

FREQUENTLY ASKED QUESTIONS

The term “Guaranteed Coverage Amounts” is used throughout these FAQs. This is the amount of coverage available to you without needing to answer medical questions.

The Guaranteed Coverage Amounts available to SGEU members are as follows:

LIFE INSURANCE	CRITICAL ILLNESS INSURANCE
\$100,000 for you; and/or \$50,000 for your spouse; and \$10,000 for your child(ren)	\$40,000 for you; and/or \$40,000 for your spouse; and \$10,000 for your child(ren)

Please reference the FAQs for information about when these amounts are available.

These FAQs are designed to provide you with an overview of Protection Plus Benefits. This document is not a contract and all rights of insured persons are subject to the terms and conditions of the policy.

GENERAL

Who can apply for Protection Plus Benefits?

- Members (including members, associate members, employees, and affiliate members) of the Saskatchewan Government and General Employees’ Union (SGEU), who are:
 - a. under age 70;
 - b. Canadian residents; and
 - c. actively working more than 20 hours per week. Members on a maternity or parental leave under a provincial or federal program can also apply.
- Spouses of eligible members (i.e., legally married or living with the eligible member for at least one year), who are under age 70 and Canadian residents.
- Children of eligible members who are Canadian residents and:
 - a. under age 21; or
 - b. under 26 and attending an accredited educational institution, college or university on a full-time basis; or
 - c. became mentally or physically disabled while a child as defined in (a) or (b) and has been continuously disabled since that time.

Are my dependents covered?

This is up to you. You are in control of who you would like to cover. You can obtain coverage for you and/or your spouse and you can cover your dependent children if you and/or your spouse have coverage.

You have 31 days after the date of a marriage/common law union or the birth/adoption of a child to apply for Guaranteed Coverage Amounts for a new spouse or a new child, respectively.

Applying while on a leave of absence:

To apply for coverage, you need to be actively at work. When you return to work, you can obtain up to the Guaranteed Coverage Amounts with no medical questions asked, if you apply within 31 days of your return-to-work date.

Applying when you are a new member:

You can obtain up to the Guaranteed Coverage Amounts without medical questions if you apply within 31 days from your start date. You do not need to be enrolled in health and dental benefits to apply for Protection Plus Benefits.

Applying if you and your spouse are both SGEU members:

You can apply as a member and a spouse, or you can apply separately as two members. However, if you apply together on your application (member and spouse), your spouse CANNOT also secure coverage as a member, without providing medical information.

The Guaranteed Coverage Amounts are per insured person and cannot be combined. For added clarity, you cannot obtain \$150,000 in Life insurance coverage (\$100,000 as a member and \$50,000 as the spouse of a member) without providing medical information.

How do I apply for Protection Plus Benefits?

You can get a quote in seconds and apply in minutes by visiting protectionplusbenefits.ca and typing in the access code that is unique to SGEU..

Your access code is **MYSGEU**.

Simply select who you want to cover, and the coverage amount you want – rates appear in real time, and you can adjust your amounts of coverage to suit your needs and budget. Select the coverage that works for you and your family to complete the online application. It's that easy!

Can I apply without providing medical information?

Yes! If you apply during the special time-limited 'open enrolment' period or are a new member and apply within 31 days of your start date, you do not need to provide medical information to secure the Guaranteed Coverage Amounts. **The open enrolment period for SGEU is January 29 to February 29, 2024.**

Medical information is never needed for dependent children if you apply during an open enrolment period or within 31 days of their birth/adoption.

What if I wait to apply until AFTER the time-limited 'open enrolment' opportunity?

If you were eligible during the time-limited period but decide to wait until after this period had passed to apply, then you will need to answer medical questions as part of your online application to secure any amount of coverage, unless you experience a qualifying life event.

You will still visit protectionplusbenefits.ca and enter access code **MYSGEU**. The medical questions will simply appear as part of your application. Your application is still completed online and if more details are required based on your answers, Blue Cross Life will reach out to you to obtain this information.

What is a qualifying life event?

A life event is a situation resulting from one of the following that permits you to change your coverage:

- marriage or common law union;
- birth or adoption of a Child;
- divorce or legal separation; or
- death of a Dependent

Proof of health is required if the request is received more than 31 days after the Life Event date. A request to add or change your Child's coverage can only be made within 31 days of the Life Event date.

Do I have to buy the Guaranteed Coverage Amounts?

No! You choose the amount of coverage that works for you and your family. For you and your spouse, coverage is available in units of \$10,000 to a maximum of \$500,000 per insured person for Life and \$250,000 per insured person for Critical Illness. Coverage for dependent children is available in units of \$5,000 to a maximum of \$10,000.

