

A decorative line in the top left corner, transitioning from purple to orange, forming a curved shape.

Revature Canada Benefit Summary 2025

A decorative line in the bottom right corner, transitioning from purple to orange, forming a curved shape.

Revature Canada

2024 – 2025 Associates & Software Developer Benefits

Benefit Plan	Benefit Overview	Benefit Information
Extended Healthcare (Employee & Employer Paid):		
Medical Services (<i>Various</i>)	Included	See following pages
Prescription Drugs	90%, \$2,500 Max per Person, Home delivery for maintenance medication. <i>Concierge Drug Advocate for High-Cost Drugs.</i>	See following pages
Vision	90%, \$200 max per 24 months + 1 eye exam every 24 months	See following pages
Paramedical Services (i.e. – Chiropractor, Massage, & Psychology)	90%, \$500 all services, combined maximum	See following pages
Virtual Healthcare	Included	See following pages
Out of Country Coverage & Major Medical Services	\$10,000 max per calendar year for non-emergency. \$5,000,000 max up to 180 days for emergency	See following pages
Employee & Family Assistance Program	Included	See following pages
Living Life Benefit, Hospital Indemnity Benefits	Included	See following pages
Dental (<i>Employee & Employer Paid</i>)	90% Basic & Routine Services, \$1,500 max per insured	See following pages
Life Insurance (<i>Employee & Employer Paid</i>)	\$50,000	Premium determined by salary– See following Pages
Dependent Life (<i>Employee Paid</i>):		
Spouse Life	\$5,000	See following pages
Child Life	\$2,500 per child. <i>Benefit may be paid in the event of a still birth.</i>	See following pages
Accident & Serious Illness (Employee & Employer Paid):	Included - <i>Premium determined by age and salary</i>	See following pages
Optional Critical Illness – 100% Employee Paid	Requires Evidence of Insurability for amounts exceeding \$50,000	Premium determined by age - See following Pages
Premiums include all benefits listed above. Except for Critical Illness, there is no option to opt out. Premiums may be slightly higher than listed below due to age and salary rated benefits.		
Monthly Premium	Single	\$55.00
Monthly Premium	Family	\$150.00

Employee Classifications

Class 2

All Eligible Associate & Software Developer Employees.

Employee Eligibility

Eligible Employees

- An Employee must be a Full-Time Resident of Canada, employed by Revature on a permanent, full-time basis and be regularly scheduled to work for a minimum of 20 hours per week at the employer's place of business in Canada.

Waiting Period

- 2 months of continuous employment.

Effective Date of Insurance

- Immediately upon completion of the Eligibility Period or the date a benefit is added to this Group Benefits Plan, if later.
-

General Benefit Provisions

Dependent Children Eligibility

Dependent Children are eligible from birth to:

- age 22 or
- age 26 if in full time attendance as a student at a recognized educational institute

Survivor Benefit

If an employee dies while insured, insurance will continue for his/her dependents who were covered under this benefit at the time of the employee's death

- without premium payment
- for a maximum of 24 months from the date of the employee's death

Termination Age

An employee's insurance terminates at age 70 or earlier retirement

Extended Health Care

Reasonable and Customary

Claims for all expenses under the Extended Health Care benefit are paid on a reasonable and customary basis, unless a specific financial limit and/or claiming frequency is indicated for a particular expense. Reasonable and customary is defined as any charge normally incurred for an illness or injury of the same nature and severity in the locality where the service is provided.

Calendar Year Deductible: None

% Payment of Eligible Expenses

Prescription.....	90 %
Hospital.....	100 %
Out-of-Province Emergency/Trip-Cancellation.....	100 %
Out-of-Province Referral	100 %
Vision Care	90 %
Prescription Drugs*	90 %
Paramedical Practitioners	90 %
All Other Eligible Expenses.....	90 %

***Limited to a maximum of \$2,500 per person per calendar year Prescription Drugs**

Formu**CARE**

This plan does not cover specialty drugs that may have a potential annual cost of \$10,000 or more, unless the prescription drug is covered under a Pharmacare Province formulary and the Special Authority is approved. Does not apply to employees in Quebec.

