

Public Employees Group Life Insurance Plan



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Introduction

OVERVIEW

The Public Employees Group Life Insurance Plan is designed to provide comprehensive life insurance coverage to Participating Employees and their spouses and dependent children.



ADMINISTRATION

The Public Employees Group Life Insurance Plan is underwritten on a cost-plus basis and is managed by Plannera Pensions & Benefits (Plannera).

Canada Life under Group Policy 161938 provides claims adjudication and benefit payment services to the Plan.

EMPLOYEE BOOKLET

This Employee Booklet is intended to provide an overview of the main provisions of the Public Employees Group Life Insurance Plan as of January 1, 2024. In the case of any error or discrepancy, the terms and conditions of the Group Policy between the insurance carrier and the Government of Saskatchewan, and any legislation governing the Plan and its operations will apply.

Eligibility

EMPLOYER RESPONSIBILITY

Each Participating Employer categorizes and determines the employees and type of group life insurance coverage provided for its employees under the Plan.

A list of Participating Employers and their respective coverage is available on the Plannera website at www.plannera.ca.

You should confirm your eligibility to participate in the Plan with your Human Resources Branch.

ENROLMENT

Coverage under the Plan begins on your first day of active employment.

If you are not actively at work on your first day of employment, coverage will commence on the date you are first actively at work.

Actively at work means you perform all regular duties and work full regular hours.

If you are employed by more than one Participating Employer, you may be insured under the Plan by each of these Participating Employers. Coverage will be based upon the level of coverage provided by each respective Participating Employer.

Eligibility

SPOUSE

Your spouse is:

- A person to whom you are legally married; or
- A person with whom you have cohabited for a minimum of 12 consecutive months and has been publicly represented as your spouse.

You cannot have more than one spouse at anytime, and coverage for a former spouse terminates when you request coverage for a new spouse. A spouse need not be a person of the opposite sex.

DEPENDENT CHILD

Your dependent child includes:

- A child or step-child under 21 years of age for whom you are legally and financially responsible;
- A child or step-child between the ages of 21 and 26 inclusive, whom you support and who is attending an educational institution on a full-time basis;
- A child or step-child 21 years of age and over who is solely dependent upon you due to a mental or physical disability.

Children for whom you have been granted custody pursuant to an Order of a Court are also eligible for coverage.

A dependent child cannot be insured under the Plan as both a dependent child and an employee.

Benefits

BASIC COVERAGE

Each Participating Employer categorizes and determines the employees and type of group life insurance coverage provided for its employees under the Plan.

A list of Participating Employers and their respective coverage is available on the Planner website at www.planner.ca.

Basic coverage is equal to two times (2x) your annual salary. Annual salary is rounded up to the next highest multiple of \$500, if it is not already a multiple of \$500.

Basic coverage is payable for all causes of death.

Working employees that turn 75 on or after January 1, 2024 are no longer covered under the employer provided group life insurance. Employees who are currently 75 or older or who turned 75 before December 31, 2023, will continue to have Group Life insurance until retirement. Coverage for spouses under an employee's Group Life Insurance plan will also end at age 75, per above details.

OPTIONAL COVERAGE (UNIT-BASED)

If you participate in a category of employees eligible to purchase unit-based coverage, you may purchase additional coverage in units of \$10,000.

To apply for unit-based coverage, you must complete an Optional Group Life Insurance Application - Medical and Lifestyle Questionnaire that is adjudicated by the insurance carrier prior to the additional coverage being approved. The insurance carrier will notify you if further medical information is required.

Optional coverage (unit-based) is payable for all causes of death.

The maximum coverage provided under the Plan (basic plus optional) is \$500,000.

Benefits

OPTIONAL COVERAGE (SALARY-BASED)

If you participate in a category of employees eligible to purchase salary-based coverage, you may purchase additional coverage equal to one times (1x), two times (2x), three times (3x) or four times (4x) your annual salary. Annual salary is rounded up to the next highest multiple of \$500, if it is not already a multiple of \$500.

