

BIG BENEFITS FOR SMALL BUSINESS



OPTIONS GUIDE



The myFlex difference

Team focused benefits

With myFlex Benefits® you can offer a competitive benefits plan with as many options as you wear hats! Your team can get access to the coverage they need and you can come in on budget.

myFlex for employers

- Attract new talent and grow your business
- Retain employees and your training investment
- Set a budget and then build your benefits
- Easily share costs with employees
- Reward your dedicated team with benefits they value
- Stabilize your costs with a 2 year renewal

myFlex for employees

- Employee engagement in the process drives higher appreciation of your contribution
- Variety of benefit options to fulfill the diverse needs of your team
- Opportunity to purchase additional benefits with payroll deductions
- Easy online benefit selections puts your contribution front and center
- Secure web account to make EZClaims and access health and wellness resources



How it works

Talk to your advisor about competitive benefit offerings for your industry and what you think your employees would value. Evaluate your budget and decide what you are willing to invest in your team’s benefits plan.

Employer (Plan sponsor)



Create the plan!

Choose a path of coverage (foundation, select or premium) within your budget for each of the 5 benefits.

- STD - FOUNDATION
- LTD - PREMIUM
- Life/AD&D - SELECT
- Dental - SELECT
- Health - FOUNDATION

Employee (Plan member)



Personalize benefits!

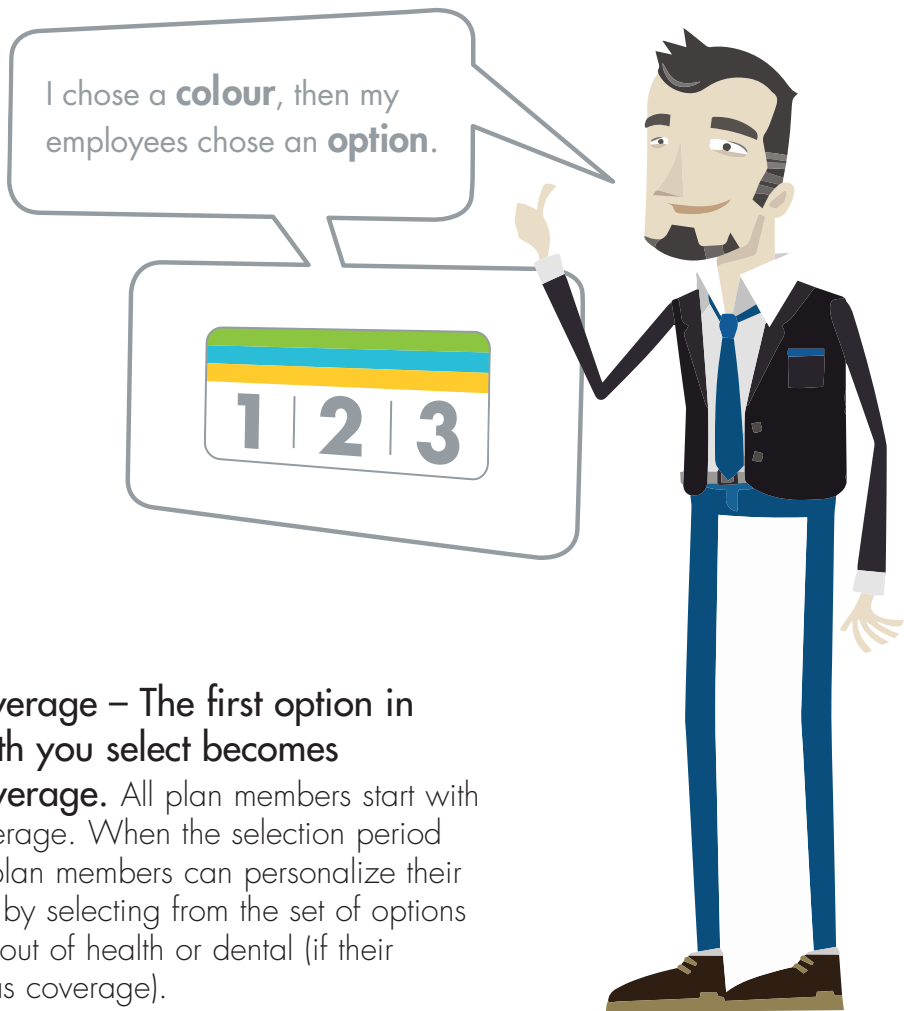
Plan members use flex dollars to make benefit selections from the set of options you choose. Any leftover flex dollars are saved in a health care spending account (HCSA).



2 years from now they can update their selections.
With exception of a life event such as marriage.

Choose a path of coverage for **each** of the **5** benefits.

Plan members select from the set of options
within the path of coverage you have chosen.



Base coverage – The first option in each path you select becomes **base coverage**. All plan members start with base coverage. When the selection period is open, plan members can personalize their coverage by selecting from the set of options or opting out of health or dental (if their spouse has coverage).



