



DOW CHEMICAL CANADA ULC

Survivor Group Benefits Program

BENEFITS AT A GLANCE 2026-2027

EXTENDED HEALTH CARE	BASIC
Deductible (excluding hospital stay)	\$50 / 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)
Drug reimbursement • Members residing outside Quebec • Members in Quebec without RAMQ	Tier 1 drugs: 90% Tier 2 drugs: 60% Tier 3 drugs: 30% Tier 4 drugs: 90%
Drug reimbursement • Members in Quebec with RAMQ	Not applicable
Medical services and supplies • crutches, canes, casts, rental of hospital beds, wheelchairs, ambulance services, etc.	90%
Hospital expenses in your province	100%, up to a \$150/day maximum
Private duty nursing	90% up to \$25,000/3 years
Licensed Psychologist/ Social Worker • combined maximum • maximum \$25/visit	90%, up to \$300 per person per benefit year*
Licensed Massage therapist/ Speech therapist/ Acupuncturist/ Visual therapist	90%, 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
Licensed Chiropractor/ Osteopath/ Naturopath • maximum \$25/visit	90%, up to \$300 per person per benefit year
Licensed Physiotherapist/ Occupational therapist • combined maximum	90%, up to \$1,000 per person per benefit year*
Licensed Ophthalmologist/ Optometrist	None
Orthopaedic shoes	\$400/pair; maximum 3 pairs/year
Orthotics	\$450/pair; maximum 3 pairs/year
Out of province emergency and referral • Lifetime maximum	100% and 80% \$500,000
Annual maximum	\$4,000/year excluding hospital stay and Private duty nursing

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EXTENDED HEALTH CARE	BASIC
Benefit year	January 1 – December 31

*Eligible expenses are reasonable and customary charges for the items of expense, provided they are prescribed by a physician.

Reasonable and customary charges mean those which are usually made to a person without coverage for the items of expense listed under Eligible Expenses and which do not exceed:

1. the general level of charges in the area where the expense is incurred, or
2. for eligible expenses incurred outside Canada, the general level of charges for comparable services in the person's province of residence.

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 (other than maximums noted)	\$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.

This summary of the Dow group benefits plan has been written in as clear and non-technical language as possible. It does not create any contractual rights. It is intended as a summary only and is by no means comprehensive. Please consult your Sun Life benefits booklet (located on the Sun Life website) or contact Sun Life for more details on the benefits offered by Dow and your entitlement to those benefits. If there is a conflict between the information in this summary or the Sun Life benefits booklet and the group Contract with Sun Life Financial, the group Contract governs.

Life's brighter under the sun

Group Benefits are offered by Sun Life Assurance Company of Canada,
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