The Guaranteed Coverage Amounts are simply what are available to you and your spouse without needing to provide medical information. You can take more coverage, or less.

When does my coverage become effective?

The effective date of your coverage is based on the date you apply. Guaranteed Coverage Amounts are always effective the first day of the month following the date Blue Cross Life receives your signed application. For example, if you apply in April, your effective date is May 1st.

If you request coverage that requires a review of your medical information, the effective date of the portion being reviewed will be communicated with you once your application has been processed and approved.

What proof of coverage will I receive?

After your application has been approved, you will receive a coverage summary and a Protection Plus Benefits booklet by email. This email provides your effective date and amount(s) of coverage, and the booklet provides you with all the details of your coverage. You should keep these together in a safe place.

What happens to my coverage during a leave of absence?

Your coverage will continue automatically. Premiums will continue to be deducted via pre-authorized debit and you will remain eligible to submit claims during your leave, assuming that all other terms of the coverage are met.

If you choose to: a) NOT to continue your coverage; or b) continue your coverage and then cancel it **DURING** your leave, you will not pay premiums and will not be eligible to make claims. You will need to re-apply as a new applicant and answer medical questions to obtain coverage again.

It is your responsibility to notify Blue Cross Life if you decide NOT to continue coverage. Please contact the Protection Plus Benefits Team at Blue Cross Life directly at 1-844-949-3809 if you would like to discuss your coverage during a leave of absence.

This answer is applicable to all leave of absence types.

What happens to my coverage when I leave the SGEU membership?

Your Protection Plus Benefits coverage is portable and will continue automatically if you leave the SGEU membership. Premiums will continue to be deducted via your preferred payment method and you will remain eligible to submit claims, assuming that all other terms of the coverage are met. No action is required unless you decide to cancel it.

Your coverage also continues automatically if you change jobs or transfer to a different part of the SGEU.

You can cancel your Protection Plus Benefits coverage at any time by contacting the Protection Plus Benefits Team at Blue Cross Life directly at 1-844-949-3809. Blue Cross Life agents are always happy to discuss your coverage requirements with you, including when you leave the SGEU membership.

When does Protection Plus Benefits coverage end?

Most commonly, coverage for you, your spouse and/or your dependent children will end the earlier of when:

- a. You terminate your coverage.
- b. Your premiums are not paid within 31 days of their due date.
- c. You or your spouse or your dependent child(ren) are no longer a full-time Canadian resident.
- d. Your spouse or your dependent child(ren) no longer meet the eligibility requirements.
- e. You or your spouse turn age 70, or your dependent child(ren) turn age 21 (age 26 if a full-time student).
- f. The maximum amount payable under the policy has been paid.
- g. You or your spouse or your dependent child(ren) commit fraud against Blue Cross Life.
- h. You or your spouse or your dependent child(ren) die.

Full details on when coverage ends are provided in the policy booklet.

How much does Protection Plus Benefits cost and how do I pay for it?

You can get a quote in seconds by visiting [protectionplusbenefits.ca](https://www.protectionplusbenefits.ca) and typing in the access code that is unique to SGEU: **MYSGEU**.

The price is impacted by several factors, including the amount of coverage selected, sex at birth, age, and use of tobacco products.

The risk of being diagnosed with a critical illness increases with age. To manage this risk, your premiums change when you enter a new age band. Starting at age 25, age bands are in 5-year increments (i.e. 25-29, 30-34 and so on). We always advise you by mail when there is a change to your premium.

When thinking about how much coverage you need, you should consider your income, financial obligations, dependents, health care needs, and current coverage.

Method of payment

During the application process, you choose to pay by pre-authorized debit (directly from your bank account) or by credit card. Someone can pay your premium on your behalf, but you will need to enter their banking/payment information on your application, and they will need to sign your application electronically. Premiums cannot be paid via payroll deduction because neither the Government of Saskatchewan nor the SGEU knows the amount(s) of coverage you have obtained.

Timing of payments

Premiums are charged on the first business day of each month.

If you do not see a charge for the first month of your coverage, it's probably because your application was processed after the payment cut-off date. In this case, your first payment will be charged at the same time as your second payment (on the first business day of the next month).

Non-payment

Coverage will end if your premiums are not paid within 31 days of the due date. Blue Cross Life may, at its own discretion, agree to reinstate your coverage if full payment is made within 60 days of the termination date. Blue Cross Life will notify you if your premiums have not been paid.

