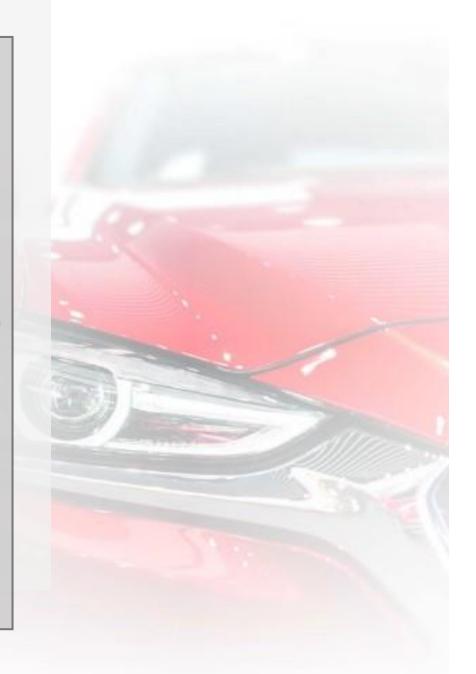


NATIONAL DEALER RENEWAL REPORT

2024-25





A MESSAGE FROM OUR NEW CHAIRMAN



Duane Rath, CHAIR
Dealer Principal
Motorhub Automotive Group
Truro, NS

As we step into the 2024-25 policy year, we extend our heartfelt appreciation to you, our Dealers, for your indispensable role in the ongoing success of the CADA 360 Employee Benefits Program. The preceding plan year marked a significant milestone with exceptional retention rates and considerable plan expansion, boasting an estimated annualized premium exceeding \$257 million and an outstanding persistency rate of 95%.

As you are aware, the CADA 360 Employee Benefits Program is designed by dealers, for dealers. We understand dealers have a choice when it comes to their employee benefits. So, this year we intend to gather feedback from dealers who are participating in our program by conducting a satisfaction survey. This initiative ensures that we are delivering the benefits and services dealers value most.

We acknowledge that the sustained loyalty and support of our Dealers is pivotal to the ongoing success of our program. Without your dedication, the CADA 360 Employee Benefits Program would not be possible.

Thank you for your ongoing commitment and partnership.

Duane Rath

Chair CADA 360 Employee Benefits Dealer Committee

The Dealer Committee



Bill Mitchell
President
Carter Auto Family
Burnaby, BC



Todd Ducharme
Dealer Principal
Westlock Motors Ltd.
Barrhead, AB



Brian Bone COO/CFO The Humberview Group Toronto, ON



Pierre Couture
Dealer Principal
Groupe Couture
St-Georges, Québec



Kent Ledingham
Dealer Principal
Ledingham Chevrolet
Buick GMC
Steinbach, Manitoba



Michelle Melendy
CEO
Western Group of
Companies
Corner Brook, NL

THE CADA 360 EMPLOYEE BENEFITS PROGRAM HAS BEEN AVAILABLE TO DEALERS IN CANADA SINCE 1950. IT'S OVERSEEN BY OUR CADA 360 EMPLOYEE BENEFITS DEALER COMMITTEE.

THE COMMITTEE IS MADE UP OF ACTIVE DEALER PRINCIPALS FROM ACROSS THE COUNTRY, WHO VOLUNTEER THEIR TIME TO CONTINUOUSLY ENSURE THE PROGRAM MEETS THE NEEDS OF ALL DEALERS, THEIR EMPLOYEES, AND THEIR FAMILY MEMBERS.

THE DEALER COMMITTEE OPERATES UNDER THE GUIDING PHILOSOPHY



To offer a sustainable employee benefits plan, cost-shared by participating dealers and their employees, that provides financial assistance for plan members and their dependents in the event of death, disability, or medical/dental expenses.

To encourage plan members to take care of their health by making healthy lifestyle choices in addition to making use of their benefits program and to offer tools to help members manage their own health.

To manage the costs of the program on behalf of participating dealers, leveraging the purchasing power of CADA 360, preventing waste, abuse and fraud, and ensuring that vendor services are cost-effective, efficient and competitively priced.

To be an innovator in the delivery and design of sustainable employee benefits tailored for the needs of dealerships and their employees, today and tomorrow.

OUR RATING METHODOLOGY 'DRIVES' STABILITY

The CADA 360 Employee Benefits Program is structured at the block level, combining Insured and Administrative Services Only (ASO) arrangements to manage risk and maintain affordability within the trust. The collective experience of all participating dealerships is consolidated to determine block renewal factors.

Operating as a not-for-profit trust, the block's financials undergo annual review with the primary aim of achieving equilibrium and establishing block manual rates for the upcoming year. Any surplus generated is reinvested into the plan through expense reductions, rate stabilization measures, or enhancements to benefits. Conversely, revenue shortfalls are addressed through subsequent rate adjustments.



Price consistency is fostered by consolidating high-cost health and drug claims through pooling mechanisms:

- · All out-of-country claims are pooled from first dollar.
- Health and drug claims beyond pooling thresholds are also pooled.

The stability of rates for Life and Long-Term Disability (LTD) coverage is maintained by leveraging block demographic changes, which exhibit minimal year-over-year variation.

This **RELIABILITY** has become a cornerstone feature of the CADA 360 Employee Benefits Program.



At the individual dealer level, each dealer's plan functions similarly to a fully insured arrangement, providing

PROTECTION AGAINST ANY ADDITIONAL RISK.

This report encompasses the block-level adjustments mandated by the plan on an aggregate basis. Each dealer's renewal will vary from the block changes, reflecting the distinctive aspects of their plan design.

Rates at the dealership level are adjusted based on:

- Claims experience for Short-Term Disability (STD), health, pharmaceuticals, and dental.
- Credibility, which is determined by the size of the group and the duration of the dealership's experience.

Effective Date:

The CADA 360 block renewal will be implemented on each dealership's renewal date, commencing with plans renewing on July 1, 2024. Renewal rates will consider anticipated claims derived from the past two years of experience, as well as the block renewal prerequisites and any modifications to plan design.



CADA BLOCK RENEWAL FACTORS

And how it affects Dealers' renewal rates

LIFE, AD&D and LTD

In the CADA Block, Life, AD&D, and LTD benefits are pooled, shielding individual dealerships from major claims.

During the block renewal, rate adjustments are based on the following factors;

- Overall block experience
- Life waiver reserves
- LTD reserves
- Incurred But Not Reported (IBNR)
- Demographics
- Administration expenses

THIS APPROACH TO RISK PROTECTION AND RENEWAL PRICING

HAS PROVEN TO BE

VERY SUCCESSFUL.

BLOCK RENEWAL 2024-25

Within the CADA Block, the Life, AD&D and LTD benefits are fully pooled, protecting the individual dealerships from catastrophic claims.

The block calculations consider the overall block experience, the life waiver reserves, LTD reserves, Incurred But Not Reported (IBNR), demographics, and administration expenses.



Rate adjustments for Life, AD&D and LTD consider the experience of the entire block.

All plans will receive the same experience increases/ decreases for Life, AD&D and LTD. The experience of individual plans is not considered since a relatively high number of lives is required for the experience of an individual dealership to be credible.

STD, HEALTH, AND DENTAL

CADA BLOCK MANUAL RATE

The CADA 360 block rate is equal to the dealership's current in-force rate plus the annual benefit block adjustment.

CREDIBILITY

Applied to the group's experience depending on the size of the group and years of experience. CADA 360 uses the same credibility formula as Canada Life.

EXPERIENCE PERIOD

Two-year weighted average to level the experience with 75% weighting on the most current year.