Reasonable and Customary

Pay Direct Drug Card

- covers the lowest cost generic equivalent product

Limited to drugs that can only be:

- obtained with the written prescription of a healthcare provider who is legally licensed to prescribe drugs; and
- dispensed by a licensed pharmacist

Includes the following:

- insulin supplies for diabetics
- lancets
- oral contraceptives, contraceptive patches, Nuvaring and intrauterine device (IUD)



Maintenance (Chronic) Medications**

During Stabilization* Period	
Local Pharmacy	Alliance Pharmacy
90%	90%

Once Stabilized*	
Local Pharmacy	Alliance Pharmacy
0%	90%

Acute (Emergency) Medications***

Local Pharmacy
0%

*Stabilization period or being stabilized means that you have received 90 days of the same medication (same DIN) within the previous four months.

** Maintenance medications are those drugs that a doctor has prescribed for regular (i.e. daily) use, and include, but are not limited to: drugs for diabetes, cholesterol, asthma, high blood pressure, hormone therapy and birth control.

*** Acute medications are defined as drugs which are used to treat sudden and acute health conditions. For example: antibiotics, antivirals, allergic reaction medications, mild to moderate pain medications, etc.

Note: Alliance Pharmacy is a central dispensing pharmacy for maintenance drug prescriptions

Health Care Practitioners

	Practitioners	Maximum		
		Annual	Per Visit	Combined
Paramedical Services	Acupuncturist	\$500	R&C	Combined Maximum for All Practitioners \$500
	Audiologist	\$500	R&C	
	Chiropractor (includes x-rays)	\$500	R&C	
	Dietician	\$500	R&C	
	Massage Therapist/Orth therapist	\$500	R&C	
	Naturopath	\$500	R&C	
	Occupational Therapist	\$500	R&C	
	Osteopath (includes x-rays)	\$500	R&C	
	Physiotherapist/Physical Rehabilitation Therapist	\$500	R&C	
	Podiatrist/Chiropodist (includes x-rays)	\$500	R&C	
	Psychologist/Social Worker/Clinical Counsellors	\$500	R&C	
	Speech Therapist	\$500	R&C	

Vision Care (Eyeglasses, contact Lenses and laser vision correction)	Adults - Maximum \$200 per 24 consecutive months Dependent Children – maximum \$200 every 24 consecutive months
Hospital:	
Hospital Room Accommodation	Semi-Private
Hospital Indemnity Benefit	Cash payment of \$40 per day <ul style="list-style-type: none"> commencing on the 5th day consecutive day of hospitalization maximum 180 days per calendar year
Convalescent Care	\$40 per day <ul style="list-style-type: none"> combined maximum of 90 days per calendar year
Other medical Expenses:	
*Requires a referral or prescription from a physician	
Eye Exams	Maximum 1 per 24 months
External Breast Protheses	1 per breast per calendar year
*Artificial Limbs	\$10,000 per prosthesis per limb every 60 consecutive months
*Private Duty Nursing	\$10,000 per calendar year
*Off-the-shelf Orthopedic Shoes and Orthopedic Modifications	Stock-item Orthopedic shoes, including modifications and adjustments <ul style="list-style-type: none"> \$300 per calendar year
*Orthopedic Shoes	Custom-made orthopedic shoes \$300 per calendar year
*Foot Orthotics	Casted, custom-made orthotics \$300 per calendar year
*Wigs Following Chemotherapy	\$500 per lifetime
*Hearing Aids	\$500 per 36 consecutive months
*Magnetic Resonance Imaging (MRI)	\$1,000 per calendar year (when not prohibited by provincial legislation)
Sclerosing Agents	\$15 per visit
Special Vision Benefit after Cataract Surgery	Lifetime maximum \$300
*Support Hose	4 pairs per calendar year
Surgical Brassiere	4 per calendar year
*Blood Glucose Monitor	Supplies for Continuous Glucose Monitors are covered but limited to: <ul style="list-style-type: none"> a maximum of 26 sensors per calendar year a maximum of 2 transmitters per calendar year
*Electric Hospital Bed	\$3,000 every 60 consecutive months
*Mobility Aids	Scooters and wheelchairs are subject to an overall maximum of \$3,000 combined every 60 consecutive months
*Stump Socks	5 pairs per calendar year
*Transcutaneous Electrical Nerve Stimulator ()	\$1,000 every 60 consecutive months
Extremity Pumps for Lymphedema	\$1,500 per lifetime

