



Welcome to the Johnson & Johnson benefits guide

“Healthy for humanity starts at home. We enable the total health — physical, mental, emotional and financial — of our workforce and their families.”

Here you will find information about the Johnson & Johnson benefits plan for Canada, which provides a range of benefits that support you in the moments that matter. This is a reflection of the Company’s commitment to help you and your family live well across your whole lives:



Healthiest Employees

We believe employees are the heart, mind and soul of Johnson & Johnson, and that every person plays a critical role in fulfilling our ambition. We’re committed to helping employees live well across their whole life, by providing a breadth of whole-life health benefits.



Healthiest Families

We believe that family comes first. We are pleased to offer family benefits, which show our strong support for the modern-day family, no matter what shape that family takes. Creating, caring and fostering a family leads to a number of twists and turns – and we want to be there to help you manage each and every one.



Healthiest Finances

Financial health is about more than what you have now – it requires building solid equity for the future. As a healthcare organization that knows how to invest for enduring impact, we want to help you have the healthiest possible financial future, whether that means planning for retirement or reaching a personal savings goal.



Take a few minutes to review the information in this guide.

About the plan

At Johnson & Johnson, we believe that each employee has unique needs and we actively support our employees' total well-being. That's why we offer a flexible benefits plan — allowing you to choose the right coverage for you. With the benefits plan, you can be sure you're covered for the moments that matter most.

Here's how it works

Your benefits are made up of:



Automatic basic coverage

A base level of protection for all employees.

★ Fully paid by Johnson & Johnson!



Flexible coverage options

Choice: so you can be sure you're protected.

★ Johnson & Johnson gives you flex credits to help pay for these options!



Basic employee Life insurance

- 1 times your **benefits earnings**, rounded to the nearest \$1,000
- Maximum without evidence of insurability is \$600,000; effective July 1st, 2023: the amount will increase from \$600k to \$850k
- If your benefits earnings exceed \$600k => \$850k then you can receive up to \$1.5 million of Basic Life insurance with evidence of insurability



Basic employee Accidental Death & Dismemberment (AD&D) insurance

- 3 times your benefits earnings, rounded to the nearest \$1,000



Short-Term Disability insurance

- A percentage of your base salary, based on your length of service, for up to 26 weeks, payable upon approved leave



Basic Long-Term Disability insurance

- 50% of pre-disability monthly benefits earnings

Fully or partially covered through Johnson & Johnson provided flex credits



Extended medical care



Dental care



Health care spending account (HCSA)

Covered through payroll deductions



Optional Life insurance



Optional Accidental Death & Dismemberment (AD&D) insurance



Optional Long-Term Disability (LTD) insurance



Hearing aids: A maximum of \$750 every five years, is available to those who require hearing aids, including for repairs. Please select Option 4 to add this benefit to your plan. Employees who select Option 3 will have a limit of \$500 every five years.

More information about flexible benefits options is on the next page.

BENEFITS EARNINGS:

- Annual base salary
- Lump-sum merit awards
- Performance bonuses
- Sales bonuses/commissions



You have an opportunity to make changes to your benefits selections each year at benefits re-enrolment during the last week of May and first week of June. Your benefits selections are effective for the entire benefits year – July 1 to June 30 – unless you have an eligible life event like getting married, divorced or having a baby.

Flexible benefits options

We not only enable our people to thrive, but their families as well. Because every employee and family is unique, we believe in the importance of choice, so you can be sure you're protected. You have a number of flexible benefits options to choose from so you can create the perfect plan for what matters most to you.

Extended medical care and dental care

There are three coverage levels under each category:



1. Employee (you only)

You can pick this level of coverage even if you have an eligible spouse and/or child.



2. Employee + 1 (you + one dependent)

The dependent can be your eligible spouse or your only child.



3. Employee + 2 or more (you + more than one dependent)

This could be you, your eligible spouse, and one or more dependent children. It could also be just you and two or more dependent children.

There are four coverage options:

Option 1 – Opt-out

Fully covered by flex credits

Option 2 – Basic coverage

Option 3 – Full coverage (default coverage at no cost to you)

Partially covered by flex credits. Remaining cost covered through payroll deductions.

