

# Group Benefits Program Precision Drilling Corporation

Day Rate Employees



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This booklet was revised in January 2015.

Although current as of this date, changes to the booklet may have since occurred. This booklet and other benefits information can be found on Precision's employee benefits intranet site – BENEFIT Link.

To Log On to BENEFIT Link:

Go to: benefits.precisiondrilling.com

Enter "pdemployee" as the username and "benefits" as the password

# **BENEFITS AT A GLANCE**

# **DAY RATE EMPLOYEES**

Eligible for Basic Life, AD&D and BTA immediately, and all other benefits following 500 continuous hours of service

BENEFIT	COVERAGE	
Basic Life Insurance Provider: Sun Life	Benefit amount:  2 times regular annual earnings to a maximum of \$1,000,000	
<b>Dependent Life Insurance</b> Provider: Sun Life	<ul><li>Spouse \$10,000</li><li>Each child \$5,000</li></ul>	
Optional Life Insurance Provider: Sun Life	<ul> <li>Available in units of \$10,000 for employee and/ or spouse to a maximum of \$1,000,000 when combined with basic life insurance</li> </ul>	
Accidental Death & Dismemberment (AD&D) Provider: AIG	<ul> <li>Death benefit is equal to amount of basic life insurance</li> <li>Dismemberment benefit varies based on nature of loss</li> </ul>	
Optional Accidental Death & Dismemberment (AD&D) Provider: AIG	<ul> <li>Employee coverage or Family coverage</li> <li>Available in units of \$10,000 to a maximum of \$500,000</li> </ul>	
Business Travel Accident (BTA) Provider: AIG	Rig Managers and Field Superintendents: 10 times annual earnings to a maximum of \$750,000     All other Day Rate Employees: \$300,000     Dismemberment benefit varies based on nature of loss     Coverage does not include injury sustained during routine travel to and from work	
Extended Health Care Provider: Sun Life  Paramedical Vision Hospital	\$250 plus eye exam each 24 months	
Dental Care Provider: Sun Life  Recall Exam	<ul> <li>Basic and Preventative Services: 100% coverage, no maximum</li> <li>Major Restorative: 50% coverage, annual maximum \$2,500</li> <li>Child Orthodontic: 50% coverage, lifetime maximum \$2,500</li> <li>Covered for a child every 6 months, for an adult every 12 months</li> <li>16 units (15 minutes per unit) of scaling per year</li> <li>No coverage for adult fluoride</li> </ul>	

BENEFIT	COVERAGE
Short Term Disability (STD) Self-Insured by Precision Drilling	Rig Managers and Field Superintendents:  Benefits begin on 1st day  Maximum length of entitlement is 17 weeks  Payment is 100% of earnings (as defined below) for the first 6 weeks, reduced to 70% of earnings for the remaining 11 weeks  Payments are taxable  All other Day Rate Employees:
	<ul> <li>Benefits begin on 8th day of disability, or immediately if hospitalized</li> <li>Length of entitlement is based on service to a maximum of 17 weeks</li> <li>Payment is 70% of earnings</li> <li>Payments are taxable</li> </ul>
Long Term Disability (LTD) Provider: Sun Life	<ul> <li>Benefits begin after 17 weeks</li> <li>Monthly non-taxable benefit is 66.7% of the first \$2,250 of regular monthly earnings, plus 50% of the balance of monthly earnings to a maximum of \$20,000 per month (earnings as defined below)</li> </ul>
Employee and Family Assistance Program Provider: Homewood Health	Provides short-term counselling for employees and their dependents
Earnings Definition	Regular annual earnings are defined as regular day rate divided by 12 hours, multiplied by 2080 hours  Overtime and bonus are not included in the earnings calculation
Benefit Premiums	<ul> <li>Business Travel Accident, Short Term Disability and Employee &amp; Family Assistance insurance premiums are 100% employer paid</li> <li>LTD, Optional Life and Optional AD&amp;D insurance premiums are 100% employee paid</li> <li>Rig Managers and Field Superintendents:</li> <li>All other premiums are 100% employer paid</li> <li>All other Day Rate Employees:</li> <li>All other premiums are 60% employer paid and 40% employee paid</li> </ul>

# PRECISION DRILLING CORPORATION AND AFFILIATED COMPANIES DAY RATE EMPLOYEES

Welcome to your Group Benefits Program. Precision Drilling Corporation has designed this program in partnership with Sun Life Assurance Company of Canada (Sun Life), AIG Canada (AIG), and Homewood Health.

Please read this information carefully.

This booklet provides an overview of the comprehensive benefit program for current eligible employees of Precision Drilling Corporation and affiliated companies. If there is a question of interpretation, the official plan documents, contracts, and any legislated requirements will prevail. Precision Drilling Corporation expects and intends to keep the benefit program in force indefinitely, but reserves the right to modify, revoke, suspend, terminate, or change the plans in whole or in part at any time.

Possession of a booklet alone does not entitle an employee to insurance under this Policy. This Policy must be in effect and the employee must satisfy all the requirements of the Policy. The booklet is not a contract of insurance, nor does it create or confer any contractual or other rights.

# The coverage provided includes:

- 1. Sun Life
  - Extended Health Care
  - Dental Care
  - Basic Life Insurance
  - Dependent Life Insurance
  - Optional Life Insurance
  - Long Term Disability

# 2. AIG

- Accidental Death and Dismemberment (AD&D)
- Optional Accidental Death and Dismemberment (AD&D)
- Business Travel Accident (BTA)
- 3. Homewood Health
  - Employee and Family Assistance Program (EFAP)
- 4. Precision Drilling Corporation
  - Short Term Disability income continuance benefits

# COMMONLY ASKED QUESTIONS REGARDING YOUR BENEFIT PLAN:

# WHEN AM I ELIGIBLE FOR FULL GROUP INSURANCE COVERAGE?

You are eligible for Basic Life, Basic AD&D and Business Travel Accident coverage on your first day worked. You are eligible for all other benefits once you have completed 500 continuous hours of work.

At this time you will be enrolled for benefits according to the enrollment form you complete. Coverage is mandatory, therefore if the enrollment form is not completed, or completed incorrectly, you may be enrolled with incorrect coverage.

You must be a permanent employee working at least 20 hours a week.

### WHAT ARE THE POLICY NUMBERS?

The following numbers will be required when contacting the insurance carriers regarding any questions you may have.

# **Group Benefits Program:**

Sun Life policy	# 150353
Sun Life policy	# 100953
Sun Life policy	# 100953
AIG policy	# BSC 9138383
AIG policy	# PAI 9138384
AIG policy	# GTP 9138385
	Sun Life policy Sun Life policy AIG policy AIG policy

Certificate Number: Your Benefits Certificate Number is a 9 digit number

starting with "77". Please look for this number on your Sun Life benefits card, as well as on your pay stub.

**Group Policyholder:** Precision Drilling Corporation

#### HOW DO I SUBMIT AB EXTENDED HEALTH OR DENTAL CLAIM?

When purchasing prescription drugs, present your Sun Life benefits card to the pharmacist. Sun Life will be billed directly by the pharmacist. You are not required to make payment at the pharmacy, unless costs exceed the plan allowance.