CHANGE IN THE IBNR

One of the advantages of CADA 360's size is that the reserve requirements are very low. The Incurred But Not Reported (IBNR) factors applied by benefit are:

- •10.80% of billed premium for STD
- •3.23% of paid claims for Health and Drugs
- •1.47% of paid claims for Dental

DEALERS CAN

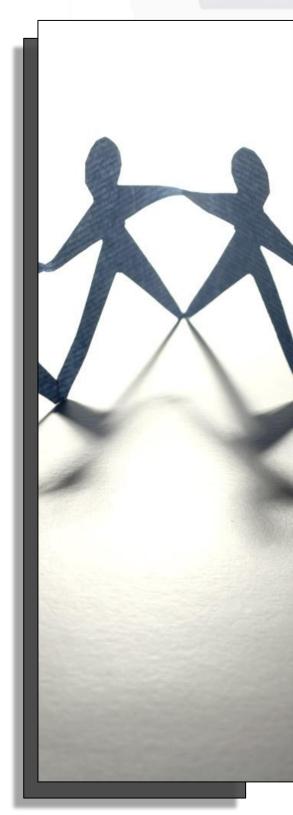
CUSTOMIZE THEIR PLAN AND PAY THEIR OWN WAY,

BENEFITING FROM CADA'S

BUYING POWER

WHILE DELIVERING LOW EXPENSE COSTS, LOW IBNR'S AND

ENHANCED BENEFITS.



BLOCK RENEWAL 2024-25

Within the CADA Block, the STD, Health and Dental benefits are experience rated benefits as claims demonstrate a predictable pattern of utilization over an extended period of time.

For the experience rated benefits Canada Life uses the actual credibility weighted experience from each dealership to develop the appropriate premium rate. It's generally more favorable to have the dealerships' own experience used as the block rate tends to be higher and result in higher rates overall.

The block calculations consider the overall block experience, Incurred But Not Reported (IBNR), trend expectations and administration expenses.

STD **HEALTH DENTAL** CADA CADA CADA manual block manual block manual block rates will rates will rates will increase by remain increase by unchanged 6% 4%

Rate adjustments for STD, Health and Dental consider the experience of the individual dealership

The experience of smaller dealerships is considered less credible for the purposes of ratesetting.

For dealerships whose experience is not fully credible, rate adjustments are determined based on a combination of dealership experience and manual (block) rate changes.

TARGET LOSS RATIOS

Target Loss Ratios (TLRs) operate on a sliding scale, enabling dealers and dealer groups of all sizes to leverage economies of scale continuously. The purchasing power of the plan benefits every dealer, leading to reduced expenses as dealerships consolidate or grow.

TLR
percentages
remain
unchanged
again this
year.

We are adjusting the bands by 7.3% to keep up with inflation.

The intention is to insure the TLR percentages are stable year over year.

Groups should not move TLR bands simply due to inflation.

For 2024-25, excess investment returns generated by the Demutualization Fund were invested into the plan administration expenses to further improve the TLR by an additional 1.85%.

Annual Short-Term, Disability, Health & Dental Premium Level	Target Loss Ratio 2024 / 2025
Up to \$23,500	77%
\$47,000	78%
\$58,800	78%
\$70,600	80%
\$102,900	81%
\$132,300	82%
\$161,700	83%
\$205,800	85%
\$264,600	87%
\$323,400	88%
\$382,200	90%
\$499,700	91%
\$1,175,100	91%
\$1,762,400	92%
\$2,349,700	93%
\$99,999,999	93%

HEALTH AND DRUG POOLING

			Block Applied F	Renewal Rates
# of Lives	Region	Threshold	Single**	Family**
0-24	Quebec	\$10,000	\$25.25	\$69.17
25-49	Quebec	\$18,000	\$18.58	\$50.58
50+	Quebec	\$32,500	\$8.73	\$27.59
0-49	West	\$10,000	\$8.79	\$19.46
50+	West	\$15,000	\$7.78	\$17.17
0-49	East	\$10,000	\$16.67	\$37.31
50+	East	\$15,000	\$14.16	\$31.64
0-49	Ontario	\$10,000	\$11.98	\$26.73
50+	Ontario	\$15,000	\$10.67	\$23.76

POOLING PROTECTION

One of the many benefits of the CADA 360 Employee Benefits Program is the rate stability it offers to dealers. One of the ways we achieve this stability is by pooling high-cost health and drug claims over the pooling threshold.

All out of country claims are pooled from first dollar.

Pooling thresholds will remain unchanged. The pooling charges will see an increase of 13.9% this year. This increase is due to a combination of the return of out of country claims, and high-cost drugs.

NOTE: **Quebec pooling charges are being adjusted to match 2024 RAMQ charges.

**includes out of country pooling charges, increasing from \$1 Single/ \$2 Family to \$1.75 Single/ \$3.50 Family

POOLING CHARGES

A block average Increase of 13.9%

**QC will include additional RAMQ increase



WHAT DOES THIS MEAN FOR DEALERS?

As the largest group benefits plan for dealers in Canada, the CADA 360 Employee Benefits Program is dedicated to ensuring long-term rate stability and minimizing volatility for dealers.

Over the past 10 years, the average overall renewal increase has remained at a modest 3.5% per year, which is significantly below market standards.

This consistent track record shows the CADA 360 Employee Benefits Program consistently provides exceptional value for dealers year-over-year.

This year the average expected increase nationally is 5%

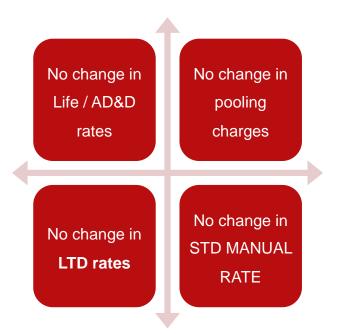
Please keep in mind, each dealer's renewal will be calculated <u>individually.</u> This years' renewal will be based on a 13.9% increase to the pooling rates AND each dealer's own experience rated STD, Health and Dental benefits.

Based on current national CADA 360 block loss ratios, we anticipate the average experience rated benefits to see a 7% increase.

When factoring the no change in Life, AD&D and LTD into the equation, we predict the average renewal increase to be around 5%.

Remember: Each dealer's renewal will be calculated individually based on the combination of the CADA block rates and their own experience.

EXPECTED RENEWAL ADJUSTMENT





5.0% OVERALL increase on average

EAP continues at no cost to dealers until August 31, 2025

Benefit	2015 2016	2016 2017	2017 2018	2018 2019	2019 2020	2020 2021	2021 2022	2022 2023	2023 2024	2024 2025
Life	3.60%	9.00%	9.70%	0.00%	0%	-16.7%	0%	0%	0%	0%
LTD	5.70%	15.10%	4.80%	0.00%	-6.00%	-16.7%	0%	0%	5%	0%
STD	5%	0%	0%	0%	0%	-16.7%	0%	0%	0%	0%
Health & Dental	3.40%	7.50%	4.60%	4.00%	3.80%	-16.7%	0%	15%	17.20%	10.00%
Total	4.00%	9.50%	5.00%	3.00%	1.00%	-16.70%	0%	11.00%	12.30%	5.00%

An average increase of 3.4% per year over last 10 years

WHAT'S NEW FOR THE 2024-25 PLAN YEAR?

With a large focus on mental health, the following coverage has been added.

Additional mental health providers :

- Psychotherapist and counsellor coverage is standardly included with plans that currently include coverage for psychologists and social workers. ASO plans are optional.
- No change to the combined yearly maximum amount for mental health provider coverage.
- Coverage will be effective on July 1, 2024, unless your plan renewal date is between July 2 and Sept 30 where coverage will take effect on your renewal date. Claims incurred before the effective date will not be eligible.

Ensuring coverage is inclusive to all plan members, the following coverage has been added.

Gender affirmation:

- Standardly included. ASO plans are optional.
- Covers a variety of treatments not covered by government health care plans.
- \$15,000 lifetime maximum for members and eligible dependents.
- Prior authorization required.
- Coverage was effective Jan. 1, 2024. Claims incurred before the effective date will not be eligible.

To bring the CADA out of country coverage for pregnancy up to industry standards, the following update has been processed.

 Extending coverage to the 34th week of pregnancy while traveling outside of Canada.