How do I submit a claim and when would I receive a benefit payment?

You complete the relevant claim form and submit it for review by an experienced Blue Cross Life claims adjudicator. Claim forms are available at <https://www.protectionplusbenefits.ca>. They can be submitted along with any supporting documentation according to the instructions on the claim form.

CRITICAL ILLNESS INSURANCE

What conditions are covered?

A total of 36 medical conditions are covered, based on definitions commonly used in the insurance industry. There are 25 conditions eligible for full payment (you can claim for two of these conditions and receive two full payments if the conditions are in unrelated categories). There are also four conditions eligible for a partial payment and seven childhood conditions eligible for a full payment.

A full list of conditions and exclusions and limitations can be viewed at protectionplusbenefits.ca.

I have a pre-existing condition. How does this affect my coverage and claims?

All types of insurance are meant to protect you against unknown risks. If you are diagnosed with a covered critical illness within the first two years of your coverage, no benefit will be paid if this illness is related to a pre-existing condition.

A pre-existing condition is a condition for which, during the two years before your coverage, you:

- a. had a medical consultation,
- b. were prescribed or were taking medication, or
- c. received treatment, including diagnostic measures, for any symptom of medical problem that led to the diagnosis of or treatment for the covered condition.

If you are diagnosed with an eligible condition within two years of being insured and your pre-existing condition has been deemed unrelated, your claim would be accepted, assuming all other terms of the policy were met.

If you are diagnosed with an eligible condition after being insured for two years or more, the pre-existing condition limitation no longer applies, regardless of the treatment you received prior to obtaining coverage.

Note that there is no coverage for cancer for 90 days after securing new coverage, or for Parkinson's Disease, specified Atypical Parkinsonian disorders and/or Multiple Sclerosis for one year after securing new coverage.

Here are some common scenarios:

I am taking medication for high cholesterol or high blood pressure, or I have diabetes. If I were to have a heart attack or stroke, would I receive a benefit payment?

If you are diagnosed after being insured for two years or more, the pre-existing condition limitation no longer applies and your claim would be accepted, assuming all other terms of the policy were met.

If you are diagnosed within two years of being insured, the claims adjudicator at Blue Cross Life would need to determine if there was a pre-existing condition that was related to your heart attack/stroke claim. See above for more information or consult the coverage details at protectionplusbenefits.ca.

Also, if your pre-existing condition is deemed unrelated to the condition for which you are claiming, your claim would be accepted, even if you have been insured for less than 2 years, assuming all other terms of the policy were met.

I was diagnosed with cancer five years ago. I am now in remission and cancer-free. If I were to be diagnosed with cancer again, would I receive a critical illness benefit payment?

Regardless of your medical history, no benefits are paid for cancer if within the first 90 days of being insured, you receive a cancer diagnosis or have any signs, symptoms or investigations leading to a diagnosis of cancer (regardless of when the diagnosis is made).

If you are diagnosed with an eligible cancer within two years of being insured and the signs, symptoms or investigations leading to this diagnosis started more than 90 days after being insured, the claims adjudicator at Blue Cross Life would need to determine if your diagnosis was related to a pre-existing condition. See above for more information or consult the coverage details at protectionplusbenefits.ca.

If you are diagnosed with an eligible cancer after being insured for two years or more and the signs, symptoms or investigations leading to this diagnosis started more than 90 days after being insured, the pre-existing condition limitation no longer applies and your claim would be accepted, assuming all other terms of the policy were met.

If I am diagnosed with a critical illness and then recover and return to work, will I receive a benefit payment?

Your eligibility for benefits is not dependent on your ability to work. If your claim is eligible according to the policy, your coverage pays a lump sum to use how you like. Please refer to the coverage details at protectionplusbenefits.ca for a complete list of definitions, terms, and conditions.

If my critical illness diagnosis is terminal, will I receive a benefit payment?

Even if your covered critical illness is terminal, the critical illness coverage may pay a benefit. To be eligible to file a claim, you must survive 30 days following the date of diagnosis. For example, if you were diagnosed with life-threatening cancer, the critical illness coverage will provide benefits if you survive at least 30 days, assuming all other terms of the policy are met.

COULDN'T FIND WHAT YOU WERE LOOKING FOR?

If you have other questions or need assistance, please call the Protection Plus Benefits Team at Blue Cross Life directly at 1-844-949-3809 or send an email to protectionplussupport@bluecrosslife.ca. Unlike your other benefits, Saskatchewan Blue Cross cannot answer questions about your application and/or coverage.