When a vision or medical expense is incurred (or for drug claims where the Sun Life benefits card is not used) you are required to make payment at the time of service. You can then either submit a claim online at www.mysunlife.ca or submit the original receipt(s) along with an Extended Health Care Claim Form to Sun Life for reimbursement

When a dental expense is incurred, depending on the policy of your dentist:

- You will pay for the work at the time of service and submit your claim to Sun Life for reimbursement; or
- 2. Sun Life will make payment for services directly to the dentist.

When you visit your dentist, ensure you have your Sun Life benefits card. Give the information on your card to the dentist who will then complete a Standard Dental Claim Form. Your dentist may be able to electronically submit the Standard Dental Claim Form to Sun Life for processing.

If claims are to be mailed, please send to:

Sun Life Assurance Company of Canada PO Box 2010 Stn Waterloo Waterloo, ON N2J 0A6

All extended health and dental claims must be submitted within 365 days of the date the expense was incurred. On termination, all claims must be submitted no later than 90 days after your last day worked.

You are advised to keep photocopies of all original receipts in case re-submission is required. For claims submitted online, please keep your original receipts for 12 months after the date of submission.

# WHAT VISION COVERAGE DOES THE PLAN PROVIDE?

Your Precision Drilling Corporation plan provides coverage toward the cost of an eye exam for each family member once every 24 months. In addition, the plan will pay up to \$250 every 24 months for contact lenses, eyeglasses or laser correction surgery.

### WHAT HAPPENS IF I GET LAID OFF?

If you are temporarily laid off due to a shortage of work the following applies:

- Short and long term disability benefits will terminate on your last day worked
- Field employees will have benefit coverage extended for 30 days from last day worked
- Field employees with 5 or more years of service with Precision will have an additional 30 days of extended health and dental coverage
- For Rig Managers, provided a Record of Employment is not issued, all benefits will continue for a maximum of 240 days from your last day worked

Any outstanding premiums will be deducted from your pay when you return to work.

# HOW LONG DOES IT TAKE FOR MY BENEFITS COVERAGE TO REFLECT MY PROMOTION OR NEW POSITION?

As per Precision Drilling Corporation guidelines, your benefit levels will be increased once your Manager or Supervisor confirms the change in status in writing with the Benefits/Payroll departments.

# WHAT HAPPENS IF MY SPOUSE HAS HIS/HER OWN GROUP INSURANCE COVERAGE?

This is called Coordination of Benefits (COB). Claims for your spouse must first be submitted to his/her plan. Once the claim has been adjudicated by his/her insurance carrier, any amounts not covered can be submitted through your plan with Sun Life by sending the statement from your spouse's plan which details the charges incurred and reimbursement made.

Claims for a dependent child must first be submitted to the plan of the parent whose birthday is earlier in the year. If both parents have the same birthday, the plan of the parent whose first name begins with the earlier letter in the alphabet pays first. If you and your spouse are separated or divorced, the claim must first be submitted to the plan of the parent who has custody of the children, then to the plan of that parent's legal or common law spouse, and lastly to the plan of the parent who does not have custody. As with claims for your spouse, any amounts not covered can be submitted through your plan with Sun Life.

Please note, your Sun Life benefits card will not work for prescriptions dispensed for your spouse or children if COB is in place and claims should be submitted to another plan first.

#### WHO QUALIFIES AS AN ELIGIBLE DEPENDENT?

#### A DEPENDENT IS DEFINED AS:

- Your spouse by marriage or under any other formal union recognized by law, or a person of the opposite sex or of the same sex who is publicly represented as your spouse for a minimum of 12 consecutive months.
- A child or step child of you or your spouse, including any child for whom you are the legal guardian provided that you are financially responsible for the child, who is not married and who is:
  - a) Under age 21, or under age 25 if a full-time student attending an educational institution recognized under the Income Tax Act (Canada) and is entirely dependent on you for financial support; and
  - b) Not eligible for insurance as an employee under any other group benefits plan

A stepchild must be living with you to be an eligible dependent.

A child who becomes handicapped while they were still of dependent age, continues to qualify as long as the child:

- a) Is incapable of financial self-support because of a physical or mental disability;
- b) Depends on your financial support; and
- c) Is not married nor in any other formal union recognized by law.
   You must provide Sun Life proof of the above within 31 days of the date the child turns 21 years of age.

### WHAT IF I WANT TO ADD SOMEONE TO MY COVERAGE?

If you wish to add one or more dependents to your group coverage, a Group Benefits Changes Form must be completed and submitted to the Benefits Administration team. This form can also be used to terminate dependent coverage, make a name change or change benefit coverage levels.

# <u>IT IS IMPORTANT TO KEEP YOUR BENEFICIARY</u> <u>UPDATED AT ALL TIMES</u>

#### WHEN DOES MY COVERAGE END?

Your coverage ends:

- On the last day worked if your employment terminates or;
- On the date required premiums are not paid or;
- On the date you retire
- Long Term Disability benefits coverage terminates at age 65
- Optional Life and Optional AD&D coverage terminates at age 70

In the event you are approved for long term disability benefits, all benefits will continue as long as you are deemed disabled as per the terms of the disability contract. All benefits will terminate at age 65.

If your Group benefits reduce or terminate, you may be eligible to convert all or part of your benefits to an individual policy without providing proof of good health. Call **Sun Life at 1-877-893-9893** within 31 days of such reduction or termination to convert basic life insurance, optional life insurance, and dependent spousal life insurance. Call **AIG at 1-800-663-0231** within 31 days of such reduction or termination to convert basic accidental death and dismemberment (AD&D) insurance and optional AD&D insurance. You may also be eligible to purchase Sun Life's My Health CHOICE coverage if your Health and Dental coverage terminates, so long as it's done within 60 days of termination. Please contact the Benefits Administration Team for further details.

# DOES PRECISION'S BENEFIT PROGRAM INCLUDE PROVINCIAL HEALTH CARE COVERAGE?

No. The health care coverage provided in this Group Benefits Program pays "over and above" and is completely separate from provincial health care plans. In order to be covered for Health and Dental benefits, you **must** be registered under your provincial health care plan.

#### WHO DO I CALL IF I HAVE QUESTIONS?

If you have basic questions regarding your extended health or dental plan, or wish to inquire on the status of a claim please contact Sun Life at 1-866-896-6976 (have your group policy and benefits certificate numbers ready). If you require additional information or need to request forms please contact the Benefits Administration team at 1-877-716-4871 or visit BENEFIT Link at benefits.precisiondrilling.com:

Username: pdemployee Password: benefits

#### HOW WILL MY PERSONAL INFORMATION BE HANDLED?

We recognize and respect the importance of privacy. All personal information collected will be used solely for the purpose intended and shared only with other parties when it is necessary for the administration of your group benefits coverage. All information gathered will be kept in a confidential file to which access will be limited to persons authorized by Precision Drilling.

# LIFE INSURANCE

# EMPLOYEE BASIC LIFE INSURANCE

If you die while covered, this benefit provides financial assistance to your beneficiary in the form of a lump sum payment equal to 2 times your regular annual earnings, to a maximum of \$1 million. This benefit will reduce to \$200,000 at age 70. It is important to keep your beneficiary updated at all times.