To remain compliant with QPP legislative changes, the following changes were implemented.

 Changes to disability benefits under the Quebec Pension Plan (QPP) for plan members between ages 60 and 65. Retraite Quebec will replace the variable disability portion of their QPP disability benefit with a variable retirement portion. Canada Life will amend short- and long-term disability contracts to account for the changes. The amendment went into effect on Jan. 1, 2024.

To help plan members with nutritional disorders, the following update has been processed.

- Out-of-hospital treatment of nutritional disorders by a registered dietician
- To support plan members with nutritional disorders, plans may be amended to include registered dietitians.

To improve the overall member experience, CADA will no longer provide an option for provider eClaims. Going forward, all new dealerships will automatically be set up with this option.

 Active dealerships without provider eClaims services will be flagged at renewal. If you want to implement this update to expedite claims payment and improve overall member experience, please speak with your CADA 360 Advisor.

Biologics vs Biosimilars

Biosimilar transitions based on provincial regulations are continuing based on provincial timelines. Saskatchewan, Ontario, Nova Scotia and the Yukon all implemented transition dates in 2023.

Newfoundland & Labrador and Prince Edward Island are both scheduled for 2024. Manitoba is now the only province or territory in Canada with a public drug program that has not made the transition to biosimilars.

WHY THE SWITCH TO BIOSIMILAR?

You may have already heard, across Canada, publicly funded drug plans are introducing biosimilar initiatives. Since biosimilars play a key role in keeping drug plans sustainable while providing access to treatments, the CADA 360 Employee Benefits Program is doing the same. We have been working closely with our vendor partner, Canada Life who manages our specialty drugs program. Our strategy is a simple one, focus on managing plan costs for dealers while ensuring employees get the drugs they need for the best health outcomes, all while supporting member choice.

As Dealers you may be getting questions from your employees around what this all means for them. So, we're providing some insight to ensure you feel confident in answering any questions that may come your way.

Since the CADA 360 team members are not drug experts, we enlisted help from **Helen Stevenson**, **our vendor partner from Reformulary Group**. We asked Helen some questions we thought were relevant to help get you up to speed in no time. Here is what Helen had to say.



Helen Stevenson
Founder, President & CEO
Reformulary Group
Toronto, ON

WHAT IS A BIOLOGIC?

Biologic drugs are created from living cells through a complex manufacturing process. They are used to treat diseases such as arthritis, diabetes, psoriasis, and inflammatory bowel disease, among others. The first version of a biologic drug is known as the 'originator' or 'reference biologic drug'.

WHAT IS A BIOSIMILAR?

Once the patent of the reference biologic drug expires, other manufacturers are allowed to make their own versions of those drugs. These drugs are called biosimilars.

WHAT IS THE DIFFERENCE?

A biosimilar and its reference biologic drug can be shown to be highly similar, but not identical. This is because biologic drugs:

- Are often large and complex
- Are made from living cells rather than with chemicals as a result, they are naturally variable.
 Compared to generics, biosimilars are required to conduct more studies as a condition to receiving regulatory approval, as the biosimilar must demonstrate that it is highly similar to its reference biologic drug

ARE BIOSIMILARS SAFE?

Biosimilars are safe, effective, and clinically similar to the originator biologics. Health Canada authorizes biosimilars using the same rigorous regulatory standards for quality, efficacy, and safety as for the originator biologics and all other biologic drugs. In fact, the same people (regulators) review both originator biologics and biosimilars. Not to mention the same manufacturer may make both an originator biologic and biosimilar drug.



HOW IS THIS DIFFERENT FROM A BRAND NAME DRUG VS. GENERIC?

BRAND NAME DRUG

A pharmaceutical company spends many years researching and doing clinical trials on a new brand name drug before it can be approved for sale in Canada. A brand name drug is the first version of the drug to be sold within a country. A brand name drug must be approved by Health Canada before it can be sold on the market.

The company that first researched and developed the drug holds a PATENT on the drug so that no other company is allowed to sell it. When the patent EXPIRES, other companies are allowed to make copies of the drug.



GENERIC DRUG

Generic drugs are copies of brand name drugs, typically introduced once the patent has expired. Generic drugs are "bioequivalent", which is a pharmaceutical term that means that a generic drug has a similar clinical effectiveness as the brand drug and is safe and similarly effective at treating a medical condition. Generic drugs have the same active ingredient, the same amount of active ingredient, and work the same way in the body as brand name drugs.

Like brand name drugs, generics are approved by Health Canada before they can be sold on the market. There may be many generic versions of the same brand name drug, and these are usually available at a lower cost.



WHAT DOES THIS ALL MEAN?

The CADA 360 plan will continue to provide coverage of the originator biologic drug until the transition deadline specified by each province. After that date, coverage may be limited to applicable biosimilar drug(s). If an employee and/or their dependent choose to continue using an originator biologic when a biosimilar is available, it may only be covered up to the cost of the lowest cost biosimilar alternative.

Employees will continue to be notified by Canada Life if they are impacted well before the required transition date of their biologic drug.

WHAT IF SOMEONE CAN'T SWITCH?

In some rare circumstances a biosimilar cannot be tolerated due to medical reasons. The transition correspondence from Canada Life will include all the necessary information on how to submit an exception request. Should you want to assist your employees, direct them to canadalife.com to complete the

'Originator Biologic drug coverage' form.





BASIC LIFE and AD&D

Last fiscal year alone the CADA 360 Employee Benefits Plan paid out over **\$10 Million** in life insurance proceeds AND almost **\$625,000** in Dependent Life insurance proceeds to families who experienced a loss.

The plan also paid out almost \$1 Million in AD&D insurance proceeds during the last fiscal year.



- There were 146 Basic Life claims paid out in the last fiscal year
 - \$70,000 was the AVERAGE amount paid on a Life claim
- There were 73 Dependent Life claims paid out in the last fiscal year
 - \$8,500 was the AVERAGE amount paid on a Dependent Life claim
- There were 13 AD&D claims paid out in the last fiscal year
 - \$70,000 was the AVERAGE amount paid on an AD&D claim

Speak to your CADA 360 Advisor if you want to offer Optional Life and Critical Illness benefits to your employees if you don't already have them as part of your plan.

SHORT-TERM DISABILITY

The total of individuals nationwide

with Short-Term Disability benefits saw a modest uptick this year. In 2022 the program covered 30,541 certificates compared to this year's total of 30,894 certificates.

Saskatchewan marked the most significant decline in certificates with STD coverage, trailed by Quebec and Ontario.

Conversely, Alberta saw the most notable increase in the number of certificates with STD coverage in 2023.

The overall blocks incident rate **dropped** slightly from 62 incidents per 1,000 in 2022 to 57.8 in 2023.

The overall blocks approval rate dropped slightly as well from 54.1 incidents per 1,000 in 2022 to 54 in 2023.

36% of ALL CADA 360 **Employee Benefit** Plans have STD coverage in place.

NATIONAL 30,894 certificates with STD coverage

 BC 2,285 NLAB MB 1050 7,882 SK 2,548 6,436 7.921 **Reasons for Declined** NS NB 917

claims:

41% information not received, 39% definition not satisfied, 4% eligibility period not satisfied

There were 1,845 short-term disability claims opened or re-opened in 2023.

22

SHORT-TERM DISABILITY

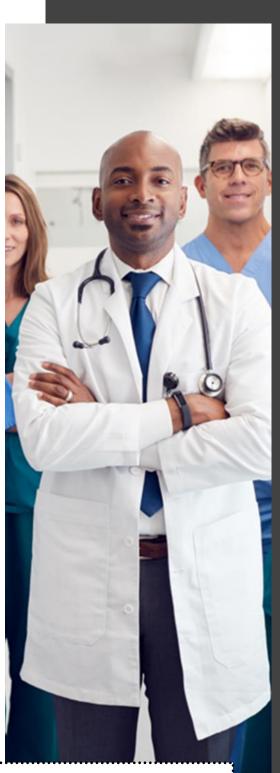
71% of all Short-Term Disability claims are attributed to one of the **Top 5 Diagnosis**.