If optional coverage (salary-based) is elected at commencement of employment, completion of an Optional Group Life Insurance Application - Medical and Lifestyle Questionnaire is not required.

If optional coverage (salary-based) is elected after 31 days of employment, an Optional Group Life Insurance Application - Medical and Lifestyle Questionnaire must be completed and adjudicated by the insurance carrier prior to the additional coverage being approved.

Optional coverage (salary-based) is payable for all causes of death.

The maximum coverage provided under the Plan (basic plus optional) is \$500,000.

REPATRIATION BENEFIT

If loss of life occurs outside the insured's normal province of residence (due to any cause) the Group Life Insurance Plan will pay the cost of the preparation and shipment of the body back to the insured's province of residence.

The maximum benefit payable is \$3,000.

Benefits

ACCIDENTAL DEATH AND DISMEMBERMENT COVERAGE

| Loss of: | Benefit: |
|---|-----------------|
| Life | \$50,000 |
| Both hands or both feet | \$50,000 |
| Entire sight of both eyes | \$50,000 |
| One hand and one foot | \$50,000 |
| One hand and entire sight of one eye | \$50,000 |
| One foot and entire sight of one eye | \$50,000 |
| Complete speech and complete hearing in both ears | \$50,000 |
| Use of both hands or both arms or both legs | \$50,000 |
| Use of one hand and one leg | \$50,000 |
| Use of one arm and one leg | \$50,000 |
| Paraplegia | \$50,000 |
| Hemiplegia | \$50,000 |
| Quadriplegia | \$50,000 |
| One arm or one leg or one hand or one foot | \$25,000 |
| Entire sight of one eye | \$25,000 |
| Use of one hand or one arm or one leg | \$25,000 |
| Complete loss of speech | \$25,000 |
| Complete loss of hearing in both ears | \$25,000 |
| Thumb and index finger of same hand | \$12,500 |

No more than \$50,000 will be paid for all the losses incurred in any one accident.

ACCIDENTAL DEATH AND DISMEMBERMENT DEFINITIONS

Loss of hand – Complete severance at or above the wrist.

Loss of thumb – Complete loss of one entire phalanx of the thumb.

Loss of index finger – Complete loss of two entire phalanges of the index finger.

Loss of foot – Complete severance at or above the ankle.

Loss of leg – Complete severance at or above the knee joint.

Loss of arm – Complete severance at or above the elbow joint.

Loss of sight, hearing or speech - Total and irrecoverable loss of eyes, ears or speech. If the loss can be recovered or partially recovered by the use of some device (e.g., hearing aid) or rehabilitative program, then there is no loss for purposes of this Plan.

Exposure – If any insured employee is exposed to the elements following the disappearance, forced landing, stranding, sinking or wrecking of a conveyance in which the employee was an occupant, such exposure shall be deemed bodily injury by accidental means.

Disappearance – If the body of an insured employee has not been found within one year of the disappearance, forced landing, stranding, sinking or wrecking of a conveyance in which the employee was an occupant, then it shall be deemed that the employee shall have suffered loss of life.

ACCIDENTAL DEATH AND DISMEMBERMENT EXCLUSIONS

Any injury caused or contributed to, by, or as a consequence of any of the following is not covered under the Plan:

- Suicide or self-inflicted injury, whether sane or insane;
- Insurrection or war (whether war is declared or not) or any act incident to either, or any participation in a riot;
- Committing, attempting or provoking an assault or criminal offense, including without limitation driving a vehicle with blood alcohol in excess of 80 milligrams of alcohol per 100 millilitres of blood . A “vehicle” means a vehicle that is drawn, propelled or driven in any means other than muscular power;
- Bodily or mental weakness, illness or disease or medical or surgical treatment of any kind, except a loss covered by this provision which results directly from a surgical operation made necessary solely by an injury not excluded in this provision and performed within 365 days after the date of such injury.

