



BENEFITS AT A GLANCE

EXTENDED HEALTH	OPTION 1 (default option)	OPTION 2	OPTION 3
Benefit year	January 1 – December 31		
Annual deductible (excluding hospital)	None	None	Prescription drugs – \$15 for each prescription or refill. For all other expenses None.
Benefit year maximum (drugs only)	\$10,000 per person	None	None
Drug reimbursement	70%	85%	100%
Medical services and supplies • crutches, canes, casts, rental of hospital beds, wheelchairs, ambulance services, etc.	70%	85%	100%
Hearing aids	Not covered	\$400 per person every 5 benefit years	\$400 per person every 5 benefit years
Orthopaedic shoes	Not covered	1 pair up to \$400 per person per benefit year	1 pair up to \$400 per person per benefit year
Orthotics	Not covered	\$150 per person per benefit year	\$150 per person per benefit year
Hospital expenses in your province	70%, semi-private room, up to \$100 per person per day	85%, semi-private room, up to \$150 per person per day	100%, semi-private room, up to \$200 per person per day
Convalescent hospital	100%, up to \$100 per person per day	100%, up to \$150 per person per day	100%, up to \$200 per person per day
Private duty nursing	\$25,000 per person per benefit year	\$50,000 per person per benefit year	\$50,000 per person per benefit year
Paramedical services	Categories 1 & 3: 70% Categories 2 & 4: 100%	Categories 1 & 3: 85% Categories 2 & 4: 100%	All categories 100%

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Paramedical services (category 1): • Speech therapist, Dietician, Occupational therapist	\$200 per person per specialist per benefit year	\$300 per person per specialist per benefit year	\$500 per person per specialist per benefit year
Paramedical services (category 2): • Psychologist	\$500 per person per year for psychologist		hologist
Paramedical services (category 3): • Physiotherapist, Acupuncturist, Registered Massage therapist, Podiatrist, Chiropodist, Naturopath, Chiropractor, Osteopath, Audiologist	\$200 per person per benefit year all specialists combined	\$300 per person per benefit year all specialists combined	\$500 per person per benefit year all specialists combined
 Paramedical services (category 4): Social Worker, Psychotherapist, Psychoanalysis, Family Therapist and Clinical Counsellor 	\$500 per person per benefit year all specialists combined		
Vision care	100%		
Eye exams	\$75 per person every 24 months	\$50 per person every 24 months	\$50 per person every 24 months
Contact lenses, eyeglasses or laser eye correction surgery	Not covered	\$175 per person every 24 months	\$250 per person every 24 months
Out of country Emergency/Referral Lifetime maximum	Out of country emergency expenses 100% \$1,000,000 lifetime maximum per person, 90 day trip limit		
Out of province (within Canada) Emergency/ Referral	Emergency 100%/Referral 80%		
Medi-Passport	Included		
Lifetime maximum (excluding Out-of-Country)	\$500,000 per person		

OPT-OUT: INCLUDES OUT-OF-PROVINCE AND OUT-OF-COUNTRY EMERGENCY SERVICES

You are only able to opt-out of the health and/or dental coverage if you have alternative coverage. If you opt-out of the health plan, you will still be eligible for out-of-province and out-of-Canada emergency coverage.

BENEFITS AT A GLANCE

HEALTH SPENDING ACCOUNT

A Health Spending Account allows you to claim any medical and dental expenses eligible under the Income Tax Act. Petro-Canada Lubricants Inc. provides an annual allotment depending on your option, that you may use at any time during the year. Beginning in year, at the end of the benefit year, any unused amount remaining in your Health Spending Account will be carried forward for 1 benefit year to be used for expenses incurred in that benefit year. At the end of the second year, any remaining credits will be lost (Canada Revenue Agency rule). Please note that this does not apply to any remaining year balances.

Credits allocated to this account are not subject to tax. In Quebec, however, provincial income tax is assessed on all expenses reimbursed (plus administrative fees and applicable taxes) from this account.

For additional information, consult the general Income Tax Guide published by the Canada Revenue Agency.

DENTAL CARE	OPTION 1 (default option)	OPTION 2	OPTION 3
Deductible (per benefit year)	None		
Recall exams	Every 9 months		
Preventive and Basic dental procedures	60% for endodontic and periodontic expenses	75% for endodontic and periodontic expenses	90% for endodontic and periodontic expenses
	70% for all other expenses	85% for all other expenses	100% for all other expenses
Major dental procedures	50%	50%	60%
Annual maximum (excluding Orthodontics)	\$1,750	\$2,500	\$3,500
Orthodontics dental procedures	Not covered	50% only for children under 19	60% only for children under 19
Lifetime maximum (per person)	N/A	\$1,500 for orthodontic dental procedures only	\$2,500 for orthodontic dental procedures only

Preventive services include procedures typically performed at a dental check-up, such as oral exams, cleanings and x-rays. **Basic services/ Periodontics/ Endodontics** include fillings, extractions, root canal treatment and minor surgical procedures. **Major services** include procedures such as dentures, crowns, bridgework and major surgical procedures.