Mental Health claims continue to be at the top of claiming conditions and have increased 2% over the previous year's period.

Musculoskeletal & Connective Tissue also continues to increase over the previous year.

Top 5 STD Diagnosis in 2023	% of total claims	Claim Duration (in weeks)
Mental Health	21%	10.9
Accidents & Injury	15%	10.4
Musculoskeletal & Connective Tissue	17%	10.0
Digestive System	11%	5.5
Cancer & Neoplasms	7%	7.3

- The AVERAGE duration of an STD claim is9 weeks
- 68% TERMINATE because the claimant returned to work or is expected to.
- **4% no longer** satisfy the definition of disability
- 25% reach the maximum benefit period.



The 25-34 age bracket has the highest occurrence of short-term disability mental health claims (28%) followed closely by the 35-44 (22%) and 45-54 (22%) age brackets.

LONG-TERM DISABILITY

The total of individuals nationwide

with CADA 360 Long-Term Disability benefits also saw a modest 2% uptick compared to the prior year. In 2022 the program covered 64,955 certificates compared to this year's total of 66,167 certificates.

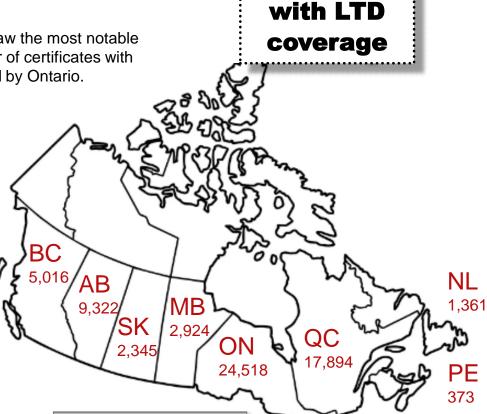
Manitoba marked the most significant decline in certificates with LTD coverage, trailed by PEI.

Conversely, Quebec saw the most notable increase in the number of certificates with LTD coverage followed by Ontario.

The overall blocks incident rate dropped slightly from 11.8 incidents per 1,000 in 2022 to 10.8 in 2023.

The overall blocks approval rate dropped slightly as well from 9.1 incidents per 1,000 in 2022 to 8.4 in 2023.

90% of ALL CADA 360
Employee Benefit
Plans have LTD
coverage in place.



Reasons for Declined

claims:

29% information not

received, 16% definition

not satisfied, 24%

eligibility period not

satisfied

NATIONAL

66,167

certificates

NS

1.927

NB

487

There were 1,891 long-

term disability claims

opened or

re-opened in 2023.

LONG-TERM DISABILITY

85% of all LTD claims are represented in the **Top 5 Diagnosis.**

Mental Health claims continue to be at the top of claiming conditions and has increased 1% over the previous year's period.

Musculoskeletal & Connective Tissue is the second most claimed condition and has decreased by 1% over the previous year. Accidents & Injury is up 6% as people return to activities.

Top 5 LTD Diagnosis in 2023	% of total claims	Claim Duration (in months)
Mental Health	30%	12.6
Musculoskeletal & Connective Tissue	20%	14.4
Accidents & Injury	16%	10.9
Cancer & Neoplasms	14%	11.5
Cirulatory System	5%	12.2

- The AVERAGE duration of an LTD claim is
 12.6 months
- 63% TERMINATE because the claimant returned to work or is expected to.
- 19% no longer satisfy the definition of disability
- 5% have a Change in Definition
- 5% reach the maximum benefit period.



The 35-44 age bracket has the highest occurrence of long-term disability mental health claims (27%) followed closely by the 25-34 (25%) and 45-54 (25%) age brackets.

A DEEPER DIVE INTO THE TOP DISABILITY CONDITION

MENTAL HEALTH claims are the number one condition for both short-term and long-term disability claims in 2023.

The average duration of an LTD mental health claim has increased from 8 months in 2019 to 9 months in 2023.

The top three sub diagnosis for mental health conditions resulting in an LTD claim in 2023 were:

- DEPRESSION 38%
- ANXIETY 32%
- ADJUSTMENT REACTION 17%.

LTD Incidence rate by Province per 1,000 plan members

LTD MENTAL HEALTH CLAIMS

NATIONAL

3.1

LTD Mental

Health

CLAIMS

per 1,000

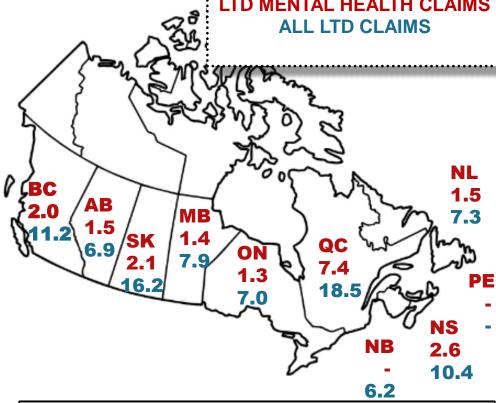
NATIONAL

10.8

LTD

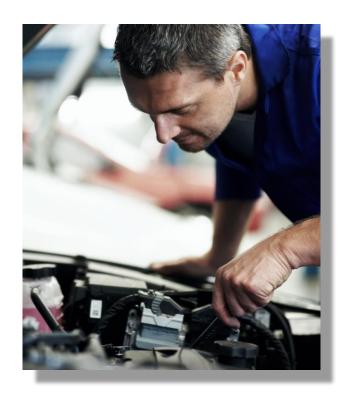
CLAIMS

per 1,000



Mental Health disorders not only significantly contribute to plan costs, but also play a vital role in the OVErall well-being of employees.

DISABILITY INTERVENTION



EARLY ACCESS
TO DISABILITY
INTERVENTION
IS CRITICAL
TO MANAGING
DISABILITY
EXPENSES.

Through CADA 360 Employee Benefits Program, dealerships have access to Canada Life's At Work Services to support employees who are showing signs of diminished productivity at work.

Early intervention may help prevent frequent absences that could lead to disability claims.

What is At Work Services?

At Work Services provides dealership employees who are at risk of disability with early access to medical co-ordination and rehabilitation services to help prevent disability claims and to increase workplace productivity.

At Work Services identifies employee health issues early on to put the appropriate services to meet their needs in place before a disability claim occurs. It can also help reduce delays and wait times for medical and health services. At Work Services is designed to give employees the ability to remain at work while dealing with a medical problem.

Speak to your CADA 360 Advisor today.

CADA 360 INCLUDES

Canada Life's At Work Services program in CADA 360 Employee Benefits Program helps dealers keep their employees at work and productive at no cost to the dealership.

Leading the Way

In Employee Mental Health Support

This is why some businesses are stepping up to support their employees in innovative ways. Barry Cullen Chevrolet, under the leadership of President Mark Cullen, is a shining example of this commitment. We had the opportunity to chat with Mark about their decision to offer pharmacogenomic testing to all their employees at no cost.

Mark shared that their inspiration came from a genuine concern for their team's mental health. With approximately 65 employees, they recognized the importance of addressing mental health issues, which can often go unnoticed or untreated. By offering pharmacogenomic testing, they aimed to assist anyone covered under their benefits program who might be struggling with finding the right medication.

To ensure privacy and accessibility, Barry Cullen Chevrolet partnered with Personalized Prescribing, who facilitated the process through an anonymous discount code. This allowed their staff to access the test without any financial burden, with the dealership directly covering the costs.

When asked about the specific benefits for their employees, Mark emphasized the importance of overall health and happiness. He highlighted the correlation between employee well-being and productivity, as well as overall employee satisfaction. "Quality of life for our staff and their families is paramount," Mark emphasized, noting that any financial benefits were secondary to the primary goal of supporting their team.



