

HorizonFlex

My group benefits plan,
a brilliant choice!

› SUMMARY OF YOUR GROUP BENEFITS



This brochure presents a summary of the coverage options offered to you by Horizon Flex. Hold onto it.

To help create a rewarding work experience, Transat offers you a comprehensive group benefits plan: Horizon Flex. This plan includes a variety of coverage options to meet your needs.

FOR MORE INFORMATION ON HORIZON FLEX:

1 MUNDO
Cost simulator for help in making your choices
Plan brochure for detailed coverage descriptions

2 1-888-873-9200 medavie.bluecross.ca
Medavie Blue Cross Customer Contact Centre for questions about eligible expenses and claims payments

3 Your Human Resources Representative

Life, AD&D and Critical Illness Insurance



Basic life insurance	1X annual salary (employee)
Optional life insurance¹	<ul style="list-style-type: none"> Units of \$10,000 for the employee Units of \$10,000 for the spouse Units of \$5,000 for dependant children
Accidental death and dismemberment insurance	Same as basic and optional life insurance
Optional critical illness insurance¹	<ul style="list-style-type: none"> Units of \$10,000 for the employee Units of \$10,000 for the spouse Units of \$5,000 for dependant children (available only if you or your spouse have this coverage)

You can obtain coverage of up to \$50 000 without evidence of good health for you and your spouse if you enrol within 31 days of the date on which you became eligible for the plan.

[More details on Mundo](#)

¹ Evidence of good health required. Maximums, limits and exclusions may apply.

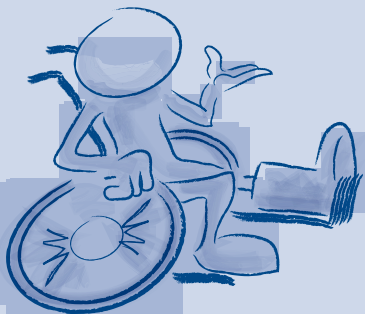
Disability Insurance

Short-term disability insurance

Waiting period	7 days (illness, accident, hospitalization)
Weekly benefit amount	66 ² / ₃ % of weekly salary (taxable)
Maximum benefit period	26 weeks

Long-term disability insurance

Waiting period	26 weeks
Monthly benefit amount	60% of the first \$2083 of monthly salary and 45% of excess (non taxable)
Maximum benefit period	Age 65
Cost of living adjustment (option)	Based on CPI, max. 3% / year, beginning 3 years after the onset of the disability





Medical Care

Horizon Flex offers you two levels of medical care coverage. Basic coverage gives you and your family a good level of financial security for dealing with unexpected events. The Option offers a high level of financial security and enhanced coverage for certain types of medical care and service.

	Basic	Option
Deductible per plan year	None	None
Prescription drugs	Reimbursement: 75% of the first \$2,500 per person and 100% of excess	Reimbursement: 75% of the first \$2,500 per person and 100% of excess
Glasses, contact lenses and laser eye surgery	\$150/24 months for children under age 21	\$300/24 months for adults and eligible children
Eye exams	\$60/24 months	\$60/24 months
Paramedical care²	Specialists: category 1 + physiotherapist Reimbursement: 75%, combined maximum of \$400	Specialists: categories 1, 2 and 3 Reimbursement: 75%, combined maximum of \$750 per category
Hospital	100%, semi-private room	100%, semi-private room
Lab fees	75%, maximum \$750	100%, maximum \$750
Medical services and equipment³	75%	100%
Emergency medical care outside the province	100%, maximum \$1,000,000 lifetime	100%, maximum \$1,000,000 lifetime

² Category 1: Psychologist and social worker.
Category 2: Chiropractor, physiotherapist, occupational therapist, kinesiologist, osteopath, podiatrist.
Category 3: Massage therapist (without medical recommendation), dietician, naturopath, acupuncturist.
Maximums apply per person and per plan year unless otherwise indicated.

³ Hearing devices, orthopaedic shoes, orthotic inserts, audiologist, speech therapist, insulin pumps, artificial limbs, etc. Some maximums may apply.



Dental Care

You automatically receive default dental care coverage, but have the option of opting-out of this coverage. If you opt-out, you will be granted credits to pay part of or the full cost of the medical care option or to deposit to a Health Spending Account (HSA). Please consult the brochure produced by the insurer for more details.

	Basic	Option
Deductible per plan year	\$25/person \$50/family	None
Preventive care (cleaning, scaling, exam)	75% Children under 21: 1 exam/6 months Other insureds: 1 exam/9 months	90% Children under 21: 1 exam/6 months Other insureds: 1 exam/9 months
Basic care (repairs, root canal therapy, teeth removal)	75%	80%
Major care (crowns, bridges, dentures)	Not covered	50%
Annual maximum	\$1000	\$2,000
Orthodontics	Not covered	For adults and children, 50%, maximum \$2,000 lifetime

Maximums apply per person and per plan year unless otherwise indicated.