The definition of regular annual earnings used for calculating basic life insurance levels for day rate employees is based on the following:

- Regular day rate divided by 12 hours, multiplied by 2080 hours
- Overtime, bonus, and commissions are not included in the earnings calculation

In addition, Sun Life provides a Survivor Extended Benefit for all dependents you have covered at the time of your death. Their extended health and dental care benefits will continue without payment of premium until the earliest of:

- 1. 2 years from the date of your death; or
- The date your dependents no longer meet Sun Life's definition of a dependent.

# DEPENDENT LIFE INSURANCE

If one of your dependents dies while insured, a benefit will be paid to you. The benefit amount is:

- \$10,000 in the event of your spouse's death
- \$5,000 in the event of your child's death

For both an employee and dependent death a completed claim form must be submitted to Sun Life. Please contact the Benefits Administration team for assistance completing this form.

# **OPTIONAL LIFE INSURANCE**

Through the Precision Drilling Group Benefits Program, you and your spouse have the opportunity to purchase additional amounts of life insurance (optional life). The rates are very reasonable and are paid through payroll deduction. Optional life can be purchased in increments of \$10,000 to a maximum of \$1 million when combined with basic life insurance. The rates vary based upon your age, gender, and whether you are a smoker or non-smoker. Proof of good health is required to purchase all amounts of optional life insurance.

There is a suicide limitation on optional life insurance within 2 years after it takes effect or increases.

Please contact the Benefits Administration Team for further information.

# **EXTENDED HEALTH CARE**

The extended health care plan offers coverage beyond the scope of provincial health plans, including reimbursement for medical and professional services, hospital, and vision care expenses.

\* To be eligible for coverage under the extended health care plan, you and your eligible dependents must be registered in the health plan provided in your province of residence or a federal government plan that provides similar benefits.

# **OVERVIEW:**

The benefit includes:

- 100% coverage for prescription drugs, hospital care, medical services and supplies, out-of-Canada emergency coverage and paramedical services
- Reimbursement of expenses will be based on what Sun Life deems to be reasonable and customary, taking all factors into account
- Sun Life will consider payment only on amounts not covered by provincial health plans or other government programs
- Covered drug expenses are limited to a 60 day supply, except in long term therapy cases where a quantity of up to a 100 day supply may be covered as recommended by the physician or pharmacist

# **DETAILS OF COVERAGE:**

# **HOSPITAL CARE**

- A hospital is a facility licensed to provide care and treatment for sick or injured patients, primarily while they are acutely ill. It must have facilities for diagnostic treatment and major surgery
- A convalescent hospital is a facility licensed to provide convalescent care
  and treatment for sick or injured patients on an in-patient basis. Nursing
  and medical care must be available 24 hours a day. It does not include a
  nursing home, rest home, home for the aged or chronically ill, sanatorium
  or a facility for treating alcohol or drug abuse
- Charges to upgrade from public ward to private accommodation

# PRESCRIPTION DRUGS

- Drugs and supplies requiring a written prescription from a physician (or dentist) which are not available over the counter, and which are dispensed by a licensed pharmacist. Drugs covered under this plan must have a Drug Identification Number (DIN) in order to be eligible
- Life-sustaining drugs

- Oral contraceptives
- Injectable drugs and injectable vitamins
- Vaccines (oral or injected)
- Diabetic supplies
- Products to help a person quit smoking that legally require a prescription, up to a lifetime maximum of \$500 for each person
- Drugs for the treatment of sexual dysfunction
- Drugs for the treatment of infertility, up to a lifetime maximum of \$2,400 for each person
- Anti-obesity drugs, up to a lifetime maximum of \$1,000 for each person
- Intrauterine devices (IUDs) and diaphragms
- Colostomy supplies
- Dispensing fees are covered to a maximum of \$8 per prescription
- Charges in excess of the lowest priced equivalent drug (i.e. generic) are not covered

#### VISION CARE

- One eye exam per family member will be covered once every 24 months
- You will be reimbursed up to \$250 every 24 consecutive months, for each family member, for contact lenses, eyeglasses or laser eye correction surgery

# PARAMEDICAL SERVICES

Each family member is covered up to \$500 per calendar year for each of the following services as long as the provider is a licensed practitioner. Recommendation by a physician is not required.

- Chiropractor, including a maximum of one x-ray examination each calendar year
- Physiotherapist
- Massage Therapist
- Osteopath or Osteopathic Practitioner, including a maximum of one x-ray examination each calendar year
- Podiatrist or Chiropodist, including a maximum of one x-ray examination each calendar year
- Naturopath (remedies are not eligible)
- Speech Therapist

# MEDICAL SERVICES AND SUPPLIES

### **Private Duty Nursing**

 Services provided in the person's home requiring a Registered Nurse or Registered Nursing Assistant (or equivalent designation) will be covered to a maximum of \$25,000 per calendar year

#### **Ambulance**

 Transportation in a licensed ambulance or air ambulance, if medically necessary, to the nearest hospital that provides the necessary medical or emergency services

# **Medical Equipment**

 Medically necessary equipment rented, or purchased at Sun Life's request, that meets the person's basic medical needs. For wheelchairs, eligible expenses are limited to the cost of a manual wheelchair, except if the person's medical condition warrants the use of an electric wheelchair

# PROSTHESES, SUPPORTS AND HEARING AIDS

- Artificial eyes and limbs
- Stump socks, up to a maximum of 5 per calendar year
- Breast prostheses required as a result of surgery, up to a maximum of \$200 per person per calendar year
- Elastic support stockings, including pressure gradient hose, up to a maximum of 2 pairs per person per calendar year
- Surgical brassieres required as a result of surgery, up to a maximum of 2 brassieres per person per calendar year
- Casts, splints, trusses, braces or crutches
- Custom-made orthotic inserts for shoes, when prescribed by a doctor, podiatrist, or chiropodist, up to a maximum of \$350 per person each calendar year
- 1 pair of custom-made orthopaedic shoes or modifications to orthopaedic shoes per person each calendar year when prescribed by a doctor, podiatrist, or chiropodist
- 50% for prefabricated orthopaedic shoes or modifications to prefabricated orthopaedic shoes or regular footwear, when prescribed by a doctor, podiatrist, or chiropodist, per person each calendar year
- Hearing aids prescribed by an ear, nose, and throat specialist, up to a maximum of \$1,000 per person over a period of 3 calendar years. Hearing aid batteries and repairs are included in this maximum

# OTHER SUPPLIES AND SERVICES

- Oxygen, plasma, and blood transfusions
- Dental services, including braces and splints to repair damage to natural teeth caused by an accidental blow to the mouth that occurs while a person is covered. These services must be received within 12 months of the accident
- Dressings/bandages

- Wigs following chemotherapy or a medical treatment causing temporary hair loss
- Contact lenses or intraocular lenses following a cataract surgery, limited to a lifetime maximum of one lens per eye
- Radiotherapy or coagulotherapy
- Glucometers prescribed by a diabetologist or a specialist in internal medicine, up to a lifetime maximum of \$700 per person
- Insulin pumps

# **OUT OF PROVINCE & OUT OF CANADA COVERAGE**

Sun Life will cover emergency services while the person is outside the person's province of residence.