<i>*Mechanical or Hydraulic Patient Lifters</i>	Replacement period of once every 60 consecutive months and maximum \$2,000 lifetime
<i>*Outdoor Wheelchair Ramp</i>	\$2,000 per lifetime
<i>*Speech Aids</i>	\$1,000 per lifetime
<i>Accidental Dental Injury</i>	Covers dental care required as a result of accidental injury to whole, healthy, natural teeth <ul style="list-style-type: none"> care must be received within 12 months of the date of the accidental injury
	<i>Out-of-Province Medical Referral</i>
<i>Out-of-Province Referral</i>	Expenses for non-emergency referral treatments: maximum \$10,000 Calendar Year
	<i>Travel Insurance and Assistance (Out Of Province Emergency)</i>
<i>Travel Insurance and Assistance</i>	\$5,000,000 Per Insured Person per trip <ul style="list-style-type: none"> maximum duration of coverage: up to 180 Days per trip
	<i>Travel Cancellation Insurance</i>
<i>Travel Cancellation Insurance</i>	\$5,000 Per Insured Person per trip
<i>Diagnosis +</i>	Allows an insured person under age 65 to obtain a medical second opinion

Virtual Healthcare **AKIRA**

The GroupHEALTH Virtual Healthcare Solution (VHC), powered by Akira, is a confidential, online service that provides on-demand access by mobile phone or computer to knowledgeable, friendly primary care providers wherever You are and whenever you need it. The VHC service provides anytime/anywhere access to medical assistance without the need to use valuable sick days or personal time for doctor visits.

The VHC service is accessible 24/7, 365 days a year by secure text and video and provides:

- Access medical professionals through either a mobile app (iPhone and Android) or computer.
- Advice on your medical concerns
- Write new prescriptions and renew existing prescriptions
- Make referrals to specialist and other health care professionals
- Where necessary, help facilitate appropriate in-person care.
- Provide medical documentation and notes

Consult Fees

Access to the GroupHEALTH VHC Solution is provided to You and Your Dependents as part of Your benefit plan. Depending on which province You reside in, there may be a Consult Fee for each virtual consult session.

Referrals to other healthcare professionals may incur additional charges.

Employee & Family Assistance **Lifeworks**

LifeWorks® Employee and Family Assistance Program

LifeWorks is an Employee and Family Assistance Program (EFAP) and work-life/wellbeing resource designed to help you and your dependents with a variety of issues, concerns, or questions.

LifeWorks is confidential support and services for work, life, family, health, money, and everything in between. The program includes:

- 24/7 access to expert consultants for work-life advice, information, and resource
- access to counselling
- referrals to a network of community resources
- a secure desktop website full of practical wellbeing content
- mobile app for iPhone or Android

You can access LifeWorks 24 hours a day, seven days a week, 365 days a year, by toll-free number, online at login.lifeworks.com, or by mobile app, for support related to:

- Life: Stress/Overload, Anxiety, Depression, Grief/Loss, Community Resources
- Family: Parenting, Separation/Divorce, Blended Families, Caring for Older Adults, Education
- Money: Saving/Investing, Debt Management, Estate Planning/Wills, Home Buying/Renting
- Work: Work Relationships, Job Stress/Burnout, Managing People
- Health: Fitness/Nutrition, Sleep, Addiction/Recovery, Smoking Cessation