Option 4 – Comprehensive coverage



Optional Life insurance



For you

- Coverage is available in \$10,000 increments, up to a maximum of \$1 million
- Evidence of insurability is required on all amounts



For your spouse

- Coverage is available in \$10,000 increments, up to a maximum of \$500,000
- Evidence of insurability is required on all amounts



For your dependent children

- Coverage is available in \$5,000 increments, up to a maximum of \$25,000
- Evidence of insurability is not required

Flexible benefits options (CONTINUED)



Optional Accidental Death & Dismemberment (AD&D) insurance



For you

- **Option 1:** 24-hour basic coverage on or off the job, three times your benefits earnings up to \$1.2 million
- **Option 2:** Coverage is available in \$5,000 increments (you must also purchase option 1 with this coverage), up to a maximum of the lesser of your basic coverage amount or \$500,000. Option 1 and Option 2 combined with your basic AD&D benefit cannot exceed \$2 million.



For your spouse

- Coverage is available in \$5,000 increments, up to a maximum of \$100,000



For your dependent children

- \$10,000 coverage per child

Evidence of insurability is **not** required under any option.



Optional Long-Term Disability (LTD) insurance

You can increase your LTD coverage through a “buy-up” option, meaning you pay the difference between the basic and premium coverage. Johnson & Johnson continues to pay your basic LTD premiums.

- Buy-up option coverage is 66²/₃% of benefits earnings
 - The maximum monthly LTD benefit is \$15,000 per month
 - Both LTD options provide you with taxable income if you become disabled
 - Evidence of insurability is required
-



Health care spending account (HCSA)

You can direct excess flex credits to your HCSA to help pay for eligible medical and dental expenses not covered by:

- Your provincial health plan
- Your Johnson & Johnson benefits plan, including deductibles and co-insurance
- Your spouse's benefits plan (if applicable)

Keep in mind you can also use your HCSA to cover the cost of medical and dental expenses in excess of your covered maximums.



For complete details about what's covered under each option, please visit the For Your Benefit portal and go to *Benefits & Health > My Benefits Plan*.



Understanding flex credits

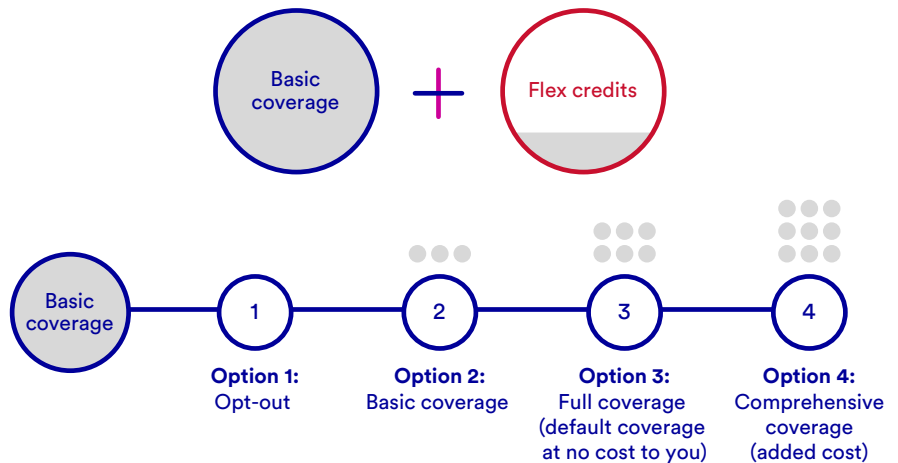
Each year, Johnson & Johnson contributes to the cost of your benefits by:

- Paying for your automatic basic coverage
- AND**
- Providing you with flex credits – money you can use to help cover the cost of your flexible benefits coverage options

You receive flex credits based on two components:

- 0.15% of your benefits earnings
- PLUS**
- Your coverage status – in other words, whether you choose to opt out, cover just yourself, or cover yourself and your family

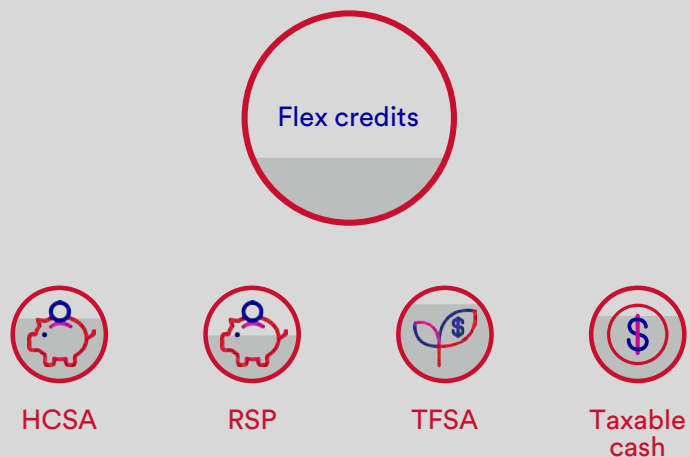
You use flex credits to pay for extended medical care and dental care coverage. The higher the option you choose, the more flex credits you will use.



