

CADA 360 Quebec Retirees Plan

CADA 360 Quebec Retirees Plan offers exceptional travel emergency medical coverage and life insurance protection exclusively to Quebec dealership retirees and their families.



Who is eligible to join?

All applicants and their eligible dependants must be covered by a provincial government health plan in Canada and pay the required premiums.

Dealership retirees:

- age 55 or older;
- whose age plus years of service at the dealership equals 65 or more (this requirement is not applicable to retiring dealer principals), and;
- whose coverage under the dealership from which they are retiring has been in place with CADA 360 for the most recent five consecutive years prior to retirement.

Surviving Spouses of Actively working dealer principals and employees must:

- apply for coverage under the Quebec Retirees Plan within 60 days of the end of coverage of the survivor benefit under the dealership plan, and
- pay the premium.

Surviving Spouses of covered retirees must:

- have been covered under the Quebec Retirees Plan as a spouse on the date of death; and
- apply for coverage within 60 days of the date of death, and
- pay the premium.

This document is a summary of the coverages available under CADA 360 Quebec Retirees Plan and is not a contract of insurance.

When you sign up for coverage, you will receive a package that includes complete coverage details, limitations and exclusions.

Contact Canada Life Benefits Administration Solutions at **1-866-656-5118** or bas@canadalife.com if you have any questions about coverage or how to sign up.



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When does coverage start?

To make sure there is no gap in coverage, you should apply for the Quebec Retirees Plan at least one month in advance of your retirement date. Coverage under the Quebec Retirees Plan becomes effective the day after your CADA 360 active benefits plan ends and when your application for the coverage is approved.

If you apply for coverage within the 60 days following the date you become eligible, coverage will be back-dated to the date after your dealership benefits terminate, and you will need to pay retroactive premium back to the effective date of coverage. If you apply more than 60 days following the date you become eligible, proof of good health will be required before coverage is approved, and coverage is not guaranteed.

When does coverage end?

Coverage will continue unless:

- the coverage is cancelled by the retired employee or surviving spouse;
- premiums are not paid; or
- CADA no longer offers this plan.

Coverage does not end at a specific age.

Who pays for coverage?

Premiums for coverage under this plan are paid by the retired employee or surviving spouse.

How do you enrol?

Contact Canada Life's Benefits Administration Services at 1-866-656-5118 or bas@canadalife.com to request a current enrolment package.

Who can be covered as dependants?

A spouse can be as a dependant if they are the retiree's legal spouse or common-law spouse.

A child can be covered for health and dental benefits as a dependant if they are:

- An unmarried natural, adopted or step-child of the retired employee or covered spouse; or
- Any other unmarried child for whom the retired employee or covered spouse is a court-appointed guardian.

A child under age 22 is not covered if they are working more than 30 hours a week, unless they are full-time students.

A child age 22 or over must be:

- A full-time student under age 26 (age 30 for children of retired dealer principals), or
- Continuously unable to take care of and support himself or herself, beginning before age 22.

CADA reserves the right to end or change the coverage or rates under this plan with reasonable notice to plan participants.

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Life Coverage (Optional)

Coverage is available for dealership retirees in the amount of **\$10,000** or **\$25,000**.



Travel Emergency Medical Coverage

Out-of-Country Medical Referrals

An out-of-country medical referral is covered if:

- It is required because of a referral from the person's usual Canadian physician;
- The service is not available in the person's home province but is available elsewhere in Canada or the United States;
- The person applies and is approved for benefits through the person's government health plan.

The maximum amount payable is \$10,000 in a person's lifetime.

Out-of-province & out-of-country

For trips up to 180 days, the plan covers out-of-province and out-of-country travel emergency medical expenses up to \$1,000,000 in a person's lifetime.

A medical emergency is:

- A sudden and unexpected injury; or
- The onset of a condition not previously known or identified prior to departure from Canada; or
- An unexpected episode of a condition known or identified prior to departure from Canada.

An unexpected episode means it would not have been reasonable to expect the episode to occur while travelling outside Canada. Where it is indicated that the patient was suffering from symptoms before departure from Canada, Canada Life may request medical documentation to determine whether a pattern existed to the extent it could have reasonably been anticipated that the patient may require medical treatment while outside Canada.

Once emergency treatment for an injury or condition is over, costs associated with any ongoing medical treatment related to that injury or condition are not covered. If, after the emergency treatment the patient remains hospitalized and requires continued care, Canada Life and the travel assistance provider may arrange for the patient's return to Canada provided the patient's health permits a medical transfer. If the patient's health permits a medical transfer but the patient chooses to remain outside Canada and receives follow-up care outside Canada, the costs of such care and the return to Canada would not be eligible for coverage.

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Out-of-province & out-of-country (continued)

Any pregnancy-related charges incurred outside Canada are not covered if:

- They are incurred within nine weeks prior to or after the expected delivery date; or
- They are incurred at any time prior to the 9th week of pregnancy and the patient's Canadian physician considers the pregnancy a high risk; or
- They are costs associated with a child born outside Canada within nine weeks of the expected delivery date, or after the expected delivery date.

Travel Assistance Services

Travel Assistance services can:

- Help you locate a medical facility.
- Arrange for admission to a hospital.
- Confirm your coverage with the hospital.
- Guarantee payment for hospitalization, if necessary.
- Provide interpretation services.
- Contact your family doctor, when needed.
- Contact your family, at your request.
- Arrange for and coordinate emergency medical transportation.
- Coordinate your return home.

This plan is coordinated with provincial health plan coverage.

Trip cancellation

Trip cancellation provides coverage up to \$5,000 per person per trip for eligible expenses due to a medical emergency. Coverage does not include cancellation for non-medical reason such as carrier bankruptcy, inclement weather, or mechanical failure.

Employee Assistance Program (EAP)

Consult+ EAP, powered by Dialogue, offering mental health support, stress management, and assistance with family and life events, all aimed at improving overall well-being. Included at no additional cost for the 2025-2026 renewal year.

Confidential counselling

Available 24/7, support services are available in multiple ways; by phone, website or mobile app.

Wide array of services

The transition to retirement can be a big adjustment. Whether planned or unexpected, when life throws challenges your way, having the right tools available to support you can improve your well-being and provide effective coping strategies.

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