Dental Care

<u>Class 2</u>	
<i>Calendar Year Deductible</i>	None
<i>Rates Based on Dental Procedure Fee Guide:</i>	Current fee guide for general practitioners in the province where the expenses were incurred. When a fee guide is not published for a given year, the term fee guide may also mean an adjusted fee guide established by the insurer.
<i>% Payment of Eligible Expenses</i>	<p>Basic Dental Care90 %</p> <ul style="list-style-type: none"> Examinations and Diagnostic Services Preventive Dental Care <p>Examinations and Diagnostic Services</p> <ul style="list-style-type: none"> recall or periodic oral examination: once every 9 months complete oral examination: once every 24 months complete periodontal examination: once every 9 months <p>Preventive Services</p> <ul style="list-style-type: none"> polishing of coronal portion of teeth: one unit every 9 months scaling and root planning: 12 units of time per calendar year topical application of fluoride: once every 9 months <p>Routine Dental Care90 %</p> <ul style="list-style-type: none"> Minor Restorative Services Endodontics Periodontics Rebase, Reline, Adjustment and Repair of Removable Dentures Repair of Fixed Bridges and Crowns Oral Surgery Additional Services <p>Dental Restorative Services N/A</p> <p>Orthodontic Care N/A</p>
<i>Maximum Amount Covered</i>	<p>Basic Dental Care / Routine Dental Care / Dental Restorative Services</p> <ul style="list-style-type: none"> combined maximum of \$1,500 per insured per calendar year
	General Benefit Provisions
<i>Dependent Children Eligibility</i>	<p>Dependent Children are eligible from birth to:</p> <ul style="list-style-type: none"> age 22 or age 26 if in full time attendance as a student at a recognized educational institute
<i>Survivor Benefit</i>	<p>If an employee dies while insured, insurance will continue for his/her dependents who were covered under this benefit at the time of the employee's death</p> <ul style="list-style-type: none"> without premium payment for a maximum of 24 months from the date of the employee's death
<i>Termination Age</i>	An employee's insurance terminates at age 70 or earlier retirement.

Life Insurance

Class 2	
Benefit Amount	\$50,000
Maximum Benefit	\$50,000
Non-Evidence Maximum	\$50,000
Benefit Reduction	The amount of insurance reduces by 50% at age 65
Waiver of Premium	The elimination period for Waiver of Premium matches the Elimination Period for Long-Term Disability (LTD) if You are eligible to receive LTD benefits. Otherwise, the Elimination Period for Waiver of Premium is 6 months of continuous Total Disability.
Definition of Total Disability	As defined under the Long-Term Disability (LTD) benefit, or if You are not covered for LTD, then as defined in the Group Life Insurance benefit description
Conversion Privilege	Included to age 65
Living Benefit	<p>Employees who suffer a terminal illness may be eligible to receive 50% of their group life insurance amount</p> <ul style="list-style-type: none"> the maximum benefit payable under this section is \$50,000
Termination Age	An employee's insurance terminates at age 70 or earlier retirement.

Dependent Life Insurance

<u>Class 2</u>	
<i>Benefit Amount for Spouse</i>	\$5,000
<i>Benefit Amount for Each Child</i>	\$2,500
<i>Dependent Children Eligibility</i>	<p>Dependent children are eligible from birth to:</p> <ul style="list-style-type: none"> age 22, or age 26 if in full time attendance as a student at a recognized educational institute
<i>Stillbirth Benefit</i>	In the event of a stillbirth the plan will pay the child benefit amounts
<i>Termination Age</i>	An employee's insurance terminates at age 70 or earlier retirement

Accident & Serious Illness (ASI)