For emergency services, Sun Life will cover the cost of the following:

- A private hospital room
- Other hospital services provided outside of Canada
- Out-patient services in a hospital
- The services of a doctor

Expenses for all other services or supplies eligible under this plan are also covered when they are incurred outside of your province of residence, subject to the reimbursement level and all conditions applicable to those expenses.

**Emergency services** include any reasonable medical services or supplies, including advice, treatment, medical procedures or surgery, required as a result of an emergency. Please note: For chronic conditions, emergency services do not include treatment provided as part of an established management program that existed prior to a person leaving the person's province of residence.

An **emergency** is an acute illness or accidental injury that requires immediate, medically necessary treatment prescribed by a doctor. An emergency ends when the person is medically stable to return to the person's province of residence.

#### Procedure in the Event of an Emergency:

At the time of an emergency, the covered person or someone with the covered person must contact Sun Life's Emergency Travel Assistance provider, Europ Assistance USA, Inc. (Europ Assistance). All invasive and investigative procedures (including any surgery, angiogram, MRI, PET scan, CAT scan), must be pre-authorized by Europ Assistance prior to being performed, except in extreme circumstances where surgery is performed on an emergency basis immediately following admission to a hospital.

If contact with Europ Assistance cannot be made before services are provided, contact with Europ Assistance must be made as soon as possible afterwards. If contact is not made and emergency services are provided in circumstances where contact could reasonably have been made, then Sun Life has the right to deny or limit payments for all expenses related to that emergency.

# Emergency services excluded from coverage

Any expenses related to the following emergency services are not covered:

- Services that are not immediately required or which could reasonably be delayed until the person returns to the person's province of residence, unless their medical condition reasonably prevents the person from returning to that province prior to receiving the medical services
- Services relating to an illness or injury which caused the emergency, after such emergency ends
- Continuing services arising directly or indirectly out of the original emergency or any recurrence of it, after the date that Sun Life or Europ Assistance, based on available medical evidence, determines that the person can be returned to the person's province of residence, and the person refuses to return
- Services which are required for the same illness or injury for which the
  person received emergency services, including any complications arising
  out of that illness or injury, if the person unreasonably refused or neglected
  to receive the recommended medical services
- Where the trip was taken to obtain medical services for an illness or injury, services related to that illness or injury, including any complications or any emergency arising directly or indirectly out of that illness or injury

#### **EXCLUSIONS:**

Sun Life will not pay for the costs of:

- Services or supplies payable or available (regardless of any waiting list) under any government-sponsored plan or program, except as described below under Integration with government programs
- Services or supplies to the extent that their costs exceed the reasonable and usual rates in the locality where the services or supplies are provided
- Equipment that Sun Life considers ineligible (examples of this equipment are orthopaedic mattresses, exercise equipment, air-conditioning or airpurifying equipment, whirlpools and humidifiers)
- Any services or supplies that are not usually provided to treat an illness, including experimental or investigational treatments. Experimental or investigational treatments mean treatments that are not approved by Health Canada or other government regulatory body for the general public
- Services or supplies that do not qualify as medical expenses under the Income Tax Act (Canada)
- Services or supplies for which no charge would have been made in the absence of this coverage

Sun Life will not pay benefits when the claim is for an illness resulting from:

- The hostile action of any armed forces, insurrection or participation in a riot or civil commotion
- Any work for which a covered person was compensated that was not done for the employer who is providing this plan
- Participation in a criminal offence

### Integration with government programs

This plan will integrate with benefits payable or available under the government-sponsored plan or program (the government program).

The covered expense under this plan is that portion of the expense that is not payable or available under the government program, regardless of:

- Whether the person has made an application to the government program; or
- Whether coverage under this plan affects your eligibility or entitlement to any benefits under the government program; or
- Any waiting lists.

# **EMERGENCY TRAVEL ASSISTANCE (Medi-Passport)**

**Important:** The following is a summary of the services and expenses covered under Medi-Passport. There are a number of conditions and limitations which have not been included here, such as dollar limits and limits for the duration of services. For full details, visit Precision's BENEFIT Link website or contact the Benefits Administration team.

Sun Life provides emergency medical assistance for covered persons while travelling outside of their province of residence or Canada. Europ Assistance USA, Inc. (Europ Assistance) is Sun Life's Emergency Travel Assistance provider. Multilingual assistance is available 24 hours a day, seven days a week by calling the toll-free/collect numbers on the back of your benefits card. Sun Life will only cover emergency services obtained within 180 days of the date a person leaves his or her province of residence. If hospitalization occurs within this period, in-patient services are covered until the date the person is discharged.

The Medi-Passport coverage is subject to any maximum applicable to the Out of Province & Out of Canada Coverage. The emergency services excluded from coverage, and all other conditions, limitations and exclusions applicable to other Extended Health Care coverage also apply to Medi-Passport.

We recommend that you bring your benefits card with you when you travel. On the back of the card are the telephone numbers and the information needed to confirm your coverage and receive assistance.

# Europ Assistance's services in the event of a medical emergency include:

- On the spot medical assistance, including referral to physicians, pharmacists and medical facilities, communicating with the medical facility to monitor the covered person's condition, and coordinate payment to the provider or medical facility
- Transportation home or to a different medical facility, if deemed necessary
- Hotel accommodation and meals if a covered person's return trip is delayed by a medical emergency involving anyone the person is travelling with who is also covered by this benefit or if a covered person had been hospitalized due to a medical emergency and has been released but is not able to travel home
- Replacement transportation tickets, if a covered person loses the use of his or her return ticket due to an emergency
- Return home of unattended dependent children if the covered person is hospitalized
- Visit by a family member, if a covered person is hospitalized for more than seven consecutive days
- Return of remains to the covered person's home province, in the event of death
- Return of rental or personal vehicle
- Help with arrangements for replacing lost or stolen travel documents and luggage
- Coordination of coverage with provincial medical plans and other group plans
- Translation services, to help communicate with local medical personnel
- Sending of urgent messages to the covered person's home or business

#### Please Note:

Sun Life, Europ Assistance and Precision Drilling Corporation will not be liable for the negligence or other wrongful acts or omissions of any physician or other health care professional providing direct services covered under this plan or the failure of a covered person to obtain medical treatment or emergency assistance services for any reason.

Emergency assistance may not be available in all countries due to conditions such as war, political unrest or other circumstances. For the latest information, please call Europ Assistance before your departure. In addition, Europ Assistance reserves the right to suspend, curtail or limit its services in any area, without prior notice.

