

**MOHAWK CANADA CORPORATION**  
**Manulife Financial Policy No. 633399**  
**RBC Insurance Policy No. 00002605**  
**Class 001 and 004 – All Eligible Employees**  
**Summary of Group Benefits**

Enrolling in Group Benefits	
<b>Enrolment in Benefits</b>	It is mandatory for you to enroll in all benefits but you can waive out of health and dental if you have coverage elsewhere.
<b>Waiting Period</b>	2 months from date of hire <i>(must be enrolled in benefits within 31 days of being eligible)</i>
<b>Eligible Dependent</b>	Spouse or common-law Dependent children – up to age 21 or 25 if full-time student
<b>Reminder:</b> If you experience a life event change while covered under this group plan, you must notify HR within 31 days of the life event happening to make changes to your health and dental benefits, i.e. adding dependent, loss of spousal coverage	
Benefit	Plan Details
Basic Life and AD&D (RBC Insurance)	
Benefit Amount	1 times annual earnings
Maximum Benefit	\$750,000
Non-Evidence Maximum *	\$450,000
Reduces	50% at age 65
Terminates	At age 70 or retirement, whichever is earliest
<i>* Non-Evidence Maximum (NEM) is the maximum amount of insurance an employee can receive (based on their earnings) without completing an Evidence of Insurability / health questionnaire form.</i>	
Dependent Life	
Benefit Amount	\$10,000 for Spouse \$5,000 for each child
Terminates	At age 70 or retirement, whichever is earliest
Optional Life Insurance for Employee and Family (Employee Paid Benefit) (RBC Insurance)	
Benefit Amount	Units of \$10,000 for Employee Units of \$5,000 for Spouse Units of \$2,000 for Dependent Children
Maximum Benefit	\$250,000 for Employee and Spouse \$10,000 for Dependent Children
Terminates	At age 65 or retirement, whichever is earliest
<i>Rates are based on age, gender, smoking status and are medically underwritten.</i>	



<b>Short Term Disability (Weekly Indemnity) (RBC Insurance)</b>	
Benefit Amount	70% of gross weekly earnings
Maximum Weekly Benefit	\$1,200
Maximum Benefit Period	17 weeks (119 days)
Qualifying Period	0 days for Accident & Hospitalization 7 days for Illness
Taxable Status	Taxable ( <i>Employer Paid Premium</i> )
Terminates	At age 65 or retirement, whichever is earliest
<b>Long Term Disability (RBC Insurance)</b>	
Benefit Amount	70% of month earnings <i>(This equates to approximately 85% of your pre-tax income.)</i>
Maximum Monthly Benefit	\$9,000
Non-Evidence Maximum *	\$8,200 <i>(This equates to \$140,571 of annual earnings.)</i>
Maximum Benefit Period	To age 65
Qualifying Period	17 weeks (119 days)
Disability Definition	2 Year Own Occupation
Taxable Status	Taxable ( <i>Employer Paid Premium</i> )
Terminates	At age 65 less the qualifying period or retirement, whichever is earlier
* Non-Evidence Maximum (NEM) is the maximum amount of insurance an employee can receive (based on their earnings) without completing an Evidence of Insurability / health questionnaire form.	
<b>Extended Health Care (Manulife Financial)</b> <i>(Note: Claims are subject to reasonable &amp; customary limits)</i>	
<b>Prescription Drugs</b>	
Deductible	Nil
Reimbursement	80%
Drug Definition	Generic Substitution
<b>Hospital Services</b>	
Deductible	Nil
Reimbursement	80%
Coverage	Semi-Private

<b><i>Vision Care</i></b>	
Deductible	Nil
Reimbursement	80%
Eye Exam	Once per 24 months
Eyeglasses/Contacts/Laser Eye	\$250 per 24 months
<b><i>Paramedical Services</i></b>	
Deductible	Nil
Reimbursement	80%
Coverage	*\$750 per calendar year for Psychotherapist \$750 combined annual maximum for the following practitioners:
Practitioners Covered	Chiropractor, Osteopath, Podiatrist/Chiropodist, Massage Therapist, Naturopath, Speech Therapist, Physiotherapist, Psychologist, Acupuncturist, Dietician, Social Worker, Psychoanalyst, *Psychotherapist
<b><i>Medical Services &amp; Supplies</i></b>	
Deductible	Nil
Reimbursement	80%
Ambulance	Covered
Private Duty Nursing	\$10,000 per calendar year
Orthopedic Shoes	\$300 per 12 months for Stock-item 1 pair per calendar year for Custom-Made
Custom-Made Foot Orthotics	\$400 per 36 months
Hearing Aids	\$700 per 60 months
Accidental Dental	Covered
<b><i>Out of Country Medical Emergency</i></b>	
Deductible	Nil
Reimbursement	100%
Coverage	\$5,000,000 Lifetime Maximum; 180 days trip duration
Terminates	At retirement

<b>Dental (Manulife Financial)</b>	
<b>(Note: Claims are subject to reasonable &amp; customary limits)</b>	
Deductible	Nil
Reimbursement	100% for Basic/Supplementary Services 50% for Major/Denture Services 50% for Orthodontics
Maximum Benefit	\$1,500 combined annual maximum for Basic/Supplementary/Major/Denture Services \$2,000 Lifetime maximum for Orthodontics ( <i>children under age 19</i> )
Recall Frequency	Once every 6 Months
Scaling Frequency	12 units per calendar year
Dental Fee Guide	Current
Terminates	At retirement
<b>Health and Dental Survivor Benefits</b>	
Provides 24 months survivor benefits for dependent spouse/children in the event of the employee's death.	
<b>Work Life Assistance Program (RBC Insurance)</b>	
Benefit Description	Refer to page 66 of your RBC Benefit Booklet for more details
<b>Health Service Navigator (Manulife Financial)</b>	
Benefit Description	Refer to page 24 of your Manulife Benefit Booklet for more details

*This is an overview of your group benefits – please refer to your benefit booklet for more details. If there are any discrepancies between the information contained in this document and your group contract, the group contract will take precedence.*