Class 2																																							
Employee's Principal sum	Equal to the group life insurance amount for all employees																																						
Benefit Reduction	Same as group life																																						
Enhanced Schedule of Losses	<p>If, within 12 months of the date of the accident, injury results in any of the following losses, the insurer will pay as follows:</p> <table border="1"> <thead> <tr> <th>Loss or Loss of Use of</th> <th>% of Principal Sum</th> </tr> </thead> <tbody> <tr> <td>Life</td> <td>100%</td> </tr> <tr> <td>Both Hands</td> <td>100%</td> </tr> <tr> <td>Both Feet</td> <td>100%</td> </tr> <tr> <td>Entire Sight of Both Eyes</td> <td>100%</td> </tr> <tr> <td>One Hand and One Foot</td> <td>100%</td> </tr> <tr> <td>One Hand and the Entire Sight of One Eye</td> <td>100%</td> </tr> <tr> <td>One Foot and the Entire Sight of One Eye</td> <td>100%</td> </tr> <tr> <td>Speech and Hearing in Both Ears</td> <td>100%</td> </tr> <tr> <td>One Arm</td> <td>100%</td> </tr> <tr> <td>One Leg</td> <td>100%</td> </tr> <tr> <td>One Hand</td> <td>66⅔%</td> </tr> <tr> <td>One Foot</td> <td>66⅔%</td> </tr> <tr> <td>Entire Sight of One Eye</td> <td>66⅔%</td> </tr> <tr> <td>Speech or Hearing in Both Ears</td> <td>66⅔%</td> </tr> <tr> <td>Thumb and Index Finger of Either Hand</td> <td>33⅓%</td> </tr> <tr> <td>Four Fingers of Either Hand</td> <td>33⅓%</td> </tr> <tr> <td>Hearing in One Ear</td> <td>33⅓%</td> </tr> <tr> <td>All Toes of One Foot</td> <td>25%</td> </tr> </tbody> </table>	Loss or Loss of Use of	% of Principal Sum	Life	100%	Both Hands	100%	Both Feet	100%	Entire Sight of Both Eyes	100%	One Hand and One Foot	100%	One Hand and the Entire Sight of One Eye	100%	One Foot and the Entire Sight of One Eye	100%	Speech and Hearing in Both Ears	100%	One Arm	100%	One Leg	100%	One Hand	66⅔%	One Foot	66⅔%	Entire Sight of One Eye	66⅔%	Speech or Hearing in Both Ears	66⅔%	Thumb and Index Finger of Either Hand	33⅓%	Four Fingers of Either Hand	33⅓%	Hearing in One Ear	33⅓%	All Toes of One Foot	25%
Loss or Loss of Use of	% of Principal Sum																																						
Life	100%																																						
Both Hands	100%																																						
Both Feet	100%																																						
Entire Sight of Both Eyes	100%																																						
One Hand and One Foot	100%																																						
One Hand and the Entire Sight of One Eye	100%																																						
One Foot and the Entire Sight of One Eye	100%																																						
Speech and Hearing in Both Ears	100%																																						
One Arm	100%																																						
One Leg	100%																																						
One Hand	66⅔%																																						
One Foot	66⅔%																																						
Entire Sight of One Eye	66⅔%																																						
Speech or Hearing in Both Ears	66⅔%																																						
Thumb and Index Finger of Either Hand	33⅓%																																						
Four Fingers of Either Hand	33⅓%																																						
Hearing in One Ear	33⅓%																																						
All Toes of One Foot	25%																																						
Paralysis Benefits	<p>Included at 200% of Principal Sum for</p> <ul style="list-style-type: none"> • quadriplegia (complete paralysis of both upper and lower limbs) • paraplegia (complete paralysis of both lower limbs) • hemiplegia (complete paralysis of upper and lower limbs of one side of the body) 																																						
Critical Disease Benefit	<p>Employees under age 65 who are totally disabled from a covered critical disease may be eligible to receive a benefit as follows:</p> <ul style="list-style-type: none"> • a lump sum payment equal to 10% of their Principal Sum • the maximum benefit payable under this section is \$50,000 • covered critical diseases include Polio, Parkinson's, MS, ALS, Alzheimers, Huntington's Chorea, Type 1 Diabetes, Peripheral Vascular Disease, Necrotizing Fasciitis 																																						