# **DENTAL CARE**

#### **OVERVIEW:**

Dental care coverage for you and your dependents includes:

**Basic & Preventative** 

**Procedures:** 100%, unlimited maximum

Major Restorative Services: 50%, to a maximum of \$2,500 per family

member each calendar year

**Child Orthodontic:** 50%, to a maximum of \$2,500 per lifetime

per dependent child (age restrictions)

There are no deductibles under our dental plan

 Expenses are eligible only when incurred for necessary dental care (cosmetic dental care is not eligible)

- Where any two or more courses of treatment would produce professionally adequate results for a given condition, benefits will be paid as if the least expensive course of treatment were used
- Payment will be based on guidelines as set out in the province in which service is provided
- These guidelines will be reviewed annually by Sun Life and Precision Drilling Corporation

# **DETAILS OF COVERAGE:**

# BASIC AND PREVENTATIVE PROCEDURES (100%, Unlimited)

- Regular cleaning and check-up once every 12 months for adults age 18 and over, and once every 6 months for children under age 18 (this is a recall exam and includes bitewing x-rays, light scaling and polishing)
- Fluoride treatment once every 6 months for children under age 18
- Routine diagnostic and laboratory examinations
- One complete oral exam including full mouth x-rays once in any 24 month period (this type of exam is done when you first see a new dentist)
- One visit for oral hygiene instruction per lifetime
- Provision of space maintainers for missing primary teeth
- Fillings including amalgam, composite, acrylic, or equivalent, and pit and fissure sealants
- Emergency or palliative services
- Removal of impacted teeth and related anaesthesia
- Prefabricated metal restorations and repairs to prefabricated metal restorations, other than in conjunction with the placement of permanent crowns

- Endodontic services which include root canal therapy and root canal fillings, and treatment of disease of the pulp tissue, limited to one initial treatment and one re-treatment per tooth per lifetime
- Bridge repairs and denture repairs, relines and rebases (relines and rebases limited to twice every 36 months)
- Surgery and related anaesthesia, other than implant related surgery
- Periodontal services for treatment of diseases of the gums and other supporting tissue of the teeth, including:
  - a) scaling and root planing, limited to a combined maximum of 16 units of 15 minutes per calendar year; and
  - b) occlusal equilibration/adjustment, up to a maximum of 8 units of 15 minutes per calendar year

# MAJOR RESTORATIVE SERVICES

# (50% to a maximum of \$2,500 per family member each calendar year)

- Crowns and repairs to crowns, other than prefabricated metal restorations (covered under Basic Procedures)
- Inlays and onlays
- Initial provision of fixed bridgework (bridgework required to replace a natural tooth which was missing prior to becoming insured under this Plan is not covered)
- Prosthodontic services including the construction and insertion of bridges or standard dentures. Limited to teeth extracted while a person is covered under this plan
- Charges for a replacement bridge or standard denture are not considered an eligible expense during the five year period following the construction or insertion of a previous bridge or denture unless:
  - a) it is needed to replace a bridge or standard denture which has caused temporomandibular joint disturbances and which cannot be economically modified to correct the condition; or
  - it is needed to replace a transitional denture which was inserted shortly following extraction of teeth and which cannot be economically modified to the final shape required
- Implants, including surgery charges

# ORTHODONTIC SERVICES (50% to a lifetime maximum of \$2,500 per child)

- Orthodontic services are covered for persons under the age of 21 years, however treatment must commence before the child reaches age 18. These services include:
  - a) Interceptive, interventive or preventative orthodontic services
  - b) Comprehensive orthodontic treatment, using a removable or fixed appliance, or combination of both. This includes diagnostic procedures, formal treatment and retention

#### **EXCLUSIONS:**

- Procedures performed primarily to improve appearance
- The replacement of dental appliances that are lost, misplaced or stolen
- Charges for appointments that a person does not keep
- Charges for completing claim forms
- Services or supplies for which no charge would have been made in the absence of this coverage
- Supplies usually intended for sport or home use, for example, mouthguards
- Procedures or supplies used in full mouth reconstruction (capping all of the teeth in the mouth), vertical dimension corrections (changing the way the teeth meet) including attrition (worn down teeth), alteration or restoration of occlusion (building up and restoring the bite), or for the purpose of prosthetic splinting (capping teeth and joining teeth together to provide additional support)
- Transplants, and repositioning of the jaw
- Experimental treatments
- Charges related to the temporomandibular joint (TMJ) treatment
- The hostile action of any armed forces, insurrection or participation in a riot or civil commotion
- Dental services required due to congenital malformation
- Participation in a criminal offence

IF YOU ARE CONSIDERING DENTAL WORK THAT EXCEEDS \$300, SUN LIFE SUGGESTS THAT YOU HAVE YOUR DENTIST SUBMIT A PREDETERMINATION. A PREDETERMINATION IS A DETAILED DESCRIPTION OF THE TREATMENT YOU REQUIRE, AND WILL ALLOW SUN LIFE TO DETERMINE EXACTLY WHAT WILL BE COVERED BEFORE ANY WORK IS DONE.

# SHORT TERM DISABILITY (STD)

The purpose of short term disability (STD) is to provide financial assistance to employees who qualify for time off work due to sickness or injury that is not work related. This benefit is "self-funded" by Precision Drilling Corporation, which means that you pay no premiums for coverage.

# TO QUALIFY:

- You must be actively employed at the time of disability (employees are not covered during lay-off)
- You and your physician must complete a STD claim form and submit it to Precision's disability management provider within 7 days of the date of the onset of disability
- Payments are processed at regular pay periods and are subject to all regular pre-disability deductions, including income tax

# **BENEFIT PAYMENT:**

### Rig Managers and Field Superintendents:

- Benefits commence on the 1st day of the disability and are payable for a maximum of 17 weeks
- Payments are equal to 100% of pre-disability earnings\* for the first 6 weeks of disability, then continue at 70% for the remaining 11 weeks

# All other Day Rate Employees:

- Benefits commence on the 8th day following the onset of the disability, unless hospitalized, in which case benefits would begin immediately
- Each month (or partial month) worked for Precision or an affiliated company entitles the employee to 2 days of disability payment to a maximum of 17 weeks
- Payments are equal to 70% of pre-disability earnings\*
- If unable to return to work after exhausting your STD benefits, employees will receive assistance to obtain additional financial aid through Employment Insurance (E.I.) or Canada Pension Plan (C.P.P.)

# SUBROGATION:

If the disability is caused by a third party resulting in the legal right to recover damages, you must notify Precision Drilling Corporation. On settlement or judgement of legal action, the employee will be required to reimburse Precision Drilling Corporation those amounts recovered which, when added to the disability benefits paid, exceed 100% of lost income.

<sup>\*</sup> Pre-disability earnings are calculated by dividing the day rate by 12 hours and then multiplying by 2080 hours.

# **EXCLUSIONS:**

STD benefits will not be paid if the following exclusions apply:

- Anyone who is not under the care of a licensed physician
- Anyone who refuses care/assessment from a company designated physician/psychologist
- Anyone whose illness/injury is covered by W.C.B. or C.P.P.
- Anyone whose illness/injury is self-inflicted
- Anyone whose illness/injury results from committing or attempting to commit a criminal offence
- Anyone whose injury is sustained while operating a motor vehicle, either while under the influence of any intoxicant or if the insured person's blood contained more than 80 milligrams of alcohol per 100 milliliters of blood at the time of injury
- Anyone whose injury results from the abuse of addictive substance unless participating in an approved treatment program
- Anyone whose illness/injury results from serving in the armed forces
- Anyone whose illness/injury results from disorderly conduct
- Anyone who has surgery for cosmetic purposes, except where attributable to illness or injury
- Anyone who is receiving retirement pension from the employer
- Anyone who is engaged in other employment for wage or profit
- Anyone who is serving a prison sentence
- Anyone who refuses to participate in approved rehabilitative programs as outlined in the attending licensed physician's report

# LONG TERM DISABILITY (LTD)

The Long Term Disability (LTD) benefit is designed to provide financial assistance should you experience a lengthy disability due to disease or injury and are required to be off work in excess of 17 weeks.

