Contract A4999
April 1st, 2026
FSSS (CSN) – RSGE

Secteur des responsables de service de garde éducatif en milieu familial
FSSS CSN

The Inukshuk is an Inuit figure that symbolizes the importance of interpersonal relationships, mutual aid and solidarity.

Group insurance plan



beneva

Life insurance (optional participation)

Participant's basic life insurance[1] **AD&D**[1] **(Accidental death and dismemberment)**	**Option 1:** $25,000 per benefit **Option 2:** $50,000 per benefit
Participant's optional life Insurance	1 to 20 units of $10,000
Spouse's and dependent children's life insurance[1]	$5,000 / deceased person: if proof is provided that participant has no spouse at time of death: $10,000 / deceased child
Spouse's optional life insurance	$10,000 to $100,000 per unit of $10,000

Table of premiums applicable from April 1, 2026 (per 14-day period)		
Basic life insurance and AD&D	**Option 1:** $2.98	**Option 2:** $5.95
Spouse's and dependent children's life insurance	$0.57	

Participant's and spouse's optional life insurance				
Age of participant	**Cost per $10,000 of insurance**[2]			
	Female		**Male**	
	Non-smoker	**Smoker**	**Non-smoker**	**Smoker**
Under age 30	$0.14	$0.23	$0.25	$0.32
Age 30 to 34	$0.15	$0.25	$0.25	$0.32
Age 35 to 39	$0.21	$0.33	$0.30	$0.41
Age 40 to 44	$0.41	$0.63	$0.55	$0.72
Age 45 to 49	$0.57	$0.85	$0.75	$1.03
Age 50 to 54	$0.92	$1.29	$1.14	$1.59
Age 55 to 59	$1.65	$2.18	$1.95	$2.71
Age 60 to 64	$3.00	$3.64	$3.39	$4.60

Short term disability insurance (compulsory participation)

Benefit amounts and duration	
Option 1: $300 of benefits / week	**Option 3:** $500 of benefits / week
Option 2: $400 of benefits / week	**Option 4:** $600 of benefits / week

For a maximum duration of 52 weeks, without exceeding age 65. Benefits become payable after a waiting period of 7 consecutive days.

Table of premium applicable from April 1, 2026 (per 14-day period)	
Option 1: $27.00	**Option 3:** $45.00
Option 2: $36.00	**Option 4:** $54.00

Long term disability insurance
(optional participation)

Benefit amounts[3] and duration	
Option 1: $1,300 of benefits / month	**Option 3:** $2,000 of benefits / month
Option 2: $1,650 of benefits / month	**Option 4:** $2,350 of benefits / month

Without exceeding **age 65**

Table of premiums applicable from April 1, 2026 (per 14-day period)	
Option 1: $37.70	**Option 3:** $58.00
Option 2: $47.85	**Option 4:** $68.15

General information

Eligibility for insurance

Anyone who holds certification from the *Ministère de la Famille et des Aînés* as a person responsible for a home childcare service with three subsidized children or more is eligible for insurance provided this certification is permanent. They become eligible three months after the childcare service opens. On the date of eligibility, the RSGE is granted all benefits except the Short term disability insurance and Long term disability insurance benefits; these benefits are granted 3 months after the date of eligibility.

The ineligible person must obtain proof of their situation (example: renumeration slip) and submit it to Beneva to be exempted from participating in the insurance.

Payment of premiums

Preauthorized direct debit payments every 14 days.

Home childcare closing

Participant who closes their home childcare must inform Beneva winthin 30 days of the closing. If the participant does not inform Beneva within this period, their insurance will ends on the last day of the pay period coinciding with the receipt of the termination request, which implies that the participant is not eligible for retroactive reimbursement of premiums.

Assistance program

Coverage under the Assistance program is limited to a maximum of 9 hours of services in total per calendar year for all insureds of a same family.

1. Option 1 of Participant's Basic Life Insurance and Participant's AD&D Insurance, as well as Spouse's and Dependent Children's Life Insurance are granted by automatic registration, unless the participant opts out of these coverages. | 2. If no non-smoker's statement is provided, rates for smokers will apply. Premium rate changes subsequent to an age change are effective as of the 1st day of the premium period coinciding with or following the participant's birthday. However, for Spouse's Optional Life Insurance benefit, spouse's gender and smoking habits are used. | 3. The option chosen for the Long Term Disability Insurance must be the same option as the Short Term Disability Insurance.

Group insurance plan - FSSS (CSN) RSGE

Health insurance (compulsory participation)

Participation in one of the Health Insurance (Health 1, 2 or 3) is compulsory, unless entitled to an exemption. To be exempted from coverage, eligible employees must prove that they and their dependents are insured under another group insurance plan with a similar drug coverage.