SHORT TERM DISABILITY

- If you choose to include STD in your benefits plan, plan members cannot opt out.
- Maximums with and without medical will be calculated at time of quote.

Customize your STD coverage, match it to your current plan design or choose from one of the following options.

FOUNDATION

No coverage

SELECT

67% of income	
Non-taxable benefit	17- week maximum
1st day accident	8th day sickness
Option to include 1 st day hospital coverage	

PREMIUM

70% of income	
Taxable benefit	17- week maximum
1st day accident	8th day sickness
Option to include 1st day hospital coverage	





LONG TERM DISABILITY

- If you choose to include LTD in your benefits plan, plan members cannot opt out.
- Applies to those under 65, after 119 days of absence, 6 month recurrent disability.
- The plan member must be totally disabled from his/her own occupation for the first 2 years, and any occupation thereafter.

Customize your LTD coverage, match it to your current plan design or choose from one of the following options.

FOUNDATION	
Option #1- base coverage	Option #2
Graded schedule 67% of income for the first \$3,750 50% of the remainder up to age 65 This benefit is non-taxable	50% of income for up to 5 years This benefit is non-taxable
SELECT	
Graded Schedule 67% of income for the first \$3,750 and 50% of the remainder This benefit is non-taxable	
PREMIUM	
70% of income This benefit is taxable	





LIFE/AD&D

- The selected plan design of Life Insurance will be the same value for Accidental Death & Dismemberment (AD&D).
- These are mandatory benefits that plan members cannot opt out of.

LIFE/AD&D

CUSTOM/CURRENT

Customize your Life/AD&D coverage, match it to your current plan design or choose from one of the following options.

FLAT AMOUNT

Choose a flat amount of life insurance to offer your employees.

Minimum of \$10,000

Increments of \$5,000

Maximum of \$500,000*

*Proof of earnings required for flat amounts above \$100,000

INCOME BASED

Choose an income-based benefit.

1, 2 or 3 times income

Maximum of \$500,000

Maximum without medical will be determined at time of quote.



LIFE/ACCIDENTAL DEATH & DISMEMBERMENT

OPTIONAL LIFE/AD&D

All plan members will have the option to apply for additional Life and AD&D insurance with payroll deductions.

Optional AD&D is available, and will match the chosen amount of Optional Life.

Optional Life	Spousal Optional Life	Child Optional Life
Maximum of \$500,000	Maximum of \$500,000	Maximum of \$25,000/child
Increments of \$10,000	Increments of \$10,000	Increments of \$5,000

Medical underwriting is required for all amounts of Optional Life and Spousal Optional Life.

DEPENDENT LIFE

- If you choose to include Dependent Life in your benefits plan, plan members with dependents cannot opt out.

Customize your Dependent Life coverage, match it to your current plan design or choose from one of the following options.

FOUNDATION
Spouse amount: \$5,000 Child amount: \$2,500
SELECT
Spouse amount: \$10,000 Child amount: \$5,000
PREMIUM
Spouse amount: \$20,000 Child amount: \$10,000





DENTAL

- Basic dental services include oral examinations, cleanings, x-rays and fillings.
- Major dental services include bridges, crowns and major surgery.
- Dental coverage is mandatory unless a plan member has spousal coverage. Plan members with spousal coverage may opt out of this benefit during the selection period.

FOUNDATION

Option #1- base coverage	Option #2	Option #3
No dental coverage	Basic dental 70% coverage \$1,000 annual maximum, for basic dental services Check-ups every 9 months	Basic dental 80% coverage Major dental 50% coverage \$1,000 annual maximum, combined for basic and major services Check-ups every 6 months

SELECT

Option #1- base coverage	Option #2	Option #3
Basic dental 70% coverage Major dental 50% coverage \$1,000 annual maximum, combined for basic and major services Check-ups every 9 months	Basic dental 80% coverage Major dental 50% coverage \$1,500 annual maximum, combined for basic and major services Check-ups every 9 months	Basic dental 90% coverage Major dental 50% coverage \$2,000 annual maximum, combined for basic and major services Check-ups every 6 months



DENTAL

PREMIUM

Option #1- base coverage	Option #2	Option #3
<p>Basic dental 80% coverage</p> <p>Major dental 50% coverage</p> <p>\$1,500 annual maximum, combined for basic and major services</p> <p>Check-ups every 9 months</p> <p>Orthodontics 50% coverage Lifetime Maximum - \$2,000/ dependent child</p>	<p>Basic dental 90% coverage</p> <p>Major dental 50% coverage</p> <p>\$2,000 annual maximum, combined for basic and major services</p> <p>Check-ups every 9 months</p> <p>Orthodontics 50% coverage Lifetime Maximum - \$2,500/ dependent child</p>	<p>Basic dental 100% coverage</p> <p>Major dental 50% coverage</p> <p>\$2,500 annual maximum, combined for basic and major services</p> <p>Check-ups every 6 months</p> <p>Orthodontics 50% coverage Lifetime Maximum - \$3,000/ person (dependent children and adults)</p>

All paths include a Health Care Spending Account (HCSA). Flex dollars saved in a HCSA can be used to pay for eligible expenses that exceed the limits above, or portions of reimbursed claims that are not covered.