"Just one day off work will cover the cost of the test alone"



Addressing concerns about costs, Mark pointed out the potential return on investment. With past experiences of absenteeism due to mental health issues, they found it easy to justify the expense. "Just one day off work will cover the cost of the test alone," Mark explained, emphasizing the tangible impact on the bottom line.

Despite not viewing it as a competitive advantage, Mark believes their initiative may contribute to employee retention. However, he emphasized that their motivation was simply to care for their employees, rather than gain a competitive edge in the industry.

As for advice to other dealerships considering similar initiatives, Mark stressed the immense return on investment. "Less waste of drug spend, less absenteeism, and hopefully fewer disability claims," he suggested. Ultimately, however, the primary motivation should be to support those who are genuinely struggling.

Barry Cullen Chevrolet's approach to employee mental health sets a commendable standard for the industry. By prioritizing the well-being of their team, they not only demonstrate corporate responsibility but also pave the way for a healthier and more supportive workplace culture across the board.

Although pharmacogenomic tests are not currently covered under your employee benefit program, CADA wants to make sure our CADA 360 Employee Benefits members have the best health outcomes. So, we negotiated an exclusive discount for our CADA 360 members.

What is a pharmacogenetic test?

Pharmacogenetics examines your genetic profile to understand what medication will be the most effective and not have undesired effects.

How does it work?

Everyone metabolizes medication differently. We can all take the same dose of the same drug, but some of us will experience severe side effects, while others will have no benefit at all. And some may experience both side effects and no benefits. The reason for these different drug responses is our individual genetic makeup. Pharmacogenomics explains how our individual and unique genetic make-up influences the way we respond to medication. The science can explain which medication would be most effective and help to identify the right drug and right dose based on an individual's genetic profile.

Why we partnered with Personalized Prescribing

Other pharmacogenetics tests tend to be less successful because they rely mainly upon one testing criteria, that only accounts for a fraction of drug failure, and they do not provide a personal consultation from a specialized psycho-pharmacist. Although pharmacogenetic tests are not currently covered under your employee benefit program, CADA wants to make sure our CADA 360 Employee Benefits members have the best health outcomes. So, we negotiated an exclusive discount for our CADA 360 members. To access this discount, click here.

OR you can contact our vendor partner Personalized Prescribing directly to arrange anonymous testing for your employees that may be struggling to find the right medication.

Contact Mark Faiz by email mfaiz@personalizedprescribing.com or call 1-844-943-0210 x 8 and don't forget to mention CADA to ensure you get the discounted rate.

WORKPLACE STRATEGIES FOR MENTAL HEALTH

Don't forget about this completely **FREE RESOURCE** that can help you with education materials, assessments, workshop materials and leadership material all focused on Mental Health Awareness and Support!

Mental Health Awareness initiatives can really pay off by helping to ensure employees are happier, emotionally healthier and are able to be present and productive while at work.

Speak to your CADA 360 advisor if you would like to sign up today! Canada Life will take care of the rest...



Take care of your mental health at work

It can be hard to ask for help and accommodations at work, especially when you're experiencing mental health issues. These tips and resources can help you ask for what you need to stay healthy.

Self-advocacy tips



Increase mental health awareness in 5 minutes a week!

Struggling to find time to keep mental health awareness top of mind? We've got you covered with this weekly email series that goes straight to your inbox!

Mental awareness email sign up



Struggling with your mental health?

Access these online assessments to better understand what's going on for you. Or reach out to a health care professional.

Assess your mental health

workplacestrategiesformentalhealth.com

Workplace Strategies resources have been free to all Canadians since 2007, compliments of our partner **Canada Life.**

HEALTHCARE OVERVIEW



Total amount paid for claims was up by 8% to

\$106.0M

Total amount covered:

\$136.2M

Total amount submitted: \$151.4M



Total Number of Claims Paid

1.6M

Average amount paid per claim: **\$65**



Total exposure of certificates was up by 6% to

72,997

Average amount paid per certificate increased by 6.3% to **\$1,453**



Total Number of Claimants

124,418

Average amount paid per claimant: \$852



Healthcare experience overall, was driven by an increase in the number of claims per claiming certificate

HEALTHCARE

The total of individuals

nationwide covered with CADA 360

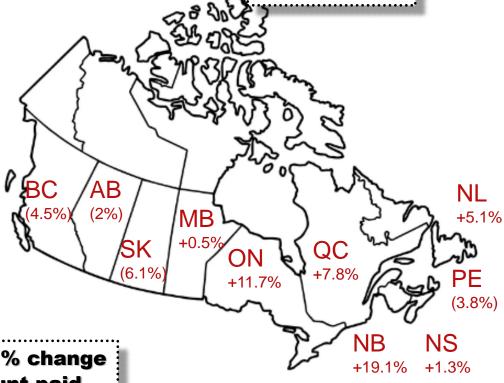
Healthcare benefits is at an all-time high. In 2022 the program covered 68,899 certificates compared to this year's total of 72,997 certificates, which is an increase of 6%.

The national average amount paid per certificate increased from \$1,367 in 2022 to \$1,453 in 2023.

The average total amount paid per certificate increased across ALL age bands. The **75+** age bracket had the highest increase at +76.5% followed by the **70-74** age bracket at 49.9%. The **55-64** age bracket had the lowest overall increase at 1.6%

NATIONAL

Average paid per certificate increased by 6.3%



Year-over-year % change in total amount paid

2022-2023: +11.9%

2021-2022: +13.9%

2020-2021: +10.3%

Healthcare average paid amount increase was driven by out of country experience with a weighted increase of 3.3%.

Out of country claims have now surpassed prepandemic levels, with an overall 455% increase in claims paid over the previous year.

HEALTHCARE EXPERIENCE

The total paid for Healthcare claims in 2023 **totaled \$106M**. This is an 11.9% increase over the prior year.

Drug claims continue to lead the national program spend, with a **Total Paid Amount of \$71.8M** representing a 7.3% increase over the previous year.

Paramedical services are the second highest expense, equating to 19.6% of the overall claims paid.

SERVICE	2023	2022	2021	2020
Drugs	\$71,852,000	\$66,921,000	\$58,261,000	\$53,773,000
Paramedical	\$20,759,000	\$18,844,000	\$16,483,000	\$13,052,000
Vision	\$4,204,000	\$3,817,000	\$3,414,000	\$2,738,000
Medical equipment	\$3,911,000	\$3,518,000	\$3,278,000	\$3,011,000
Hospital	\$462,000	\$392,000	\$376,000	\$483,000
Out of province/country	\$4.000,000	\$680,000	\$818,000	\$1,859,000
Other	\$874,000	\$632,000	\$662,000	\$551,000
TOTAL	\$106,000,000	\$94,804,000	\$83,292,000	\$75,467,000

Top 5 Services Used	% Utilization	Average paid per claim	Average # of Claims per Cert
Drugs	69.8%	\$57	24.6
Paramedical	39.1%	\$67	10.9
Vision Services &	21.1%	\$110	2.5
Supplies	7.9%	\$281	2.5
Out of Country	0.5%	\$259	4.2

% Utilization: percent of certificates that had at least one claim paid in the year (for employee and/or dependent)

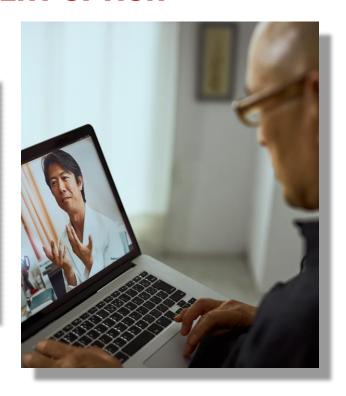
The Healthcare experience overall was driven by **an** increase in the **number** of claims per claiming certificate.

Drug claims make up 70% of our total health claims paid in 2023.

The # of Drugs claims per certificate increased by 2.5% and Paramedical claims per certificate increased by 0.6%. The overall increase of claims per claiming certificate was 2.3% over the prior year.