Orthodontic services include orthodontic examinations, such as diagnostic services, and fixed or removable appliances (e.g. braces).

BENEFITS AT A GLANCE

LONG-TERM DISABILITY (LTD)	OPTION 1 (default option)	OPTION 2	OPTION 3
Long-term disability benefits replace a percentage of your pay if you are unable to work for a long period of time because of illness or injury.			
Coverage • Proof of good health is not required	50% of monthly earnings	65% of the first \$2,500 of monthly earnings, 60% of the next \$1,250 and 50% of the remainder	65% of the first \$2,500 of monthly earnings, 60% of the next \$1,250 and 50% of the remainder
Maximum per month	\$5,000	\$10,000	\$10,000
Cost of living adjustment	None	None	Up to a maximum of 3% (based on the Consumer Price Index)

At the time of claim, your benefits will be limited so that your income from all sources of benefits or payments would not exceed **100%** of your pre-disability income.

Benefits begin:

• once you have been totally disabled for a continuous period of **182 days (26 weeks)** after the last day benefits are payable under any salary continuance, loss of income or other salary continuation plan, whichever is later (elimination period).

Benefits end:

• when you are no longer totally disabled, last day of the month that you reach age 65, retire, or die, whichever occurs first.

Totally disabled means:

- you are prevented by illness or injury from performing the essential duties of your own occupation during the elimination period and the following **24 months**;
- and thereafter, you are unable due to illness or injury to do any occupation for which you are or may become reasonably qualified by education, training or experience.

BASIC EMPLOYEE LIFE

If you die, your life insurance coverage will pay a tax-free lump sum benefit to your designated beneficiary or beneficiaries.

Coverage 1x Base Annual Salary up to a maximum of \$600,000

OPTIONAL EMPLOYEE LIFE

Designed to supplement the basic group life insurance coverage under your plan, optional life is a smart, affordable way to help provide you with more financial security. If you choose optional life, you will need to complete a health statement.

Coverage

• Proof of good health is required for all coverage increases

Units of \$10,000 up to a maximum of \$500,000

OPTIONAL SPOUSAL LIFE	
Coverage • Proof of good health is required for all coverage increases	Units of \$10,000 to a maximum of \$250,000

BENEFITS AT A GLANCE

OPTIONAL CHILD LIFE		
Coverage • Proof of good health is not required	Units of \$5,000 to a maximum of \$25,000. The coverage applies to each eligible child (up to age 19 or 25 if in post-secondary educational program) for one flat amount.	
OPTIONAL EMPLOYEE ACCIDENTAL DEAT	TH & DISMEMBERMENT (AD&D) – insured by AIG	
Optional benefits can provide the additional co	verage you need to supplement your group benefits plan.	
Coverage	Units of \$10,000 up to a maximum of \$500,000	
OPTIONAL SPOUSAL ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) - insured by AIG		
Coverage	Units of \$10,000 up to a maximum of \$250,000	
OPTIONAL CHILD ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)- insured by AIG		
Coverage	Units of \$10,000 to a maximum of \$50,000. The coverage applies to each eligible child (up to age 19 or 25 if in post-secondary educational program) for one flat amount	
BASIC EMPLOYEE CR	ITICAL ILLNESS INSURANCE	
Pays a one-time lump sum benefit if you are diagnosed with one of the medical conditions covered under the plan. With extra financial protection during a difficult period of illness, you'll be able to spend less time worrying about your finances and more time focusing on taking care of yourself.		
Coverage (including Teledoc Medical Experts)	\$20,000	
OPTIONAL EMPLOYEE CRITICAL ILLNESS INSURANCE		
Pays a one-time lump sum benefit if you are diagnosed with one of the medical conditions covered under the plan. With extra financial protection during a difficult period of illness, you'll be able to spend less time worrying about your finances and more time focusing on taking care of yourself.		
 Coverage Proof of good health is required for coverage in excess of \$30,000 if the request for coverage is made within 31days of eligibility 	Units of \$10,000	
Minimum	\$20,000	

Maximum (combined with Basic coverage)

\$200,000

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OPTIONAL SPOUSAL CRITICAL ILLNESS INSURANCE	
Coverage • Proof of good health is required for coverage in excess of \$20,000 if the request for coverage is made within 31 days of eligibility	Units of \$10,000
Minimum	\$20,000
Maximum	\$200,000

OPTIONAL CHILD CRITICAL ILLNESS INSURANCE		
Coverage	Units of \$5,000	
Proof of good health	Not required if the request for coverage is made within 31 days of eligibility	
Maximum	\$20,000	

This summary of the Petro-Canada Lubricants Inc. 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 Petro-Canada Lubricants Inc. and your entitlement to those benefits. If there is a conflict between the information in this summary or the Sun Life Financial benefits booklet and the group Contract with Sun Life, the group Contract governs.

Please call your Sun Life Group Benefits Administrator with any questions you have, toll-free, at 1-866-881-0583 or the HF Sinclair Benefits Department at Benefits@hfsinclair.com.