HEALTH

- Health coverage is mandatory unless a plan member has spousal coverage. Plan members with spousal coverage may opt out of this benefit during the selection period.
- All health options include a mandatory generic drug plan, a Preferred Pharmacy Network for specialty drugs, medical supplies, equipment and services.

FOUNDATION*

Option #1- base coverage	Option #2	Option #3
<p>Prescription drug plan 0% coverage until eligible claims reach \$2,500 – 100% coverage thereafter/year</p> <p>\$100,000 yearly maximum/person</p> <p>\$1M lifetime maximum/person</p> <p>Out of province/country \$5,000,000 max/person for a 90-day trip duration (includes Travel Assist)</p>	<p>Prescription drug plan 70% coverage until total paid claims reach \$2,500 – 100% coverage thereafter/year</p> <p>\$100,000 yearly maximum/person</p> <p>\$1M lifetime maximum/person</p> <p>Out of province/country \$5,000,000 max/person for a 90-day trip duration (includes Travel Assist)</p> <p>Hearing aids \$300/60 months</p> <p>Private duty nursing \$5,000/year</p> <p>Semi private hospital room</p> <p>Orthotics \$150/year</p>	<p>Prescription drug plan 80% coverage until total paid claims reach \$2,500, 100% coverage thereafter/year</p> <p>\$100,000 yearly maximum/person</p> <p>\$1M lifetime maximum/person</p> <p>Out of province/country \$5,000,000 max/person for a 90-day trip duration (includes Travel Assist)</p> <p>Hearing aids \$500/60 months</p> <p>Private duty nursing \$10,000/year</p> <p>Private hospital room</p> <p>Orthotics \$300/year</p> <p>Vision \$200/24 months</p>

*Not available for plan members residing in Quebec.



SELECT

Option #1- base coverage	Option #2	Option #3
Prescription drug plan 70% coverage until total paid claims reach \$2,500 – 100% coverage thereafter/year \$100,000 yearly maximum/person Out of province/country \$5,000,000 max/person for a 90-day trip duration (includes Travel Assist) Hearing aids \$300/60 months Private duty nursing \$5,000/year	Prescription drug plan 80% coverage until total paid claims reach \$2,500 – 100% coverage thereafter/year \$100,000 yearly maximum/person Out of province/country \$5,000,000 max/person for a 90-day trip duration (includes Travel Assist) Hearing aids \$500/60 months Private duty nursing \$10,000/year Semi private hospital room Orthotics \$200/year Paramedical \$200/practitioner up to a combined \$400 annual maximum	Prescription drug plan 90% coverage until total paid claims reach \$2,500, 100% coverage thereafter/year \$100,000 yearly maximum/person Out of province/country \$5,000,000 max/person for a 90-day trip duration (includes Travel Assist) Hearing aids \$750/60 months Private duty nursing \$15,000/year Private hospital room Orthotics \$400/year Paramedical \$300/practitioner up to a combined \$1,200 annual maximum Vision \$250/24 months



PREMIUM

Option #1- base coverage	Option #2	Option #3
Prescription drug plan 80% coverage until total paid claims reach \$2,500 – 100% coverage thereafter/year \$100,000 yearly maximum/person Out of province/country \$5,000,000 max/person for a 90-day trip duration (includes Travel Assist) Hearing aids \$500/60 months Private duty nursing \$10,000/year Semi private hospital room Orthotics \$200/year Paramedical \$200/practitioner up to a combined \$400 annual maximum Vision \$200/24 months	Prescription drug plan 90% coverage until total paid claims reach \$2,500 – 100% coverage thereafter/year \$100,000 yearly maximum/person Out of province/country \$5,000,000 max/person for a 90-day trip duration (includes Travel Assist) Hearing aids \$750/60 months Private duty nursing \$15,000/year Private hospital room Orthotics \$300/year Paramedical \$300/practitioner up to a combined \$600 annual maximum Vision \$300/24 months	Prescription drug plan 100% coverage \$100,000 yearly maximum/person Out of province/country \$5,000,000 max/person for a 90-day trip duration (includes Travel Assist) Hearing aids \$1,000/60 months Private duty nursing \$20,000/year Private hospital room Orthotics \$400/year Paramedical \$500/practitioner up to a combined \$2,000 annual maximum Vision \$400/24 months

All paths include a Health Care Spending Account (HCSA). Flex dollars saved in a HCSA can be used to pay for eligible expenses that exceed the limits above, or portions of reimbursed claims that are not covered.

This Options Guide is not a contract and is not an offer to provide insurance. This Guide provides only an overview of coverage and benefits that are available for you to select. In all respects, the provisions of the Group Policy Contract will apply to the coverage and benefits.

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