To be eligible for LTD benefits you must be actively employed at the time of disability (you are not covered while on lay off).

The monthly benefit amount is equal to 66.7% of the first \$2,250 of monthly earnings, plus 50% of the balance of monthly earnings, to a maximum of \$20,000 per month. Proof of good health is required for monthly benefit amounts over \$13,000 and any increase in that coverage of 25% or more or \$500, whichever is greater.

The definition of monthly earnings used for calculating LTD levels for all day rate employees is based on the following:

- Regular day rate divided by 12 hours, multiplied by 2080 hours, divided by 12 months
- Overtime, bonus, and commissions are not included in the earnings calculation

Monthly benefit payments are non-taxable since 100% of the LTD premium is employee paid.

# WHEN LTD PAYMENTS BEGIN:

LTD payments will commence at the end of the 17 week waiting period provided Sun Life receives the required documentation and satisfactory evidence of disability within the allotted time. If disability is not continuous, the days you are disabled will be accumulated to satisfy the waiting period as long as:

- No interruption is more than 2 weeks; and
- Each period of total disability is due to the same or related causes; and
- Each period of total disability is completed within 12 months after the start
  of the elimination (waiting) period, or as approved by Sun Life in advance
  in cases where the elimination period is 365 or more.

You will be considered disabled:

- While you are continuously unable, due to an illness or injury, to do the
  essential duties of your own occupation, during the elimination period
  and the following 24 months (or 36 months following the elimination
  period for employees at the vice president level or higher); and
- After that period while you are continuously unable to do any occupation for which you are or may become reasonably qualified for by education, training or experience.

### OTHER INCOME:

Your LTD benefit is reduced by other income you are entitled to receive while you are disabled. Additional sources of income are amounts provided to you:

- Under any government plan, law or agency for the same or a subsequent disability, excluding dependent benefits, Employment Insurance benefits and automatic cost-of-living increases that occur after benefits begin
- Under any Workers' Compensation Act or similar law for the same or a subsequent disability, excluding automatic cost-of-living increases that occur after benefits begin
- Under a motor vehicle insurance plan which provides disability benefits but only as long as the law does not prohibit such a deduction
- Under the Québec Parental Insurance Plan

There is a further reduction of your LTD benefit if the total of the income listed below exceeds 85% of your monthly pre-disability take-home pay:

- Under any Workers' Compensation Act or similar law for another disability, excluding automatic cost-of-living increases that occur after benefits begin
- Under any Criminal Injuries Compensation Act or similar law, where allowed by law
- Under a group plan, including any coverage resulting from the employee's membership in an association of any kind
- Under a retirement or pension plan funded in whole or in part by the employer, as a result of a disability or medical condition

If you are eligible for any of the income amounts above and do not apply for them, Sun Life will still consider them part of your income. Sun Life can estimate those benefits and use those amounts when Sun Life calculates your payments.

If you receive any of the income amounts above in a lump sum, Sun Life will determine the equivalent compensation this represents on a monthly basis using generally accepted accounting principles.

# OTHER FEATURES OF YOUR LTD COVERAGE INCLUDE:

# COST OF LIVING ADJUSTMENT

A cost of living adjustment will be applied each January 1 based on the increase in the Canadian Consumer Price index up to a maximum of 2%.

### PARTIAL DISABILITY PROGRAM

You may be required to participate in a partial disability program approved by Sun Life, under which you will return to your own occupation for a reduced number of hours per week. Long-Term Disability payments will be reduced by the percentage of your normal work week represented by the partial disability program.

During the partial disability program, your total income from all sources cannot be more than 100% of your pre-disability basic earnings (after income tax), indexed for inflation. In cases where the total income exceeds this limit, Long-Term Disability payments will be reduced by the excess.

Your participation in a partial disability program will be limited to your own occupation period.

#### REHABILITATION PROGRAM

You may be required to participate in a rehabilitation program approved by Sun Life in writing. It may include the involvement of a Sun Life rehabilitation specialist, part-time work, working in another occupation or vocational training to help you become capable of full-time employment.

Sun Life is under no obligation to approve or continue a rehabilitation program for you. The decision to approve or discontinue a rehabilitation program will be made solely by Sun Life. Sun Life will consider such factors as financial considerations and Sun Life's opinion on the merits of rehabilitation.

During the rehabilitation program, your total income from all sources cannot be more than 100% of your pre-disability basic earnings (after income tax), indexed for inflation. In cases where the total income exceeds this limit, Long-Term Disability payments will be reduced by the excess.

Entering a rehabilitation program during the elimination period is not considered an interruption of the elimination period.

# SURVIVOR BENEFIT

If you die while LTD income benefits are being paid, Sun Life will pay 3 times your monthly LTD benefit to your beneficiary. If you do not have a beneficiary, Sun Life will make this payment to your estate.

# RECURRENCE

If you have a total disability for which Sun Life is paying LTD benefits and the disability occurs again due to the same or related causes, Sun Life will consider it a continuation of the previous disability if it occurs within 6 months of the end of the previous disability.

### EMPLOYEE'S RESPONSIBILITIES

During any period of total disability, you must make reasonable efforts to:

- Recover from the disability, including participating in any reasonable treatment or rehabilitation program and accepting any reasonable offer of modified duties from the employer
- Return to your own occupation during the first 24 months that benefits are payable
- Obtain training in order to qualify for another occupation if it becomes apparent that you will not be able to return to your own occupation within the first 24 months that benefits are payable
- Try to obtain work in another occupation after the first 24 months that benefits are payable
- Obtain benefits that may be available from other sources

If you fail to do any of these things, Sun Life may withhold or discontinue benefits.

# **GENERAL LIMITATIONS**

Sun Life will not pay benefits for:

- Disability arising from a condition for which you obtained medical care before becoming insured. This limitation does not apply if disability starts after you have been continuously insured for 12 months or if you have not had medical care for the condition for a continuous period of 90 days ending on or after the date your insurance took effect
- Any period you are not receiving appropriate treatment
- Any period after you do any work for wage or profit except as approved by Sun Life
- Any period after you are not participating in an approved partial disability or rehabilitation program, if required by Sun Life
- Any period after you are on a leave of absence, strike, or lay-off. This does not apply to the health related portions of a maternity leave during which you are disabled as a result of pregnancy
- Any period in which you are outside Canada longer than 4 months due to any reason, unless Sun Life agrees in writing in advance to pay benefits during this period
- Any period you are serving a prison sentence or are confined in a similar institution

- Disability resulting from drug or alcohol abuse, unless you are participating in a Sun Life approved treatment program or you have an organic disease which would cause total disability even if drug and alcohol abuse ended
- Disability resulting from hostile action of any armed forces, insurrection or participation in a riot or civil commotion
- Disability resulting from self-inflicted injuries or attempted suicide, while sane or insane
- Disability resulting from participation in a criminal offence; for the purpose of LTD coverage, operating a motor vehicle with a blood alcohol content over the permissible level stipulated in the Criminal Code is not considered a criminal offence

If you become a permanent employee after being employed on a temporary basis, any period during which you were employed on a temporary basis can be considered when applying the requirements described above relating to being covered for LTD for a specific period of time.