Benefits

SPOUSAL COVERAGE

\$10,000.

If you are an insured employee eligible to purchase optional coverage (unit-based), your spouse may also purchase optional coverage (unit-based) to a maximum of \$100,000. An Optional Group Life Insurance Application - Medical and Lifestyle Questionnaire must be completed and adjudicated by the insurance carrier prior to the additional coverage being approved.

DEPENDENT COVERAGE

\$5,000 per dependent child.

PRE-NATAL BENEFIT

Upon receipt by the Insurance Company of satisfactory proof that an employee or spouse while covered under the Benefit had a stillborn, the Insurance Company will indemnify the employee in an amount equal to the benefit for which a dependent child is covered under this provision.

“Stillbirth” means the complete expulsion or extraction from the mother of a fetus weighing 500 grams or more; or with a body length of 25 centimetres or more; or gestation age of 20 weeks or more; which, after complete separation from the mother, does not breathe or show any sign of life at or after birth.

Maintaining Coverage

LEAVE OF ABSENCE/LAYOFF

If you take an approved leave of absence without pay or are laid-off, you may continue your coverage for a maximum of three years.

You must complete a Leave of Absence/Layoff Form prior to the commencement of your leave. Premiums are payable by:

- Monthly post-dated cheque;
- One lump-sum payment prior to leave of absence/layoff;
- Prepayment by salary deduction prior to leave of absence/layoff.

Under no circumstances will the coverage exceed a maximum of three years from the date the leave of absence/layoff commenced.

Should your employment cease while on approved leave of absence or lay-off, coverage under the Plan will terminate immediately. Any prepaid premiums will be refunded to you.

DISABILITY

If you are eligible for coverage under the Plan and subsequently qualify for benefits under a Participating Employer's Long-Term Disability Plan, your group life insurance coverage may remain in effect at no cost (premium waiver).

The same provisions for claims eligibility under the Public Employees Disability Income Plan are used for premium waivers under the Public Employees Group Life Insurance Plan.

Should you retire while in receipt of a group life premium waiver, your premium waiver may remain in effect to age 65, subject to ongoing objective medical evidence supporting disability.

Maintaining Coverage

TERMINATION

Your coverage under the Plan will terminate immediately upon termination of employment or if you do not elect to continue coverage while on leave of absence/layoff.

Failure to pay premiums on a regular and timely basis will constitute termination of coverage under the Plan.

Coverage under the Public Employees Group Life Insurance Plan cannot be obtained retroactively.

CONVERSION OPTION

Whenever your coverage as an insured employee terminates under the Plan, you may convert any amount of coverage (employee and spouse) that was in effect upon termination to an individual policy with the insurance carrier. The insurance policies offered under this provision are determined by the insurance carrier.

Medical evidence of insurability is not required.

Premiums are based upon the applicant's age, gender and smoker status and are determined by the insurance carrier.

To apply for the conversion option the employee must, within 31 days of coverage terminating:

- contact Plannera at (306) 787-3440 to request a Conversion Option Notification Form; and
- contact Canada Life at 1-800-665-0551 to make written application for an individual policy, and submit the first premium payment.

The conversion option will not be available if the above steps are not completed within 31 days of coverage terminating under the Plan.

Should you or your spouse pass away within this 31-day conversion period, the amount of coverage that was in effect upon termination will be paid to the designated beneficiary.

Premiums

BASIC COVERAGE

The group insurance premium rate for basic coverage varies by Participating Employer.

All Participating Employers pay premiums for a certain portion of basic coverage on behalf of their employees.

The allocation of premiums between employee and Participating Employer depends upon the employment contract between the employee and Participating Employer.

A list of Participating Employers and their respective group rate/employer-share is available on the Planner website at www.planner.ca.

An actuarial valuation is performed annually on the Public Employees Group Life Insurance Plan. When necessary, premiums may be adjusted accordingly.



OPTIONAL COVERAGE (SALARY-BASED)

The group insurance premium rate for optional coverage (salary-based) varies by Participating Employer.