DRUG COST CONTAINMENT OPTION

HAPPIER, HEALTHIER
EMPLOYEES
WITH
10% ADDITIONAL
DRUG
COVERAGE.



Through CADA 360 Employee Benefits Program, dealerships can access **10% savings on their drug coverage** when employees fill their prescriptions at Pocketpills. This is on average an additional \$400 savings each year per employee who participates.

And chronic drug users saved even more!

Why should you recommend VIRTUAL PHARMACY?

With a \$9 dispensing fee (National Average is \$12) and free delivery, implementing virtual pharmacy for your employees just makes sense. There is no cost to the dealership to implement, and Pocketpills will customize to your dealership's needs and ensure a quick and seamless onboarding.

If you are interested, please speak directly to your CADA 360 advisor. They will coordinate a pilot for your dealership.

A DEEPER DIVE INTO DRUG EXPERIENCE

The **total amount paid for drugs** nationwide increased by 7.3% from 2022 to 2023 to **\$71.8M**

The average amount paid per certificate increased by 1.3% from 2022 to 2023. The national average paid per certificate increased to \$984.

The average paid per certificate increased across most age bands. The <25 age bracket had the highest increase at 27% followed by the 70-74 age bracket at 15.8%.

The **75+** age bracket had the lowest overall decrease at (17.1%) followed by the **65-69** age bracket at (4.2%).

Average paid FOR DRUGS per certificate increased by 1.3%

+5.99

Amount paid per certificate by drug classification

6.2%AB

7.7%

SK

Maintenance: +3.3%

Specialty: (2.3%)
Acute: +1.9%

Single Source: +1.8% Generic: +4.7%

MB

+2%

ON

Brand: (19.8%)

NB NS +0.3%

+9.1%

NL

+4.2%

DRUG CLASSIFICATION

Maintenance drugs manage chronic or long-term conditions.

•The average amount paid per certificate for maintenance drugs **increased by 3.3%** this year, from \$464 in 2022 to \$479 in 2023.

Specialty drugs generally treat a specific disease state that may be genetic, complex or rare.

•The average amount paid per certificate for specialty drugs decreased by 2.3% this year, from \$378 in 2022 to \$369 in 2023.

Acute drugs treat one-time or short-term conditions such as an infection or allergic reaction.

•The average amount paid per certificate for acute drugs increased **by 1.9%** this year, from \$119 in 2022 to \$121 in 2023.

Drug Claims Paid in 2023 Across drug Category

Maintenance: 48.7% Specialty: 37.6%

Acute: 12.3%

Single Source: 66%

Generic: 26.4% Brand: 6%

PRESCRIPTION DRUGS

BY CLASSIFICATION

Single Source

•The average amount paid per certificate for single source drugs increased by 1.8% this year, from \$638 in 2022 to \$649 in 2023

Generic drugs

•The average amount paid per certificate for generic drugs increased by 4.7% this year, from \$248 in 2022 to \$260 in 2023

Brand drugs

•The average amount paid per certificate for brand drugs decreased by 19.8% this year, from \$74 in 2022 to \$59 in 2023

TOP 10 PRESCRIPTION DRUGS RANKED

Rank	Drug Name	Therapeutic Class	Paid	Average Cost per Claimant	Rank in 2022
1	Ozempic	Diabetes	\$4,236,200	\$922	3
2	Remicade	Rheumatoid Arthritis and other Autoimmune Diseases	\$2,584,800	\$29,357	1
3	Trikafta	Cystic Fibrosis	\$2,441,200	\$147,041	6
4	Stelara	Rheumatoid Arthritis and other Autoimmune Diseases	\$2,154,000	\$22 553	2
5	Freestyle	Diabetes	\$1,579,600	\$1,058	5
6	Vyvanse	ADHD	\$1,220,600	\$481	7
7	Inflectra	Rheumatoid Arthritis and other Autoimmune Diseases	\$1,077,000	\$24,332	9
8	Humira	Rheumatoid Arthritis and other Autoimmune Diseases	\$1,005,200	\$14,580	4
9	Entyvio	Gastrointestinal	\$1,004,100	\$14,383	12
10	Symbicort	Asthma/COPD	\$933,400	.	8

- OUR TOP 10 DRUGS MAKE UP 25.2% OF OUR OVERALL DRUG SPEND.
- 14.8% OF TOTAL PAID CLAIMS ARE FOR DIABETES TREATMENTS AND SUPPLIES
- OZEMPIC IS NOW AT THE TOP OF OUR DRUG LIST REPRESENTING \$4.2M IN OVERALL DRUG SPEND.
- TREATMENTS FOR AUTOIMMUNE DISEASES CONTINUE TO BE OUR SECOND HIGHEST OVERALL SPEND AT 10.5% OF CLAIMS AND 4 OF OUR TOP 10 DRUGS
- THERE HAS BEEN A LARGE SPIKE IN TRIKAFTA UTILIZATION FROM 4 CLAIMANTS IN 2022
 TO 125 IN 2023, MOVING TRIKAFTA TO OUR 3 HIGHEST EXPENSE
- UNDER THE TREATMENT OF DIABETES, FLASH GLUCOSE MONITORS AND SENSORS
 CONTINUE TO RISE IN COST AND UTILIZATION IS STEADY AT #5
- CADA 360 EMPLOYEE BENEFITS PROGRAM CONTINUES TO MOVE EXISTING PATIENTS OVER TO THE BIOSIMILAR DRUGS TO HELP DEALERS CONTAIN DRUG COSTS.
- THE GOAL IS TO STRIKE A BALANCE BETWEEN CLAIMS CONTROLS AND MEMBER EXPERIENCE, INCLUDING ACCOMMODATIONS FOR APPROPRIATE CLINICAL EXCEPTIONS.



THERAPEUTIC CLASSES

INCREASE FROM 2022	TOP 5 THERAPEUTIC CLASS
\$1,896,437	DIABETIC TREATMENTS & SUPPLIES
(\$798,174)	AUTOIMMUNE DISEASES
\$684,721	SKIN DISORDERS
\$175,338	ALLERGIES/RESPIRATORY
\$258,125	DEPRESSION

Diabetes treatments & supplies continues to be our top claims expense.

The total amount paid for **diabetes claims** has continued to increase year-over-year. This year alone, the total paid for diabetes treatments and supplies has **increased by 21.1%** to an all-time high **of \$11.2M**. The average paid per certificate for Diabetes Treatments & Supplies claims increased by 14.3% to \$153.

Although Rheumatoid Arthritis and other Autoimmune disease medications are our second highest claims expense, they are on a downward trend and actually **decreased** in overall total paid claims by **(\$798K)** paid this year.

Skin disorders continue to be the 3rd highest total amount paid claims in 2023 followed by allergies and depression. All three of these therapeutic classes have increased over the previous year.

The **total paid for drug claims** has increased by \$28.8M from \$43.1M in 2014 to **\$71.8M** in **2022**.

The **top five** therapeutic classes have increased by **\$4.2M** from 2022.

DIABETES TREATMENTS & SUPPLIES

Diabetes claims made up 15.5% of the total paid for drug claims in 2023.

The total average paid per certificate nationwide for

Diabetes treatments & supplies increased across **ALL** provinces in 2023.

The average amount paid per certificate for Diabetes treatments & supplies increased across **ALL** age bands.

The **35-44** age bracket had the **highest increase at 34.1%** followed by the **25-34** age bracket **at 29.7%.**

The increase to diabetes treatments & supplies was almost ENTIRELY DRIVEN BY DRUGS

Average paid FOR DIABETES DRUGS per certificate increased by 14.3%

NL

NS

+11.1%

+17.7%

DIABETIC DRUGS IN 2023

+4.6%

21.2%

1B

+10.8%

ON *

OZEMPIC - \$4.2M (+99.9%)

JARDIANCE - \$904K (+12%)

INVOKANA - \$290K (-2.7%)

Utilization and amount paid per diabetes medication claim drove experience.