As you choose the coverage that suits your needs, flex credits are automatically applied to cover the cost.

Make sure to hit the “Recalculate” button to see an accurate snapshot of how many flex credits you have left, and/or the payroll deductions required to cover your benefits if you run out of flex credits.

If you have flex credits left over after selecting your coverage options, you can put them in your Health Care Spending Account (HCSA), your Group RSP account or your Tax-Free Savings Account (TFSA) or take them as taxable cash.





Choosing the right options

Option 1

Option 1 means you're "opting out" of coverage. This is typically only chosen by employees who have comprehensive coverage somewhere else, such as through a spouse's plan.

If you choose option 1, this will free up flex credits that you can deposit to your Health Care Spending Account, Group RSP or Tax-Free Savings Account, or take as taxable cash.

Option 2

Option 2 provides basic coverage. This option may be suitable if you have:

- Minimal health and dental expenses
- Coverage through another plan (such as your spouse's) and you can coordinate benefits between the two plans

If you choose option 2, this will free up flex credits that you can deposit to your Health Care Spending Account, Group RSP or Tax-Free Savings Account, or take as taxable cash.

Option 3

Option 3 offers comprehensive coverage and the cost is **fully covered** by the flex credits that Johnson & Johnson provides you. You don't have to pay anything!

This is a good option for many. Even for those with relatively few expenses, this option offers *peace of mind* in case you encounter any unexpected health expenses.

Option 4

Option 4 provides enhanced coverage, for employees with greater health expenses. If you choose this option, you will pay a portion of the increased cost through regular payroll deductions.

The benefits plan has options for **everyone**.

We've improved the flex plan

We're introducing several enhancements as of July 1st, 2023:

- **New practitioners:** Addition of the audiologist, dietician, and occupations therapist (under the same maximum as all other practitioners).
- **Vision care examinations:** The plan now covers \$100 every 12 months (previously, it was \$60 every 12 months).
- **Addition of Gender Affirmation coverage:** This coverage will help to supplement the coverage for surgeries with additional financial support.

Other enhancements recently introduced:

- **Diabetic equipment:** We've added continuous glucose monitoring coverage and increased diabetic medical equipment coverage to a maximum of \$4,000 per year.
- **Surgical bras:** A maximum of two surgical bras per person, per year, is now covered.

Choosing the right options (CONTINUED)

When each of us is at our healthiest, we are able to change the trajectory of health for humanity. As you start making your benefits choices, think about what type of coverage you and your family might need. Consider if you have some upcoming expenses like new eyeglasses or braces for one of your kids.

Not sure what options suit you best? Are you more like Ashley, Scott or Mary?



Ashley

- Single
- No dependents
- Doesn't own any property



Scott

- Married to a self-employed partner who does not have a benefits plan
- One dependent teenage daughter
- Has a mortgage on current home



Mary

- Married to a partner with a benefits plan
- Planning to retire in the next three to five years
- Owns her home mortgage-free



If you are like Ashley, Scott, or Mary, go to the next page!



Can't relate? The "Help me decide" tool gives customized support!

The "Help me decide" feature on the enrolment tool estimates your out-of-pocket medical and dental expenses. All you need to do is provide basic information about your expected expenses and the tool does the rest of the work. If you don't have that information handy, the tool can provide estimates for typical usage. Access this feature on the enrolment tool.

