

Blue Mountain Resorts Group Benefit Program

We understand your needs are not like anyone else's. That's why Alterra Mountain Company's Flexible Benefits Program lets you choose the level of health, dental and income protection coverage that fits your needs.

How the Program Works

Income Protection

All eligible employees essential income protection coverage

Company Paid

- Employee Basic Life Insurance
- Employee Basic Accidental Death and Dismemberment Insurance

Employee paid

- Short Term Disability*
- Long Term Disability*

*YR-FT employees only.

Health & Dental Care

You choose one of the three coverage levels:

Bronze - For basic Health and Dental needs or if you have coverage elsewhere

Silver - For average Health and Dental needs

Gold - For above average Health and Dental needs

Optional Coverage

You can purchase extra income protection for yourself, your spouse and/or your dependent children.

- Optional Life Insurance
- Optional Accidental Death and Dismemberment
- Optional Critical Illness

Choosing Your Coverage

You select your desired coverage when you first join the plan. Your coverage choice will remain in effect from January 1 to December 31 each year. Health and Dental coverage may be changed each year during the open enrolment period to take effect each January 1st.

There may be times during the year when your personal situation changes, such as when you get married, divorced or have a child. When you have an eligible life event like these, you may change your coverage choice mid-year (within 31 days after the event).

Health Spending Account (HSA)

Alterra Dollars not used to assist in covering the cost of your chosen Health and Dental Care option are automatically deposited each pay period into a Health Spending Account (**Bronze coverage only**). You can use these funds to help pay for eligible medical and dental expenses not covered under our Benefit Plan or your spouse's plan. If you use all your HSA dollars during the benefit year and still have some expenses to claim, you can hold on to these expenses and submit them in the following benefit year when you have more HSA dollars in your account. You have 60 days after the end of the benefit year to submit expenses. After that, all unused HSA dollars will be forfeited.

You can choose from three Health Care and Dental Care options - Bronze, Silver or Gold. **You must make the same choice for both Health and Dental Care.**

HEALTH CARE	Bronze	Silver	Gold
Preventive and emergency care			
• Reimbursement	100%		
• Emergency Travel Insurance	Maximum 60 days per trip		
• Nursing Care	Maximum 720 hours per year		
• Smoking cessation	\$350 lifetime maximum		
• Vaccinations	\$400 per year		
Prescription Drugs: Mandatory generic substitution. Reimbursements based on lowest-cost alternative			
• Deductible	You pay \$900/person or family	You pay \$11 per prescription	You pay \$11 per prescription
• Coverage after deductible	100%	80%	100%
Other Health Care:			
• Reimbursement	Not applicable	80%	100%
• Hospital	Not covered	Semi-private room	Private room
• Orthotics/Orthopaedic shoes	Not covered	\$300/yr (\$150/yr for a child)	\$600/yr (\$300/yr for a child)
• Vision care	Not covered	\$200/24 mths (child -12 mths)	\$300/24 mths (child -12 mths)
• Eye Exams	Not covered	Every 24 mths to customary amount	Every 24 mths to customary amount
• Paramedical Services*	Not covered	\$1,000/yr for all practitioners combined	\$1,500/yr for all practitioners combined
• Psychologist Services**	Not covered	\$1000/yr for all practitioners combined	\$1,000/yr for all practitioners combined

*Includes the following practitioners: Acupuncturists, Audiologist, Certified Athletic Therapist, Chiropodist, Chiropractor, Naturopath, Occupational Therapist, Osteopath, Physiotherapist, Podiatrist, Registered Dietician, Registered Massage Therapist, Speech Therapy

**Includes the following Practitioners: Clinical Psychologist, Psychotherapist, Registered Clinical Counsellor (RCC), Registered Social Worker

DENTAL CARE	Bronze	Silver	Gold
Preventive, basic and major care:			
• Deductible	\$200 per person/family (no deductible for preventive care)	None	None
• Reimbursement	75%	80% - Preventive and Basic 50% - Major	90% - Preventive and Basic 60% - Major
• Annual maximum	\$1,000	\$2,000	\$3,000
• Checkup	9 units of scaling per year	9 units of scaling per year	9 units of scaling per year
• Recall exams	Every 6 months	Every 6 months	Every 6 months
Orthodontics:			
• Reimbursement	No coverage	50%	60%
• Lifetime maximum	No coverage	\$2,000	\$5,000