Coverage options and statuses

Participants may choose a coverage option (Health 1, Health 2 or Health 3) and a coverage status (Individual, Single-Parent or Family) for their Health Insurance. Participants must maintain their participation to the chosen option (Health 2 or Health 3) for at least **36 months** before they can choose a less generous coverage option, unless an event stated in the contract occurs (a birth or a separation, for example).

Specifications regarding drug reimbursement

If an insured chooses to purchase an eligible innovative drug instead of any existing generic equivalent, the amount of reimbursement will be determined in accordance with its lowest cost generic equivalent. The amount that is included in the annual out-of-pocket is the one the insured would have paid should they have bought this lowest cost generic equivalent. However, it is possible to obtain a reimbursement based on the cost of the innovative drug that cannot be substituted for medical reasons by submitting the appropriate form duly completed by the attending physician, provided the request is approved by Beneva. **To be eligible, drugs must be available only by medical prescription.**

Coverage	Health 1	Health 2	Health 3
Prescription drugs			
*Prescription drugs and eligible pharmaceutical services Health 1: RAMQ list Health 2 and Health 3: Regular list § No deductible for a supply of at least 84 days	**$5 deductible** per purchased drug§ 70% as set by the BPDIP†, up to an annual out-ot-pocket maximum of $950 per certificate, per calendar year and 100% of eligible expenses thereafter	**$5 deductible** per purchased drug§ 75%, up to an annual out-ot-pocket maximum of $950 per certificate, per calendar year and 100% of eligible expenses thereafter	**$5 deductible** per purchased drug§ 80%, up to an annual out-ot-pocket maximum of $950 per certificate, per calendar year and 100% of eligible expenses thereafter
*Sclerosing injections	70%, maximum reimbursement of $25 / treatment for the substance injected	75%, maximum reimbursement of $25 / treatment for the substance injected	80%, maximum reimbursement of $25 / treatment for the substance injected
Emergency care			
Ambulance	70%	75%	80%
Travel insurance and assistance	100%, maximum reimbursement of $5,000,000 / trip	100%, maximum reimbursement of $5,000,000 / trip	100%, maximum reimbursement of $5,000,000 / trip
Travel cancellation insurance	100%, maximum reimbursement of $5,000 / trip	100%, maximum reimbursement of $5,000 / trip	100%, maximum reimbursement of $5,000 / trip
Other medical expenses			
*Cannabis for medical purposes (subject to prior approval by Beneva)	70%, maximum reimbursement of $2,000 / calendar year	75%, maximum reimbursement of $2,000 / calendar year	80%, maximum reimbursement of $2,000 / calendar year
*Gender affirmation surgery	Not covered	75%, maximum reimbursement of $10,000 / calendar year and a maximum lifetime reimbursement of $30,000	80%, maximum reimbursement of $10,000 / calendar year and a lifetime maximum reimbursement of $30,000
*Intrauterine devices (not covered under the prescription drug insurance benefit)	70%	75%	80%
*Transportation and accommodation	70%, maximum reimbursement of $48 / day and $1,000 / calendar year	75%, maximum reimbursement of $48 / day and $1,000 / calendar year	80%, maximum reimbursement of $48 / day and $1,000 / calendar year
*Artificial limbs and external prostheses	Not covered	75%	80%
*Blood glucose monitor		75%, maximum reimbursement of $240 / 36 months	80%, maximum reimbursement of $240 / 36 months
*Breast prosthesis and ostomy appliances		75%	80%
*Deep shoes		75%, maximum of $150 / calendar year	80%, maximum of $150 / calendar year
Dental surgery required following accident		75%	80%
*Detoxification		75%, maximum reimbursement of $50 / day and maximum lifetime reimbursement of $3,000	80%, maximum reimbursement of $85 / day and maximum lifetime reimbursement of $5,000
Hearing aid		75%, maximum reimbursement of $480 / 48 months	80%, maximum reimbursement of $480 / 48 months
*Hospital bed for domestic use		75%, rental or purchase if more economical	80%, rental or purchase if more economical
*Insulin pump		75%, maximum reimbursement of $6,400 / 60 months	80%, maximum reimbursement of $6,400 / 60 months
*Insulin pump accessories		75%	80%
*Intraocular lens		75%	80%
*Orthopaedic devices		75%	80%
*Orthopaedic shoes		75%	80%
*Support stockings		75%, maximum of 3 pairs / calendar year	80%, maximum of 3 pairs / calendar year
*Surgical brassiere		75%, maximum lifetime reimbursement of $200	80%, maximum lifetime reimbursement of $200
*Therapeutic devices and breathing assistance apparatus		75%, maximum lifetime reimbursement of $10,000	80%, maximum lifetime reimbursement of $10,000
*Transcutaneous electrical nerve stimulator (TENS)		75%, maximum reimbursement of $560 / 60 months	80%, maximum reimbursement of $560 / 60 months
*Wheelchair		75%	80%
*Wig required following chemotherapy		75%, maximum lifetime reimbursement of $300	80%, maximum lifetime reimbursement of $300
Health care professionals			
Dietitian and nutritionist	Not covered	Not covered	80%, combined maximum reimbursement of $750 / calendar year Furthermore: for kinesitherapist, orthotherapist and massage therapist: maximum reimbursement of 65$ / treatment
Kinesitherapist (including kinotherapist), orthotherapist and massage therapist			
Acupuncturist		75%, combined maximum reimbursement of $500 / calendar year	
Chiropractor and osteopath			
Physiotherapist and physical rehabilitation therapist			
Podiatrist			
Audiologist		75%, maximum reimbursement of 20 treatments / calendar year	80%, maximum reimbursement of 20 treatments / calendar year
Occupational therapist		75%, maximum reimbursement of 20 treatments / calendar year	80%, maximum reimbursement of 20 treatments / calendar year
Speech language pathologist		75%, maximum reimbursement of 20 treatments / calendar year	80%, maximum reimbursement of 20 treatments / calendar year
Psychologist, psychoanalyst, psychiatrist, psychoeducator, social worker, career counsellor and psychotherapist		50%, maximum reimbursement of $1,000 / calendar year	50%, maximum reimbursement of $1,500 / calendar year
Vision care			
Eye exam	Not covered	Not covered	**Adults and children age 18 + :** 80%, maximum reimbursement of $80 / 36 months
Eyeglasses, contact lenses or laser eye surgery	Not covered	Not covered	**Adults and children age 18 + :** 80%, maximum reimbursement of $400 / 36 months