If your coverage ends but you are covered again under this contract, Sun Life will use the latest date your coverage began when applying the above limitation. However, if coverage ends due to termination of employment because of a work shortage and you are reinstated within 8 months with seniority, Sun Life will use the previous date your coverage began when applying this limitation.

#### TIME LIMITS

Sun Life must be notified of a new claim by the 60<sup>th</sup> day after the disability begins or the 30<sup>th</sup> day after termination of this LTD provision, whichever is earliest. Sun Life must receive proof of a claim no later than 180 days after the end of the elimination period.

### **OVERPAYMENT**

Sun Life has the right to recover all overpayments of benefits either by deducting from other benefits or by any other available legal means.

# RECOVERING DAMAGES FROM A THIRD PARTY

If you have a legal claim against a Third Party for loss of income which could have been earned while disability benefits are paid or payable under this contract, then you must pay Sun Life 75% of your net recovery from the Third Party, to a maximum of the disability benefits paid to you under this contract. You must hold this percentage of the net recovery in trust for Sun Life until it is paid to Sun Life.

Your net recovery is the total of all amounts, including general damages, damages for loss of income, interest and legal costs, recovered from the Third Party, either through settlement or trial, less your legal costs for the recovery.

### WAIVER OF PREMIUM

During any period in which you have been approved for LTD benefits:

- Sun Life will waive the premium required for your Life Insurance, Dependent Life, Optional Life and LTD coverage;
- ###AIG will waive the premium required for your AD&D and Optional AD&D benefits; and
- Provided your employment has not terminated, and subject to the points listed under "WHEN DOES MY COVERAGE END?" on page 5 of this booklet, Precision Drilling Corporation will maintain your extended health and dental coverage from the date long term disability benefits were approved, as long as you are deemed disabled as per the terms of the disability contract. Extended health and dental coverage will terminate at age 65 or retirement, whichever is earlier.

# DISABILITY BENEFITS WILL CONTINUE UNTIL THE EARLIEST OF:

- You are no longer disabled under the terms of the contract;
- You reach age 65, which is the termination age for this benefit;
- You do not provide Sun Life with satisfactory proof of disability; or
- You die.

# BASIC ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D)

Accidental death and dismemberment (AD&D) is provided by AIG Canada (AIG). The policy provides 24 hour coverage, on or off the job.

AD&D provides insurance in the form of a tax free lump sum payment to your beneficiary in the event of accidental death or dismemberment (loss of, or permanent and total loss of use of a body part). It is important to keep your beneficiary updated at all times.

Please note the following:

- Claims must be made within 1 year from the date of accident
- The loss must occur within 1 year of the date of the accident causing such injury
- Benefits that are payable under this plan are paid in addition to any other insurance coverage which you may have at the time of the accident (including Workers Compensation claims)

# THE LOSS SCHEDULE IS AS FOLLOWS:

The principal sum payable for accidental loss of life is:

Equal to the amount of basic life insurance in force at the time of the accident.

For accidental loss of or loss of use of  $\underline{\text{limb.}}$  the % of the principal sum payable is:

200% 200%	for quadriplegia (total and irreversible paralysis of all four limbs) for paraplegia (total and irreversible paralysis of both lower limbs)
200% 100% 100% 100%	for hemiplegia (total and irreversible paralysis one arm and one leg) for loss of two hands, two feet or entire sight of both eyes for loss of speech and hearing in both ears for loss of one foot or one hand and entire sight of one eye for loss of one hand and one foot
80% 75%	for loss of one arm or one leg for loss of one hand, one foot, the entire sight of one eye, or speech, or hearing
66.66%	for loss of hearing in one ear
33.33% 33.33%	for loss of four fingers of either hand for loss of thumb and index finger of either hand
25%	for loss of all toes of one foot

# OTHER FEATURES OF YOUR AD&D COVERAGE INCLUDE:

# REHABILITATION BENEFIT

Reimburses your expenses for occupational training to a maximum of \$15,000 if such expenses are incurred within two years of and as a result of an injury for which you receive a benefit under the plan.

# HOME ALTERATION AND VEHICLE MODIFICATION BENEFIT

Pays a benefit of up to \$25,000 for modification to your home or vehicle if you suffer an injury for which you receive a benefit under the plan and require a wheelchair to be ambulatory.

# WORKPLACE MODIFICATION AND ACCOMMODATION BENEFIT

Pays a benefit of up to \$5,000 if you suffer an injury for which you receive a benefit under the plan and require special adaptive equipment or workplace modification in order to return to full-time work with Precision.

# PSYCHOLOGICAL THERAPY BENEFIT

Pays a benefit of up to \$5,000 if you suffer an injury for which you receive a benefit under the plan and require psychological therapy within 2 years of the injury.

# IN-HOSPITAL BENEFIT

Pays a benefit of:

- 1% of the principal sum to a maximum of \$2,500 per month for hospital confinements of more than 30 nights, or
- 1/30th of the amount determined above for hospital confinements of more than 5 but less than 30 nights, if you suffer an injury for which you receive a benefit under the plan and are confined to hospital as a result of such injury, for a maximum of twelve months.

# FAMILY TRANSPORTATION BENEFIT

Pays a benefit of up to \$15,000 for the expenses incurred for the transportation of an immediate family member to your hospital if you suffer an injury for which you receive a benefit under the plan and as a result are confined to a hospital more than 100 kilometres from home.

### REPATRIATION BENEFIT

Pays a benefit of up to \$15,000 to cover the expenses to return the body to the city of residence if you suffer a covered accidental death while at least 50 kilometres from home.

# **IDENTIFICATION BENEFIT**

Pays a benefit of up to \$5,000 for the transportation of an immediate family member to identify the body if you suffer a covered accidental death at least 150 kilometres from home and a law enforcement agency requests such identification.

#### SEAT BELT BENEFIT

Pays an additional benefit of 10% of the principal sum to a maximum of \$50,000 if you suffer a covered accidental death while operating or riding as a passenger in a private passenger automobile in which the seat belt was properly fastened.

# DAY CARE BENEFIT

Pays an annual benefit of up to 5% of the principal sum to a maximum of \$5,000 per year for the day care costs of each dependent child under age 13 who is enrolled, or who enrolls within 90 days, in a day care facility if you suffer a covered accidental death. The benefit is payable for up to four consecutive years.

# DEPENDENT CHILD EDUCATIONAL BENEFIT

Pays an annual benefit of up to 5% of the principal sum to a maximum of \$5,000 per school year for the tuition costs of each dependent child who is enrolled in post-secondary education, or enrolls within 12 months following the loss, if you suffer a covered accidental death. The benefit is payable for up to four consecutive years.

# SPOUSAL EDUCATIONAL BENEFIT

Pays a benefit of up to \$15,000 for your spouse's expenses in enrolling in a professional or trades training program for the purpose of obtaining an independent source of income, if you suffer a covered accidental death and such expenses are incurred within 36 months of your death.

#### FUNERAL EXPENSE

Pays a benefit of up to \$5,000 to reimburse funeral expenses if you suffer a covered accidental death.

