

## BULLETIN - 2014 PREMIUM RENEWAL

**TO:** Non-union employees covered under **ReFlex**  
**FROM:** Pension and Group Insurance Department  
**DATE:** November 2013  
**SUBJECT:** Group Benefits - Annual Re-enrolment in **ReFlex**

You must re-enrol annually in ReFlex. The 2014 re-enrolment period will take place beginning **Monday, November 18 starting at 9 am, to Friday, November 29, 2013, inclusively**. Your new benefit choices will take effect as of **January 1, 2014**. To re-enrol, you will have to directly access the FlexNet System<sup>1</sup> at the following address:

[www.aoncanada.com/reflex](http://www.aoncanada.com/reflex)

**In order to access the System, you will need your employee ID and your FlexNet PIN.**

In order to help you with your annual re-enrolment, you will find your "Renewal Statement" on the FlexNet site which confirms your personal information as well as your current options. Also available on the FlexNet site is the "FlexNet Guide" to help you navigate through the renewal.

If you require any further help, including a reminder of your personal PIN, please contact the *Service Center – Resolute Forest Products* at **1 877 387-2483** between 8:30 a.m. and 5:30 p.m. (Eastern Time) Monday to Friday.

**ALL employees must return their duly SIGNED "2014 Confirmation Statement" (printed from the FlexNet site), whether you modify your coverage or not, to the Service Center – Resolute Forest Products by November 29, 2013 at the latest, in the enclosed envelope.**

**Please note that you must send proof of full-time student status for your dependent children age 21 and over but under 26, attending an accredited institution, along with your Statement. This proof must be submitted every year; one of the following documents is accepted:**

- **A registrar's letter issued by the institution**
- **A copy of the tuition receipt issued by the institution**
- **A copy of your child's schedule**

**Your dependent children's coverage will automatically be terminated on January 31, 2014 if we do not receive the requested proof.**

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<sup>1</sup> The FlexNet System is not compatible with Mac computers.

Flexible Group Insurance Plan

## HIGHLIGHTS

### ***Slight costs increase for 2014***

We finalized the negotiation process with our carriers and the premium rates will change according to the following percentages as of January 1, 2014:

➤ <b>Employee Life Insurance</b>	}	No change
➤ <b>Long-term Disability Insurance</b>		
➤ <b>Health Care Plan</b>		
➤ <b>Dental Care Plan</b>		5% increase
➤ <b>Accidental Death and Dismemberment Insurance</b>		15% decrease
➤ <b>Global change</b>		0.7% increase

### ***Flex Dollars Formula***

The 2014 formula will remain unchanged:

**0.84% OF YOUR ANNUAL BASE SALARY + \$2,530**

However, if your salary increased during the last year, your flex dollars will be adjusted accordingly. Should your salary increase during the next year, your coverage and salary deductions will also be adjusted accordingly.

**Note that Resolute continues to pay almost 80% of the ReFlex plan total cost.**

## YOUR RE-ENROLMENT

### ***Life Insurance and Long-Term Disability***

You may increase or reduce the Life Insurance amount and/or Long-Term Disability level for yourself or the Life Insurance amount for your dependents. If you increase the insurance amount, a health questionnaire will be required. The insurer will contact you directly in order to process your request. Any additional coverage requested will take effect only once the insurance company has approved the request and will be subject to payroll deductions at that time.

### ***Accidental Death and Dismemberment***

You may increase or reduce the amount of insurance for yourself or your dependents. A health questionnaire is not required.

### ***Health and Dental Care***

The ReFlex plan allows you to switch from one option to another for health and/or dental care as per pre-established plan rules. You may therefore switch to a higher option but you must keep the same level of coverage for a minimum of **3 full years** before changing to a lower option. If your spouse or child is covered by ReFlex, he or she may only terminate his or her coverage on January 1<sup>st</sup> following 3 full years of coverage, unless they are no longer considered dependents under the plan. Please note that the minimum of 3 full years of membership will be calculated from the effective date of your last coverage

## Flexible Group Insurance Plan

change.

### **Health and Dental Care Exemption**

If you opt out of the Health and/or Dental Care coverage, the Flex Dollars that you receive for these benefits will be reduced by the following amounts:

- Health Care Exemption: \$700 reduction
- Dental Care Exemption: \$300 reduction

The maximum Flex Dollar reduction is \$1,000 if you opt out of both benefits.

**Should you opt out of both benefits, please pay close attention to your benefit choices to ensure they reflect your desired level of coverage and cost.**

### **Reminder – Your Health Expense Reimbursement Account (HERA)**



The flex dollars you allocated to your HERA in 2013, but that haven't been used yet, will be transferred over to the 2014 plan year.


Have you used all the flex dollars allocated to your HERA in 2012?


**If not, Manulife Financial must receive your reimbursement claim no later than January 31, 2014, in order to use your 2012 HERA.**

Remember that, according to Canada Revenue Agency (CRA) tax rules, amounts deposited in a Health Expense Reimbursement Account (HERA) that remain unspent after two years can no longer be used, and will be forfeited. If you are not sure of your HERA balance, you can either visit the Manulife Financial web site or contact them at the following phone number:

**Manulife Financial:** 1 800 268-6195  
[www.manulife.ca/groupbenefits](http://www.manulife.ca/groupbenefits)

### **The following is a reminder of how to print and where to send your 2014 Confirmation Statement:**

Once you have confirmed your coverage choices, return to the **Personal Information** section  and you will be able to access your **2014 Confirmation Statement** in the **Benefits** section:

- Click this link
- Print the **2014 Confirmation Statement** by clicking the printer icon  on the toolbar
- Sign **both** the **Beneficiary Designation** and **Declaration and Authorization** sections
- Send the original copy of your **2014 Confirmation Statement** to the Service Center – Resolute Forest Products at the following address:

Service Center – Resolute Forest Products  
Benefits Administration  
700 De La Gauchetiere St. West, Suite 1800  
Montreal QC H3B 0A7

Remember, the **Service Center – Resolute Forest Products** is available at **1 877 387-2483** between 8:30 a.m. and 5:30 p.m. (Eastern Time) Monday to Friday.