



DOW CHEMICAL CANADA ULC

Retiree Group Benefits Program

Benefits at a Glance

EXTENDED HEALTH CARE	BASIC	OPTIONAL
Deductible (excluding hospital stay)	\$50 / person	\$25 / person
Coverage	90% of the first \$2,000 paid expenses ^{1, 2} 100% thereafter ¹ (excludes hospital stay) ² (excludes drugs for members in Quebec)	100%
 Drug reimbursement / PDD card Members residing outside Quebec Members in Quebec without RAMQ 	90%	100%
Members in Quebec with RAMQ	Not applicable	Not applicable
Medical services and supplies • crutches, canes, casts, rental of hospital beds, wheelchairs, ambulance services, etc.	90%	100%
Hospital expenses in your province	100%, up to a \$150/day maximum	100%, up to a \$200/day maximum
Private duty nursing	90% up to \$25,000/3 years	100% up to \$25,000/3 years
Licensed Psychologist/ Social Worker • combined maximum • maximum \$25/visit	90%, up to \$300 per person per benefit year	100%, up to \$300 per person per benefit year
Licensed Massage therapist/ Speech therapist/ Acupuncturist	90%, up to \$300 per person per benefit year	100%, up to \$300 per person per benefit year
Licensed Podiatrist/ Chiropodist • combined maximum • maximum \$25/visit	90%, up to \$300 per person per benefit year	100%, up to \$300 per person per benefit year
Licensed Chiropractor/ Osteopath/ Naturopath • maximum \$25/visit	90%, up to \$300 per person per benefit year	100%, up to \$300 per person per benefit year
Licensed Physiotherapist/ Occupational therapist • combined maximum	90%, up to \$1,000 per person per benefit year	100%, no maximum
Licensed Ophthalmologist/ Optometrist	None	One eye exam per person/ 2 years
Orthopaedic shoes	\$400/pair; maximum 3 pairs/year	
Orthotics	\$450/pair; maximum 3 pairs/year	
Out of province emergency and referral	100% and 80% respectively, up to a lifetime maximum of \$500,000	100% and 80% respectively, up to a lifetime maximum of \$1,000,000
Annual maximum	\$4,000/year excluding hospital stay and Private duty nursing	\$5,000/year excluding hospital stay, Private duty nursing, insulin pumps and extremity pumps
Benefit vear	Ianuary 1 – December 31	

Benefit year January 1 – December 31

DENTAL CARE	BASIC	
Check-up frequency	Once every 9 months	
Preventive	80%	
Fillings and extractions	80%	
Basic; Periodontics/ Endodontics	50%	
Major	50%	Maximum for Bridges – \$800/year Maximum for Crowns – \$250/year
Dentures	50%	Maximum for Dentures – \$500/year
Benefit year maximum (excluding maximums noted above)	\$1,000	
Deductible	None	
Fee guide	2-year lag in Dental Association Fee Guide	

Preventive services include procedures typically performed at a Dental check-up, such as oral exams, cleanings and x-rays. Basic services; Periodontics/ Endodontics include root canal treatment and minor surgical procedures.

Major services include procedures such as crowns, bridgework and major surgical procedures.

Denture services include full or partial dentures.

BASIC EMPLOYEE LIFE	DEFAULT OPTION	
Coverage • Reducing coverage	1x base annual pre-retirement salary up to a combined maximum with Optional Life of \$1,500,000 Coverage reduces by 20% at age 66 and each year thereafter until age 70, when the minimum is reached	
OPTIONAL EMPLOYEE LIFE	OPTIONAL INSURANCE	
Coverage - Coverage ceases when retiree reaches age 65	1x to 5x base annual pre-retirement salary up to a combined maximum with Basic Employee Life of \$1,500,000	
OPTIONAL SPOUSAL LIFE	OPTIONAL INSURANCE	
Coverage - Coverage ceases when retiree reaches age 65	Units of \$25,000 to a maximum of \$300,000	
OPTIONAL CHILD LIFE	OPTIONAL INSURANCE	
Coverage - Coverage ceases when retiree reaches age 65	Units of \$5,000 to a maximum of \$15,000 The coverage elected applies to each eligible child.	

Life's brighter under the sun