Table of premiums applicable from April 1, 2026 (per 14-day period)

Coverage and statuses	Individual			Single-parent			Family		
	Health 1	Health 2	Health 3	Health 1	Health 2	Health 3	Health 1	Health 2	Health 3
Total premium	$64.78	$81.15	$91.81	$77.76	$100.71	$113.91	$142.58	$180.93	$203.81

Dental care (optional participation)

The **coverage statuses** for this plan may be **different** between the Dental care insurance and the Health insurance. For example, a participant can choose a Family status for the Health Insurance, and an Individual status for the Dental care insurance, and vice versa. New employees eligible under the Health insurance will be **automatically enrolled** in the Dental care insurance and the Individual status will be granted, unless the participant uses his right to opt out.

Participation duration

Participants who have subscribed to this Dental care insurance must maintain their participation for at least **36 months** from the effective date of this plan, even when an event stated in the contract occurs. However, the participant may change **coverage status** if an event stated in the contract occurs.

Reimbursement of Eligible Expenses	
Basic dental care (Diagnostic services, prevention and space maintainers, minor restoration, periodontics, oral surgery, local anesthesia)	80 %[4] One recall or periodic examination per period of 9 months and one complete examination per period of 36 months
Restorative dental care (Major restoration, endodontics, prosthodontics [fixed or removable])	60%, maximum reimbursement of $2,000 / calendar year

Table of premiums applicable from April 1, 2026 (per 14-day period)

Coverage statuses	Individual	Single-parent	Family
Total premium	$18.31	$30.14	$45.57

Coverages indicated with an asterisk (*) require a medical prescription to be eligible for reimbursement. | Eligible expenses incurred under the following coverage are included in the **annual out-of-pocket**: IUDs; Prescription drugs and eligible pharmaceutical services; Sclerosing injections; Ambulance; Artificial limbs and external prostheses; Breast prosthesis and ostomy appliances; Deep shoes; Intraocular lens; Orthopaedic devices; Orthopaedic shoes; Transportation and accommodation. | † BPDIP: Basic Prescription Drug Insurance Plan. | 4. Eligible lab test expenses are limited to 50% of the fees detailed in the fee guide for the orodental act in question.

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For more information, please feel free to contact Beneva Customer Service, from 8:00 a.m. to 8:00 p.m., Monday to Friday.

A web page has been designed for you as an RSGE!

You can access it by visiting **beneva.ca/en/assurance-collective/fsss-rsge** or by scanning the QR code below to go to the RSGE web page.

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