Employee Assistance Program (EAP)

COMPSYCHE offers someone to talk to and resources to consult whenever and wherever you need them

Confidential Emotional Support Work Life Solutions Career Counselling

Legal Guidance Financial Resources Wellness Tools

24/7 Live Assistance: **Call** 866-365-0892

Online: guidanceresources.com, **App:** Guidance Now, **Web ID:** ALTERRA

Income Protection Coverage

Benefit	Coverage Provided
Employee Basic Life Insurance	2 times your annual income, up to \$750,000 (reduced by 50% at age 65)
Employee Basic Accident Death & Dismemberment Insurance	2 times your annual income, up to \$750,000 (reduced by 50% at age 65)
Employee Short Term Disability Insurance (Year Round-Full Time employees only)	Income replacement for employees who cannot work due to illnesses and/or non-work related injuries. Benefit begins after an employee has been off for 7 days due to illness or begins immediately due to accident. There is an application procedure. Employee will be covered for 60% of their weekly earnings to a maximum of \$1000 per week, tax free.
Employee Long Term Disability Insurance (Year Round-Full Time employees only)	Income replacement for employees who cannot work due to illnesses and/or non-work related injuries and has been away from work for 26 weeks. There is an application procedure. Once approved by Sun Life, the employee will be covered for 60% of monthly earnings to a maximum of \$8000 per month, tax-free.

Optional Income Protection Coverage

Benefit	Coverage Available	Proof of Good Health Required
Optional Life Insurance		
For you	Up to \$500,000, in units of \$25,000	Yes
For your spouse	Up to \$500,000, in units of \$25,000	Yes
For your dependent children	Up to \$50,000, in units of \$10,000	No
Optional Accident Insurance		
For you and/or your spouse	Up to \$500,000, in units of \$25,000	No
For your dependent Children	Up to \$500,000, in units of \$25,000	No
Optional Critical Illness Insurance		
For you/or your spouse	Up to \$250,000 in units of \$10,000	Yes

	Blue Mountain	Employee Payroll Deductions
Life & Accident Insurance	✓	
STD & LTD (YR-FT only)		✓
Optional Insurance Protection		✓
Health & Dental Care	✓	✓ *

*There are no employee premiums for Bronze Health and Dental Coverage

Approximate Employee Benefit Premiums—Deductions Per Pay

*benefit premiums are deducted on a semi-monthly basis

Year Round-Full Time Employee - \$45,000			
	Bronze	Silver	Gold
Employee	\$66.00 (STD/LTD only)	\$79.00	\$128.00
Employee + 1	\$66.00 (STD/LTD only)	\$84.00	\$137.00
Employee + 2(+)	\$66.00 (STD/LTD only)	\$98.00	\$156.00

Year Round-Full Time Employees- \$75,000			
	Bronze	Silver	Gold
Employee	\$110.00 (STD/LTD only)	\$123.00	\$172.00
Employee + 1	\$110.00 (STD/LTD only)	\$128.00	\$181.00
Employee + 2(+)	\$110.00 (STD/LTD only)	\$142.00	\$200.00

*Employee STD/LTD premiums are based annual income. Premiums shown are approximate based on salaries indicated above. If an employee makes less than the above salaries, the premiums will be lower. If an employee makes more, the premiums will be higher.

Flex Year Round & Season to Season-Full Time Employee - No STD/LTD Coverage			
	Bronze	Silver	Gold
Employee	\$0	\$13.00	\$62.00
Employee + 1	\$0	\$18.00	\$71.00
Employee + 2(+)	\$0	\$32.00	\$90.00

Health Spending Dollars — Deposits Per Pay

Health Spending Dollars			
	Bronze	Silver	Gold
Employee	\$496 (\$19.08 per pay)	N/A	N/A
Employee + 1	\$496 (\$19.08 per pay)	N/A	N/A
Employee + 2(+)	\$496 (\$19.08 per pay)	N/A	N/A

Every effort has been made to ensure this information is accurate. In the event of a discrepancy between this information and the contractual agreement with Sun Life or the cost calculations made in Denver the contractual agreement and Denver’s calculations will take precedent.