Choosing the right options (CONTINUED)

Extended medical care

Ashley	Scott	Mary
<p>Since Ashley has very few medical expenses, she chooses option 2 for extended medical coverage. This option ensures that she has coverage, but also leaves her with some extra flex credits.</p> <p>If Ashley wants increased coverage under the extended medical care plan, she may also consider option 3, which is fully paid through Company-provided flex credits. Under this option, she wouldn't have any flex credits remaining.</p>	<p>Scott and his family have a number of prescriptions to fill throughout the year. Both his partner and his daughter wear glasses. He chooses option 4 for extended medical coverage to help with these expenses.</p> <p>If Scott doesn't want to contribute to option 4 coverage, he may also consider option 3, which would still offer comprehensive coverage at no expense to him!</p>	<p>Mary is getting closer to retirement and is concerned about having good coverage in case anything unexpected happens. She chooses option 3 for extended medical care because it offers full coverage, but is still completely covered by her flex credits.</p> <p>If Mary's partner's benefits plan offers good coverage, she may also consider option 2. This option would leave Mary with extra flex credits to direct to other components of the plan.</p>

Dental care

Ashley	Scott	Mary
<p>Ashley uses her dental care plan for check-ups and cleanings, so she chooses option 2. This option ensures that she has coverage, but also leaves her with some extra flex credits.</p> <p>If Ashley wants increased coverage under the dental care plan, she may also consider option 3, which is fully paid through Company-provided flex credits. Under this option, she wouldn't have any flex credits remaining.</p>	<p>In addition to Scott and his family's regular check-ups and cleanings, his daughter also needs braces this year. With that in mind, he chooses option 4 for dental care.</p> <p>If Scott prefers to pay for his daughter's braces out-of-pocket instead of contributing to option 4, he may also consider option 3, which is fully covered by Company-provided flex credits.</p>	<p>Mary and her partner typically use the dental care plan for check-ups and cleanings only, so she chooses option 2. This option ensures that they have coverage, but also leaves Mary with some extra flex credits.</p> <p>If Mary wants increased coverage for herself and her partner under the dental care plan, she may also consider option 3, which is fully paid through Company-provided flex credits. Under this option, she wouldn't have any flex credits remaining.</p>

Choosing the right options (CONTINUED)



Optional insurances (Life, AD&D, LTD)

Ashley	Scott	Mary
<p>Since Ashley is young, healthy, has no dependents, and doesn't own any property, she decides not to purchase any optional insurance. She believes that the basic insurance provided by Johnson & Johnson is enough for her current situation.</p> <p>If Ashley wants increased protection, she may also consider some optional coverage for either Life, AD&D or LTD insurance.</p>	<p>With two dependents and a mortgage, Scott decides to get optional insurance coverage. He elects Life insurance for himself, his partner and his daughter. With increased Life insurance, Scott believes that he's protected, so he sticks with the basic Johnson & Johnson provided AD&D and LTD insurance coverage.</p> <p>If Scott wants increased protection, he may also consider some optional coverage for either AD&D or LTD insurance.</p>	<p>Mary and her partner are mortgage-free and their two adult children no longer depend on them, so Mary decides that she doesn't need Optional Life or AD&D insurance. Mary does, however, want to be sure she's protected in case of a rainy day, so she decides to increase her LTD insurance with the "buy-up" option.</p> <p>If Mary wants increased protection, she may also consider some optional coverage for either Life or AD&D insurance.</p>



Extra flex credits

Ashley	Scott	Mary
<p>Ashley has flex credits left over since she chose option 2 for both extended medical and dental care. Since she wears contacts and glasses, she decides to direct all her remaining flex credits to her HCSA to help cover those expenses.</p> <p>If Ashley wants an easy way to boost her savings, she may also consider moving some of her extra flex credits to the Group RSP.</p>	<p>Scott does not have any flex credits left over since he chose option 4 for both extended medical and dental care.</p>	<p>Mary has some flex credits left over since she chose option 2 for dental care. Since Mary feels adequately covered under the plan and is getting closer to retirement, she directs her remaining flex credits to her Group RSP account.</p> <p>If Mary feels she has adequate retirement savings, she may also consider directing her extra flex credits to her HCSA for increased benefits coverage.</p>

Enrolment made simple

When you join the Johnson & Johnson benefits plan (and each year after) you will get to choose your benefits using our enrolment tool – which you can access through the For Your Benefit portal.

There are a few simple screens you will need to go through:

1 Confirm whom you want to cover – just yourself, or yourself and any dependents. Your dependents will receive the same extended medical care and dental care coverage options that you choose for yourself.

2 Choose your benefits.

Family

Q3 Your employer has provided us your information for your benefit enrolment.