<p><i>Serious Illness Benefit</i></p>	<p>Employees under age 65 may be eligible to receive a benefit if they suffer a covered serious illness as follows:</p> <ul style="list-style-type: none"> • a lump sum payment equal to 10% of their Principal Sum • the maximum benefit payable under this section is \$10,000 • covered serious illnesses are Cancer, Heart Attack, Stroke and Kidney Failure <p><i>Pre-Existing Conditions Applicable to the Serious Illness Benefit</i></p> <p>An exclusion applies to a serious illness which commences within 24 months of becoming insured, and which results from a pre-existing condition for which the employee sought or received medical advice, consultation, investigation, diagnosis, or for which treatment was required or recommended by a Physician during the 24 months immediately prior to becoming insured</p>
<p><i>Day Care Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum 5% of Principal Sum or \$5,000 • payable per year for 4 years for each child
<p><i>Disability Fitness Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum \$5,000
<p><i>Education Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum 5% of Principal Sum or \$5,000 • payable per year for 4 years for each child
<p><i>Eyeglass & Hearing Aid Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum \$1,000
<p><i>Family Transportation Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum \$15,000
<p><i>Funeral Expense Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum \$5,000
<p><i>Home Alteration Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • also includes Vehicle Modification Benefit • combined maximum \$25,000
<p><i>Parental Care Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum 5% of Principal Sum or \$5,000
<p><i>Psychological Therapy Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum \$15,000
<p><i>Rehabilitation Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum \$15,000
<p><i>Repatriation Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum \$15,000
<p><i>Seat Belt Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • benefit payable in the event of a loss is increased by 10% if the insured person was wearing a seat belt
<p><i>Spousal Retraining Benefit</i></p>	<p>Included</p> <ul style="list-style-type: none"> • maximum \$15,000

Exposure and Disappearance	Included
Waiver of Premium	Premiums are waived during the period that premiums are waived for group life insurance
Conversion Privilege	<p>Employees have the right to convert to individual coverage without health evidence when their employment terminates</p> <ul style="list-style-type: none"> any individual policy issued under the conversion privilege does not include the Serious Illness Benefit or Critical Disease Benefit
Termination Age	An employee's insurance terminates at age 70 or earlier retirement

Schedule of Insurers and Service Providers

Benefit	Insurance Company
	Service Providers
Group Life Insurance	SSQ Financial Group
Accident & Serious Illness	Industrial Alliance Pacific
Dependent Life	SSQ Financial Group
Long Term Disability*	SSQ Financial Group
	GH Claims / DMI Early Intervention
Extended Health Care	SSQ Financial Group
	myGroupHEALTH
Dental Care	SSQ Financial Group
	myGroupHEALTH
Medical Second Opinion Service	Diagnosis+
Virtual Healthcare	Akira
Employee & Family Assistance (EFAP)	LifeWorks®
Out of Country	SSQ/CanAssistance
Protector Series™ Optional Life Insurance	The Co-operators
Protector Series™ Optional Accident & Serious Illness (ASI)	Industrial Alliance Pacific
Protector Series™ Optional Critical Illness	Temple Insurance Company

*Insured by SSQ Financial Group, acting on behalf of the employee and employer, the Disability Management Institute (DMI) provides additional support and services.

GroupHEALTH - Broker Contact Information

CLAIMS

[1.833.344.6944](tel:18333446944)

Mon-Fri | 8:00am – 8:00pm (EST)

CONTACT

[1.877.542.4110](tel:18775424110)

Toll-free: [1.888.719.3077](tel:18887193077)

Mon-Fri | 8:00am – 8:00pm (EST)

<https://solutions.grouphealth.ca/s/help-with-mygrouphealth/>