NB

+20.9%

The average amount paid per claim increased from \$84 in 2022 to \$98 in 2023.



"Reformulary applies expert knowledge and research to optimize coverage, efficacy of treatment while minimizing wasteful spending. It's design financially encourages and rewards making best decisions. Why should the employer cover drug 'X' at \$5.00 when a generic costs \$2.00? Why take drug 'Y' at \$40 when 5 other equally as effective medications range in treatment costs from \$5 to \$25. If drug 'X' is clinically the better script, then justify it (it may be approved). If the patient wants it regardless, they can pay the difference or discuss alternatives with their doctor or pharmacist.

The urgency is to make sure that we are all making smarter decisions so that we squeeze out the most benefit for the funding we are able to provide. Be smarter, use plan design and tailored incentives, use technologies and critical assessment of value and effectiveness for money. Reformulary does this. If we do not ascribe to these smart tools, we will almost certainly not be able to fund or enjoy the benefits of advancing pharma science."

Michael Gaian, Advisory Council Member, Edmonton, AB

If your group is **not currently participating in the Reformulary** program (typically Quebec dealers), please ask your CADA 360 Advisor to contact the Reformulary team to **request a ReModel** report, a high-level projection of potential savings and member experience.

Clientsupport@reformulary.com

Reformulary performance



614 Active Policies



71,392 Claimants



695,486 claims paid



87.2% claims using preferred drugs



91.6% using generic drug substitutions



\$39,058,399 total drug spend

REFORMULARY

continues to
help
CADA 360
keep
RATES LOW
for
Dealers

"We have found the Reformulary drug formulary to be an excellent addition to the CADA 360 plan. In a world of rapidly increasing healthcare costs, the Reformulary program has effectively helped to control drug cost increases in the past several renewals.

The drug review and listing process is common sense and well researched. The DrugFinder app is easy to use and provides good information to employees when they are prescribed a new medication. The icing on the cake is the ability for the member to apply for a special exception if their physician believes that a particular drug is needed and should be covered on a higher tier."

Rob Weld, Advisory Council Member, Dartmouth, NS

PARAMEDICAL EXPERIENCE

The total paid for Paramedical claims in 2023 **totaled \$20.8M**. This is a 10.2% increase over the prior year. The average amount **paid per certificate** increased by 4% from 2022 from \$274 to **\$284 in 2023**.

The largest contributor to paramedical experience was **massage therapy**, which increased by 4.1%. The largest overall increase was for Mental Health Care claims, increasing by 7.7% over the previous year.

The major cost drivers for Paramedical Claims seems to be increased costs in the average amount paid per claim, which increased overall by 4%.

Amount paid per certificate by paramedical service

% CHANGE FROM 2022	SERVICE		
+4.1%	MASSAGECHIROPRACTOR		
+1.6%			
+4.4%	PHYSIOTHERAPY		
+7.7%	MENTAL HEALTH PRACTITIONERS		
+6.6%	ACUPUNCTURE		
+2.1%	OSTEOPATH		
(0.7%)	NATUROPATH		



The most significant change in utilization AND average amount paid per certificate was in **Mental Health Care claims**. There was an increase of 6% utilization and 7.7% in the average amount paid per certificate.

Mental Health Care claims make up 12% of the overall paramedical spend.

DENTAL CARE SUMMARY





Total amount paid for claims was up by 11.8% to

\$49.1M

Total amount covered:

\$64.7M

Total amount submitted:

\$72.2M



Total Number of Claims
Paid

561K

Average amount paid per claim **\$87.55**



Total exposure of certificates was up by 4.7% to

63,089

Average amount paid per certificate increased by 6.8% to **\$778**



Total Number of Claimants

86,661

Average amount paid per claimant **\$566**

Dentalcare average amount paid per certificate increase was mostly due to the increase in fee guides.

Dentalcare experience overall was driven by increases in the amount paid per claim and percent utilization

DENTALCARE

The **total of individuals nationwide** covered with CADA 360
Dentalcare benefits is at an all-time high. In 2022 the program covered 60,255

certificates compared to this year's total of 63,089 certificates, which is an increase of 4.7%.

The national average amount paid per certificate increased by 6.8% from \$729 in 2022 to \$778 in 2023.

The average total amount paid per certificate increased across ALL age bands. The **25-34** age bracket had the highest increase at +12.5% followed by the **35-44** age bracket at 10.9%.

NATIONAL

Average paid per certificate increased by 6.8%

Year-over-year % change in total amount paid

AB

+7.3%

MB

+1.9%

+6.5%

2022-2023: +11.8%

2021-2022: +12.3%

2020-2021: +29.3%

+15.0% +5.0%

NB

NL

+14.1%

+13.1%

NS

Dentalcare average paid amount increase was driven by Periodontic experience with a weighted increase of 2.2%.

DENTALCARE EXPERIENCE

The total paid for Dentalcare claims in 2023 totaled \$49.1M. This is an 11.8% increase over the prior year.

Minor Restorative services was the plans largest spend, representing 28% of the national dental claims paid or **\$13.7M** in overall claims expense. Periodontic Services account for 26% of dental claims paid, which represents \$12.8M in claims dollars.

SERVICE	2023	2022
Minor Restorative	\$13,748,000	\$12,292,000
Periodontic	\$12,766,000	\$11,414,000
Diagnostic	\$8,347,000	\$7,463,000
Preventative	\$5,401,000	\$4,829,000
Other	\$8,838,000	\$7,902,000
TOTAL	\$49,100,000	\$43,900,000

Diagnostic and Preventive services

continue to lead the national programs spend, with both services showing an over 55% utilization rate. Periodontic services are also quite high at 53.4% utilization.

The highest overall average amount paid per claim was for Endodontic services at an average of \$490 per claim. However, these services did not make our top 5 services list.

Top 5 Services Used	% Utilization	Average paid per claim	Average # of Claims per Cert
Diagnostic	60.8%	\$49	4.5
Preventative	56.7%	\$31	4.8
Periodontic Minor	53.4%	\$129	2.9
Restorative	34.4%	\$180	3.6
Oral Surgery	10.8%	\$192	2.4

The Dentalcare experience overall was driven by **an increase** in the **amount paid per claim** as well as an **increase in overall utilization**.

What Dealers Need to Know about the Canadian Dental Care Plan



Canadian residents without dental coverage will be excited to learn about the new Federal Canadian Dental Care Plan (CDCP), which builds on the Canada Dental Benefit (CDB) launched in December 2022 for children under 12. The CDCP is not intended to replace existing dental plans through employer/pension or private sponsored plans, but it is intended to complement existing provincial and territorial dental programs and fill existing gaps in coverage for those programs.

You should be educated on the CDCP because you may receive questions from your employees or retirees. A Stakeholder Toolkit has been developed by Health Canada to give you a better understanding of the CDCP and help respond to questions. The Canadian Dental Care Plan (CDCP) Stakeholder Toolkit now includes a recording of a recent information session. The toolkit will continue to be updated, and you are encouraged to check this link from time to time.

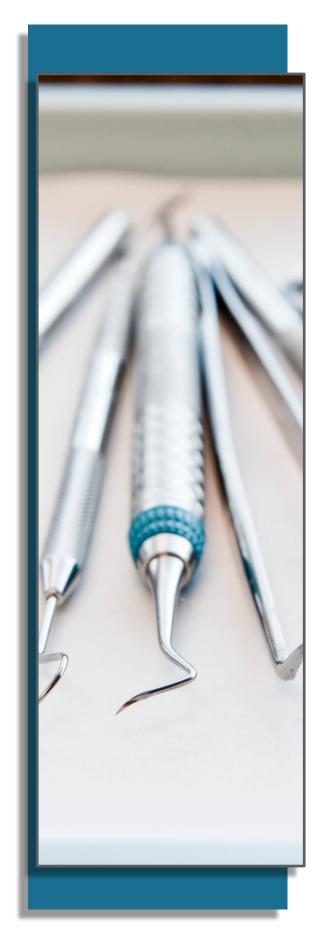
Additional information on the CDCP can also be accessed by visiting Canada.ca/dental and www.sunlife.ca/cdcp.