# BEREAVEMENT AND TRAUMA COUNSELING BENEFIT

Pays a benefit of up to \$1,000 if you suffer loss of life in a covered accident and your eligible dependents require counseling within one year of the accident.

# EYEGLASSES, CONTACT LENSES AND HEARING AIDS BENEFIT

Pays a benefit of up to \$1,000 if you sustain an injury which requires treatment by a physician and results in the purchase of eyeglasses, contact lenses or hearing aids within 365 days of the date of the accident, when none were previously required or worn.

### SEVERE BURN BENEFIT

Pays a percentage of the Principal Sum up to a maximum of \$25,000 if you suffer a 3rd degree burn by means of exposure to fire, heat, caustics, electricity or radiation. The percentage varies based on the body part that is burned. If loss of life occurs within 30 days from the date of the accident that caused the burns, then the principal sum will be paid, less the amount already paid.

#### **FXCLUSIONS:**

AIG will not cover any losses caused in whole or in part by, or resulting in whole or in part from, the following:

- Suicide or any attempt thereat by you while sane
- Self inflicted injury or any attempt thereat by you while sane or insane
- Declared or undeclared war or any act thereof
- Sickness, disease, or bodily infirmity whether the loss or claim results directly or indirectly from any of these
- Mental incapacity whether the loss or claim results directly or indirectly from any mental incapacity
- Sustained while you are undergoing the medical or surgical treatment of sickness, disease, or bodily or mental infirmity
- Stroke or cerebrovascular accident or event; cardiovascular accident or event; myocardial infarction or heart attack; coronary thrombosis; aneurysm
- Travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if you are:
  - a) riding as a passenger in any aircraft not intended or licensed for the transportation of passengers; or
  - b) performing, learning to perform or instructing others to perform as a pilot or crew member of any aircraft.
- Infections of any kind regardless of how contracted, except bacterial
  infections that are directly caused by botulism, ptomaine poisoning or an
  accidental cut or wound independent and in the absence of any underlying
  sickness, disease or condition including but not limited to diabetes
- Injury or loss sustained if you are on full-time active duty in the armed forces or organized reserve corps of any country or international authority

- Injury or loss sustained while you are under the influence of alcohol and operating any vehicle or means of transportation or conveyance while your blood alcohol is over 80 milligrams in 100 millilitres of blood
- Injury or loss sustained while you are under the influence of a drug or substance which is controlled as specified under the Controlled Drug and Substances Act (Canada), which directly or indirectly causes the loss, unless taken pursuant to the advice of and in strict accordance with the instructions of a duly licensed physician
- The commission or attempted commission by you or injury incurred while you are in the course of committing or attempting to commit any act which if adjudicated by a court would be an indictable offence under the laws of the jurisdiction where the act was committed
- An act, attempted act or omission taken or made by you, or an act, attempted act or omission taken or made with your consent, for the purposes of interrupting the blood flow to your brain or to cause asphyxiation to you whether with intent to cause harm or not
- Natural causes

# OPTIONAL ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D)

Through the Precision Drilling Group Benefits Program, employees have the opportunity to purchase additional amounts of AD&D coverage. Coverage is available for employees to purchase in units of \$10,000 to a maximum of \$500,000 on an employee or family basis. If family coverage is selected, the following coverage levels will apply:

- The employee will be insured for the Principal Sum selected
- The employee's spouse will be insured for 50% of the Principal Sum if there are no dependent children, or 40% if there are dependent children
- Each dependent child will be insured for 10% of the employee's Principal Sum, unless the employee has no spouse, in which case each dependent child will be insured for 15%

Optional AD&D premiums are employee paid through payroll deductions.

Please contact the Benefits Administration team or visit BENEFIT Link for further details.

# **BUSINESS TRAVEL ACCIDENT (BTA)**

Business Travel Accident (BTA) coverage is provided by AIG Canada. The policy provides coverage for employees while travelling for work, for the purpose of furthering the business. This excludes travel to and from work, as well as travel that is part of normal job duties.

BTA provides insurance in the form of a tax-free lump sum payment to you or your beneficiary in the event of a death or dismemberment (loss of, or permanent and total loss of use of a body part). It is important to keep your beneficiary updated at all times.

Please note the following:

- Claims must be made within 1 year from the date of accident
- The loss must occur within 1 year of the date of the accident causing such injury
- Benefits that are payable under this plan are paid in addition to any other insurance coverage which you may have at the time of the accident (including Workers Compensation claims)

The principal sum is as follows:

**Rig Managers and Field Superintendents:** 10 times annual earnings, to a maximum of \$750,000

All other Day Rate Employees: \$300,000

Please see the loss schedule and exclusions in the Basic Accidental Death and Dismemberment section of the booklet for further details.

# EMPLOYEE AND FAMILY ASSISTANCE PROGRAM (EFAP)

### WHAT IS AN EFAP AND HOW DOES IT WORK?

The objective of an EFAP is to help you reach your optimal level of health and well-being by providing professional and confidential short term counselling and assistance for personal and workplace problems. Support is available to employees, eligible family members, and managers/supervisors for personal and workplace problems. Consider using the EFAP when your own efforts at resolving problems are not working, you feel overwhelmed, or you want to prevent problems from becoming larger.

Precision Drilling's EFAP is provided by Homewood Health<sup>M</sup>, a Canadian company with over 30 years of experience in providing employee and family assistance and workplace health solutions. All services provided by Homewood Health are completely confidential. No personally identifying information is shared with Precision Drilling or any other party without your written consent, unless required by law. Your EFAP is a service where it is safe to ask for information or assistance.

The EFAP is 100% paid for by Precision Drilling. We pay for the number of short term counselling sessions required for each employee, as well as each of your eligible family members.

# WHAT SUPPORT DOES THE EFAP PROVIDE?

The EFAP provides assistance in many ways:

- Work through relationship difficulties
- Deal with family and parenting challenges
- Find balance in your life
- Break habits and addictions
- Research health concerns
- Learn how to make healthy activity and nutrition choices
- Handle challenging situations at work
- Get emotional support and feel more positive
- Find ways to help others that you are concerned about
- Plan for major life changes like retirement, the birth of a child, or a major move
- Get support as a care giver for children or the elderly
- Work towards achieving financial stability
- Resolve serious issues like depression, anxiety, or grief
- Understand legal matters you may be facing

The EFAP also helps managers/supervisors create a healthy and supportive work environment. The Key Person Advice Line, available by calling the general EFAP toll free phone number, puts you in touch with the Homewood Health workplace advisors who offer coaching about people issues at work (conflict, declining work performance, and crisis management to name a few).

Support through the EFAP is available 24 hours a day, 7 days a week – by telephone, online, or in person. Contact Homewood Health with your questions, to book a counselling session, or to access any of their personal and workplace support services.

# **EFAP Contact Information**

Toll free phone number:

1-800-663-1142

i.e: Precision Drilling

Member website: www.homewoodhumansolutions.com Register using the name of your division



# Sun Life Financial

Health & Dental Claims and Retirement Program 1-866-896-6976 www.mysunlife.ca

# Precision Benefits Administration Team

Health and Dental Claims and Retirement Program 1-877-716-4871 benefits@precisiondrilling.com

# **BENEFIT Link**

Web: benefits.precisiondrilling.com

Login: pdemployee Password: benefits

