covered under your other program.

Core

- Offers moderate premiums and some flexible spending dollars.
- Designed for a moderate user of the benefits program who might not need the highest coverage that's available through the Enhanced option.

Enhanced

- Offers the biggest safety net of protection and includes increased coverage for vision and coverage for orthodontics for dependent children.
- Does not provide any flexible spending dollars.

Opt Out

- If you have proof of coverage under another program, such as your spouse's or partner's, you can opt out of health and dental coverage altogether.
- If you opt out, you won't have any payroll deductions and you won't receive flexible spending dollars.



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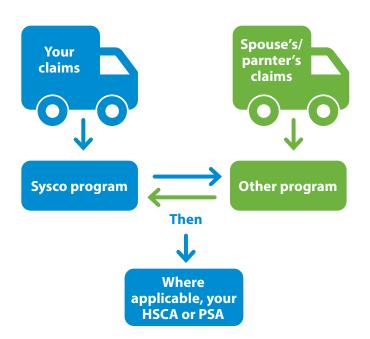
What is coordination of benefits and how does it work?

If you have coverage under another program, such as your spouse's or partner's program, you can receive up to 100% reimbursement of your claim when you submit it to both programs.

First, send the claim to the person's primary program:

- For you the Sysco flexible benefits program
- For your spouse or partner their employer program
- For your children the program of the parent whose birthday happens first in the calendar year

Then, submit the balance to the other program and, if applicable, submit any remaining eligible claims balances to your HCSA or PSA.



Example 1: You have a basic preventative dental services expense of \$200 and you're enrolled in the Enhanced option.

- You first submit the expense to Sysco's flexible benefits program and you get back \$180.
- You then submit the same expense, along with a copy of the Explanation of Benefits statement that you will receive from Green Shield, to your spouse's or partner's program for reimbursement of the remaining \$20.

Example 2: You have a prescription glasses expense of \$400 for your child and you're enrolled in the Core option.

- Your spouse's birthday is in January and yours is in September. Since your spouse's birthday comes before yours in the calendar year, you first send the expense to your spouse's program and you get back \$250.
- Then, you submit the expense along with a copy of the Explanation of Benefits statement from your spouse's carrier to Sysco's flexible benefits program and are reimbursed another \$100.
- The outstanding amount of \$50 could be submitted to the HCSA, if applicable.
- There are added rules for dependent children's claims that take custody arrangements into consideration for parents who are divorced or legally separated, and have remarried or entered new common-law relationships.

For guestion about coordination of benefits:

- Contact Green Shield at 1-888-711-1119.
- Access the plan member site at <u>GSCeverywhere.ca/login</u> to log into your account. Click Support and then click Visit Support Centre.
- You can also visit <u>greenshield.ca</u> and click Support Centre under "Take Me To."



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How is the amount that the program will reimburse for a given claim determined?

Reimbursements are based on the reasonable and customary charge for that particular expense in the area where it was incurred. For example, if Green Shield has determined that the reasonable and customary amount for a massage in Ontario is \$100* per hour, you'll receive:

- 80% of \$100 (or \$80), if you're in the Core option, or
- 90% of \$100 (or \$90), if you're in the Enhanced option.

*Notes:

- The \$100 above is for illustrative purposes only. Costs vary by region.
- There is no coverage for massage therapy under the Coordination option.

What happens if I submit a claim for an expense that's higher than the reasonable and customary reimbursement amount?

Building on the example above, if you submit a \$100 massage claim:

If you're in the	Core Option	Enhanced Option
You'll receive	80% of \$100 (\$80)	90% of \$100 (\$90)
You'll pay	\$20 (\$100 - \$80)	\$10 (\$100 - \$90)

- The amount you pay out of your own pocket will be counted toward your annual out of pocket maximum.
- If your massage claim is higher than the \$100 reasonable and customary amount, any amount you pay that's more than the recognized "copay" of \$20 or \$10 won't count toward your out of pocket maximum.
- Once you reach the out of pocket maximum for the benefit year, then the program will begin to reimburse you for 100% of your eligible expenses for the rest of the benefit year.





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If you have questions about	Go to
Your eligibility to participate in the flexible benefits program	HR
Your coverage under the program	Green Shield's plan member site at GSCeverywhere.ca/login
	to view your plan booklet or visit the <u>Benefits Café</u> . OR call Green Shield at 1-888-711-1119.

This document provides an overview of some of the provisions of Sysco's flexible benefits program, in effect July 1, 2022 through June 30, 2024. This program is governed by the official documents, such as the insurance contracts, as well as by applicable legislation. In the event of any inconsistency between this document and the official documents, the latter will prevail. Sysco Canada reserves the right to suspend, amend or terminate any or all benefits.



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