Premiums

OPTIONAL COVERAGE (UNIT-BASED)

Premium rates for each \$10,000 unit of coverage are as follows:

| Age | Non-smoker | | Smoker | |
|-------|------------|---------|---------|---------|
| | Male | Female | Male | Female |
| < 30 | \$0.45 | \$0.37 | \$0.75 | \$0.53 |
| 30-39 | \$0.47 | \$0.45 | \$1.05 | \$0.79 |
| 40-44 | \$0.93 | \$0.68 | \$2.05 | \$1.39 |
| 45-49 | \$1.59 | \$1.06 | \$3.57 | \$2.45 |
| 50-54 | \$2.84 | \$1.79 | \$5.62 | \$3.70 |
| 55-59 | \$4.50 | \$2.84 | \$9.40 | \$5.76 |
| 60-64 | \$6.56 | \$4.63 | \$11.98 | \$7.55 |
| 65-69 | \$10.23 | \$7.22 | \$18.68 | \$11.77 |
| 70-74 | \$17.58 | \$12.36 | \$30.47 | \$19.57 |

If you quit smoking, you must complete an Application for Non-smoker Rate in order to be eligible for reduced premium rates.

Claim Process

RETIREMENT DEATH BENEFIT CERTIFICATE

Insured employees who retire under an employer sponsored pension plan are eligible to receive a \$10,000 Retirement Death Benefit Certificate.

The certificate is payable to the designated beneficiary(s) only upon the death of the insured retiree and has no cash surrender value.

A Retirement Death Benefit Certificate Request Form must be completed by the retiree.

Retirees can only receive one Retirement Death Benefit Certificate under the Plan.

Some Participating Employers provide a Retirement Death Benefit Certificate greater than \$10,000. The additional liability is the responsibility of each respective Participating Employer.

A list of Participating Employers and their respective coverage is available on the Planner website at www.planner.ca.

ELECTION TO CONTINUE TO AGE 65

An employee who:

- Retires prior to age 65;
- Was insured under the Public Employees Group Life Insurance Plan on the date immediately preceding retirement; and
- Is eligible for an immediate pension through an employer-sponsored pension plan;

may elect to be insured under the Plan until age 65 for any amount of insurance up to that amount of insurance in effect immediately prior to retirement, less the value of the Retirement Death Benefit Certificate.

Retirement



Premiums are paid solely by the retiree (no employer cost-sharing) and may be:

- Deducted monthly from the retiree's pension payment, or
- Deducted monthly or annually (January 1) by pre-authorized debit (PAD) from the retiree's bank account.

Employees electing to continue coverage to age 65 also continue dependent life insurance coverage (\$10,000 spouse and \$5,000 dependent child) and Accidental Death and Dismemberment coverage.

Spousal optional coverage (unit-based) in effect immediately prior to retirement may also be continued in those cases where the employee has elected to continue coverage to age 65. This coverage will cease immediately upon the termination of the employee coverage continued under the Election to Continue to Age 65 provision.

Coverage will remain in effect until the end of the month in which the retiree reaches age 65 or cancelled in writing prior to age 65. One month written notice is required for cancellation of coverage.

An Election to Continue to Age 65 Form and Designation of Beneficiary Form must be completed prior to retirement.

Those retirees not electing to continue coverage to age 65 are still entitled to the Conversion Option.

Retirement

ELECTION TO CONTINUE TO AGE 75

An employee who:

- Retires at age 65 and was insured under the Plan at retirement; or
- Retired prior to age 65 and elected to continue insurance coverage to age 65;

may elect to be insured under the Plan until age 75.

The volume of insurance in effect at age 65 is available to age 75 in increments of \$10,000 at a monthly premium rate of \$10 per \$10,000. Premiums are paid solely by the retiree (no employer cost-sharing) and may be:

- Deducted monthly from the retiree's pension payment, or
- Deducted monthly or annually (January 1) by pre-authorized debit (PAD) from the retiree's bank account.