A few clarifications...

MODIFICATION RULES

1. When a life event occurs

You can increase, reduce or maintain your coverage and/or the list of insured dependants within 30 days of:

- your marriage, common-law or civil union
- the birth or adoption of your child
- your divorce or separation
- the death of your spouse or child
- your spouse's loss or gain of coverage⁴
- the eligibility or ineligibility of a dependant child⁴
- eligibility for a provincial medical insurance plan⁴

You must make the changes directly to your account online at medavie.bluecross.ca.

⁴ Proof required

2. During the 2021 re-enrollment campaign

If you are an active employee at work on April 12, 2021, re-enrollment will allow you to:

- Increase, maintain or reduce your choice of medical or dental care coverage, as needed.
- Add or remove dependants or choose individual or family coverage.
- Add, maintain or remove the indexing option for long-term disability benefits.

For any other employment statuses, please refer to the communication available on Mundo or to the email announcing the launch of the 2021 re-enrollment period

3. At any time

You can increase or decrease your optional life, accidental death and dismemberment and critical illness insurance. Evidence of good health may be required.

COST SHARING RULES

Transat pays the cost of basic life insurance, basic accidental death and dismemberment insurance and short-term disability insurance. Transat also pays 100% of the cost of basic medical and dental care for the employee and 50% of the cost for dependants. To ensure that benefits payable in the event of a disability are non-taxable, the employee pays 100% of the cost of long-term disability insurance coverage. The employee also pays 100% of the cost of optional coverage. To learn more about the cost of various types of coverage, please use the online simulator available on Mundo.

PLAN YEAR

The plan year begins on May 1 and ends on April 30.

IF YOU TRAVEL

The travel assistance service is provided by CanAssistance. When leaving the country, be sure to bring your identification card. This card contains emergency telephone numbers. In the event of an emergency, contact CanAssistance **before** going to the hospital or incurring any expenses, if possible.

COVERAGE AND WAIVER

For medical and dental care, you have the choice of individual or family coverage. Your choice must be the same for both coverage.

You can waive medical care coverage if you are covered by a private insurance plan (e.g.: your spouse's employer's plan). In such a case, proof of coverage is required and you must also waive dental care coverage. You can also opt-out of dental care coverage with no proof of coverage required.

Travel insurance for employee waiving medical care coverage

If you choose to waive medical care coverage, you will still benefit from travel insurance and assistance coverage provided by Transat. Premiums are paid by Transat and represent a taxable benefit in Quebec.

Your dependents

Exact definitions of your eligible dependents under the group benefits plan can be found in the official booklet prepared by the plan insurers and available on Mundo. Here are some general definitions of eligible dependents:

Spouse: Person to whom you are legally married or with whom you are in a formal union under the law, or who has been publicly represented as your spouse for at least one year, or with whom you have a child.

Dependent children: Your child or your spouse's child who is not married or in a formal union under the law and who is under age 21 (or under age 26 if a full-time student) and entirely dependent on you for financial support. A child diagnosed with a physical or mental disability before reaching the age limit will remain covered after reaching the age limit as long as he or she is unable to support him or herself financially and you provide financial support.

HEALTH SPENDING ACCOUNT

If you opt-out of dental care coverage and choose basic medical care coverage, you are entitled to a Health Spending Account. A Health Spending Account is an annual allocation that you can use to obtain reimbursement for medical and dental expenses that will not be covered by the plan. The unused balance at the end of the year is carried forward for a maximum of one year, after which it is lost.

CLAIMS

The traditional paper claim form is not the only method for submitting claims.

You can use your identification card at the pharmacy to automatically send your drug claims to Medavie Blue Cross. If your dentist or some paramedical specialists have the required equipment, they can submit your claims directly to Medavie Blue Cross.

You can also submit most of your claims online. Restrictions may apply. Visit medavie.bluecross.ca.

The travel assistance service is provided by CanAssistance. When leaving the country, be sure to bring your identification card. This card contains emergency telephone numbers. In the event of an emergency, contact CanAssistance before going to the hospital or incurring any expenses, if possible.

This summary was prepared for the use of Transat employees and does not replace the official booklet prepared by the plan insurers and available on Mundo. If the information presented in this summary differs from the official booklet, the official booklet shall prevail.

Exclusions and restrictions may apply. They are outlined in the official booklet prepared by the plan insurers.

Transat reserves the right to modify or terminate the coverage offered, or to change the eligibility or cost sharing rules of the benefits plan. In this event, Transat would notify you of the changes as soon as possible.

March 2021