Eligibility:

- Individuals must be Canadian residents for tax purposes
- Have an annual adjusted family net income under \$90,000.
- Have filed their tax return for the previous year.
- Not have access to dental insurance. This means the individual has no access to any type of dental insurance or coverage through:
 - employment benefits or a family member's employment benefits, including health and wellness accounts
 - a professional or student organization
 - <u>Note:</u> If eligible for dental coverage through employment benefits or through a professional or student organization, the individual is not eligible for CDCP. This is true even if:
 - they decide not to take it
 - they have to pay a premium for it
 - they don't use it
 - their own pension benefits or a family member's pension benefits
 - This includes federal, provincial, and territorial government employer pension plans
 - Exception: An individual may be eligible for the CDCP if they are retired and:
 - opted out of pension benefits before December 11, 2023, and
 - can't opt back in under the pension rules
 - coverage purchased by the individual or a family member or through a group plan from an insurance or benefits company



If the individual purchased their current dental insurance policy privately (and not as part of any of the coverage described above), they are not eligible for the CDCP while that coverage is in effect.



Anyone considering cancelling an existing privately purchased policy should be mindful that the CDCP is designed to reimburse a percentage of the cost of dental care services, based on established CDCP fees, which may not be the same as what oral health providers normally charge. In addition, a co-pay between 40% and 60% may be applied based on an individual's adjusted family net income.

Enrolment:

- Seniors 70 and older were sent an invitation and instructions on how to apply started in December 2023 in a phased approach.
- Seniors 65 to 69 were able to apply online starting in May 2024. Older seniors who have yet to apply will also be able to use the online portal at this time.
- Persons with a valid Disability Tax
 Credit certificate and children under 18
 will be able to apply online starting
 June 2024.
- All remaining Canadian residents will be able to apply online starting in 2025.

Coverage start date:

Those who qualify will be sent a
 welcome package from Sun life with a
 member card and the start date of
 their coverage under the CDCP, which
 started as early as May 1st, 2024, for
 seniors. The coverage start date
 depends on when the application is
 received, and they are enrolled.

Co-payments for Canadians varies depending on adjusted family net income as follows:

- 0% below \$70,000
- 40% between \$70,000 and \$79,999, and
- 60% between \$80,000 and \$89,999.

Note: CDCP clients may have to pay fees in addition to the potential co-payment if the cost of their oral health care services are more than what the CDCP will reimburse based on the established CDCP fees and/or they agree to receive care that the plan doesn't cover.

Most services were available in May 2024 while some requiring preauthorizing will become available in November 2024:

- Preventive and diagnostic services, including cleaning, examinations, and x-rays
- Restorative, including fillings
- Endodontic, including root canal treatments
- Prosthodontic services, including dentures
- Periodontal, including deep scaling
- Oral surgery services, including extractions.

As of March 11, 2024, oral health providers can now confirm their participation in the CDCP by visiting sunlife.ca/cdcp.
Participation in the CDCP will be on a voluntary basis. Oral health providers eligible to participate and who can bill for services include dentists, dental specialists, dental hygienists, and denturists.

The <u>CDCP 2024 Benefit Grids</u> was made available on the Sun Life website on April 11, 2024 and took effect on May 1, 2024, the start date of when participating providers can submit CDCP claims electronically for direct payment by Sun Life.

Denise Balch, EC-CEP, BPHA

President, Connex Health and Principal Consultant, Crosslinks







Consult+
Telemedicine

Optional

Renewal Rate: **\$1.25** PEPM



Teladoc Medical Experts

Optional

Renewal rate: **\$0.91** PEPM

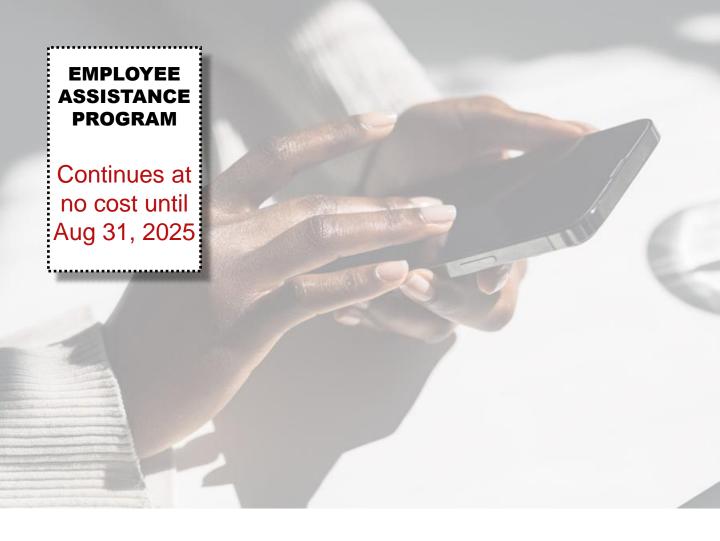


Travel
Assistance
Services*

Included *

Renewal rate: **\$0.55** PEPM

* added to plans with health coverage



CADA is committed to supporting dealers and their employee's overall well-being by funding the CADA 360 Employee Assistance Program.

To ensure the best service, we have requested a dedicated phone number for CADA 360 plan members.

For the best service, please remind your employees to use the dedicated CADA phone line.

1-833-701-2540



"The CADA benefits plan continues to provide unique benefits to Dealers and their staff: The CADA RETIRED DEALER PLAN and RETIRED EMPLOYEE PLAN is a unique offering that is typically not available to private sector companies. Most Canadians, unless they work for a public entity, find themselves scrambling to find healthcare coverage when they retire.

Long term staff who are age 55 or older and their years of service and age equal 65, are eligible for retiree health and dental benefits. This is a huge differentiator for Dealers who want to be able to attract and retain top talent within their organizations." **Dave**

Dickinson, Advisory Council Member, Ottawa, ON

This year effective September 1, retiree benefits programs will have a modest increase of 3% in line with inflation, claims experience, and future trends.

A CLOSING MESSAGE FROM OUR ADVISORY COUNCIL

As chairman of the CADA 360 Advisory Council, I've been asked to share my perspective on the program.

Let's start by addressing a question I frequently encounter from dealers: Why choose the CADA Benefits 360 plan?

To put it simply, this question has a straightforward answer. With nearly 45 years of experience as a broker, I can confidently say that there's no superior plan available across any industry for our automotive accounts. Operated on a not-for-profit basis, the CADA 360 plan boasts the lowest expenses in the market. While another carrier might entice you with short-term gains, over the long haul, the comprehensive cost efficiency and risk management features integrated into the CADA 360 plan make it unparalleled.

The benefits offered by the CADA program are unmatched by any standalone carrier. Dealerships or dealership groups have access to retirement savings programs facilitated through a trust, ensuring cost effectiveness. Moreover, the CADA shares its profits with dealers, enhancing plan offerings such as premium holidays. During the onset of the pandemic, all dealers benefited from a two-month premium relief—an initiative unmatched by any other carrier. Additionally, the CADA provides a complimentary embedded Employee Assistance Plan, recognizing the importance of mental health support. Comprehensive retiree benefits, including Life Insurance, Health, Out of Country, and Dental benefits, are also available, setting the CADA apart from the competition.

In essence, the CADA 360 Benefits plan stands as a stable, cost-effective, and efficient program, offering flexibility to tailor benefits according to the needs of your dealership—a level of customization unmatched elsewhere.

Why choose CADA 360? Their tagline says it all!

Bob Pointon
Advisory Council Chair
Toronto, ON

"It all comes back to you"

...more than a tag line

it's CADA 360's promise to dealers