The level of coverage elected will decrease by 10% per year until age 75 at which time all coverage under this provision ceases. While the volume of insurance decreases by 10% annually, there is no corresponding reduction in premium rate.

An Election to Continue to Age 75 Form and Designation of Beneficiary Form must be completed prior to the cessation of any existing coverage at age 65.

An actuarial valuation is performed annually on the Public Employees Group Life Insurance Plan. When necessary, premiums may be adjusted accordingly.

Designation of Beneficiary

DESIGNATION OF BENEFICIARY FORM

Beneficiary designations and changes are made on the Group Life Insurance Designation of Beneficiary Form. The form is available from your Human Resources Branch.

EXAMPLES

Since it is necessary to use certain approved wording in designating a beneficiary, the following should be used where applicable:

- Where one beneficiary is named:
Mary Jane Smith, my wife
- Where more than one beneficiary is named:
Mary Jane Smith, my wife
William John Smith, my father
Equally or to the survivor
- Where three or more are named:
William John Smith, my son
Joseph Albert Smith, my son, and
Mary Jane Smith, my daughter
Equally or to the survivors or survivor
- Where the beneficiary is your Estate:
My Estate
- Where beneficiaries are allowed fractional shares:
Mary Jane Smith, my wife, two-thirds (2/3)
William John Smith, my son, one-third (1/3)
The share of a deceased beneficiary shall be paid to the survivor.

Designation of Beneficiary

EXAMPLES

- Where a contingent beneficiary is designated:
Mary Jane Smith, my wife, if living, otherwise to William John Smith, my son
- Where a Trustee is designated:
Mary Jane Smith, my sister, in trust for William John Smith, my son

It is advisable to consult a lawyer where you choose a designation not in accordance with any of the above examples. You must also consider your designation in the event you make changes to your Will or change marital status.

If the beneficiary is the Estate and the sum insured is greater than \$100,000, the insurance carrier requires a notarized copy of the Will and Letters Probate.

In general, Provincial Legislation does not allow payment of benefits directly to minors. Therefore, if a minor is named as beneficiary, you should make such arrangements as may be necessary to carry out your intent for distribution of benefits (i.e., appointment of a Trustee).

The Public Employees Group Life Insurance Plan is not responsible for the validity or effect of any designation made under the Plan.

Claim Process

MAKING A CLAIM

When your employer is notified of a death, a certified copy of the Death Certificate or Funeral Director's Statement/Certificate of Death is required in all instances.

In the event of a spousal claim, a certified copy of the Marriage Certificate is required.

For common-law relationships, completion of the following forms is required:

- Statutory Declaration by Employee; and
- Statutory Declaration by Disinterested Third Party.

In the event of a dependent death claim, a certified copy of the Birth Certificate or Baptismal Certificate is required.

In the event of an employee claim for Accidental Death, a copy of the Coroner's Report and Toxicology Report is required.

In the event of an employee claim for Accidental Dismemberment, completion of the following forms is required:

- Application for Accidental Dismemberment or Specific Loss — Claimant's Statement Part 1; and
- Application for Accidental Dismemberment or Specific Loss — Attending Physician's Statement Part 2.

If the beneficiary is the Estate and the sum insured is greater than \$50,000, the insurance carrier requires a notarized copy of the Will and Letters Probate.

Claim Process

ADVANCE PAYMENT

An advance payment up to a maximum of \$10,000 may be requested under the Public Employees Group Life Insurance Plan.

A written request for an advance payment is forwarded by your Human Resources Branch to Plannera.

All advance payments are made payable to a designated beneficiary.



Contact Information

Mail Public Employees Group Life Insurance Plan
110 - 1801 Hamilton Street
REGINA SK S4P 4W3

Telephone 1 (833) 863-0620

Fax (306) 787-8822

E-mail benefits@plannera.ca

Website www.plannera.ca

Administered by **Plannera Pensions & Benefits**

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