Please review your family members currently on file. You may add, update or remove family members if the information displayed is not accurate. Family members must be listed below in order to be eligible for medical and/or dental coverage.

Please contact the For Your Benefit Help Centre by phone at 1-866-769-8321 if your child is over age 21 and is eligible for continued coverage under the plan as a disabled dependent.

John Doe	Jane Doe	Jack Doe
Relationship: Spouse	Relationship: Spouse	Relationship: Child
DOB: Apr 28, 1970	DOB: Apr 18, 1970	DOB: Jun 5, 2000
View Details	View Details	View Details

Extended Medical Care

Important information

Extended Medical Care:
If you used the **Help me decide** tool to assist you in making your choices, it is important to note that this tool is provided for information purposes only and is not meant to offer advice. Information used by the tool is based on national averages for usage and cost of services, adjusted for age, gender, and geography. The decision tool provides estimated only - cost and your associated cost share will vary based on actual usage of the services consumed.

You and your family's basic medical needs are covered by your provincial health coverage. The Company's extended medical care plan offers additional coverage to expand your medical protection.

Extended Medical Care

Select who is covered

- ☒ John Doe (Spouse)
- ☒ Jane Doe (Spouse)
- ☒ Jack Doe (Child)

Option 1 - No Coverage	Option 2 - Basic	Option 3 - Intermediate	Option 4 - Enhanced
Annual Cost: \$0.00	Annual Cost: \$3,066.00	Annual Cost: \$3,909.00	Annual Cost: \$6,592.00
View Details	View Details	View Details	View Details

Enrolment made simple (CONTINUED)

3 Confirm any beneficiaries – this is the person(s) you would like to receive your insurance benefits.

Beneficiaries

Your primary beneficiary(ies) will receive the proceeds payable from each applicable plan in the event of your death. If your primary beneficiary(ies) dies away before you, the proceeds payable for each applicable plan would be paid to your contingent beneficiary(ies), or to your designated estate.

Before you proceed, note that beneficiary designation rules that apply to persons may differ from those that apply to life, accident, injury, and sickness benefit plans. Under the company's plan, you must:

- If you have an eligible spouse who survives you, your eligible spouse will automatically receive any death benefit payable, regardless of your designated beneficiary(ies).
- If you have no eligible spouse who survives you, your designated beneficiary(ies) or estate will receive the death benefit.

Display contingent allocations

	Life Insurance	AD&D	Person
	Primary	Primary	Primary
Designated beneficiary(ies)			
Jane Doe	100%	100%	100%
Total	100%	100%	100%

4 Finalize and submit your choices!

Complete your Enrolment

Warnings

You must sign and return the "Beneficiary Designation Form" once you have completed your enrolment. You can access the form from the confirmation screen after you complete the "Complete Your Enrolment" step of your enrolment. If you are enrolling in the Group RSP, you will need to complete a "Declaration of Trust" form, which will also request beneficiary information. Please note that this form is for records purposes only, and your beneficiary designations **are not official** until you have completed the "Beneficiary Designation Form" and submitted to the **For Your Benefit** help centre.

Important information

Extended Medical Care

Dental Care

If you used the **Help me decide** tool to assist you in making your choices, it is important to note that this tool is provided for information purposes only and is not meant to offer advice. Information used by the tool is based on national averages for usage and cost of services; adjusted for age, gender, and geography. The decision tool provides estimates only – costs and your associated cost share will vary based on actual usage of the services consumed.

Basic Life Insurance

If you used the **Help me decide** tool to assist you in selecting your life insurance coverage, it is important to note that this tool is designed to give you a general idea of the amount of life insurance you may want to consider. It is not a detailed analysis of your life insurance requirements or a specific recommendation. For a more precise analysis of your needs, you may want to consult a personal financial advisor.

Your RRSP Room for this year

You have not entered your RRSP contribution room for this year. If you do not enter a value, the tool will assume you have no RRSP contribution room available when it optimizes your contributions to the Plan and when it evaluates whether you are over-contributing to the Group RSP.

Annual re-enrolment

Beneficiary Designation Form

Family Members

Below is a summary of the dependents you have on file.

John Doe

Relationship: Myself

D.O.B: Apr 25, 1970

[View Details](#)

Jane Doe

Relationship: Spouse

D.O.B: Apr 18, 1970

Coverage: Medical, Dental

[View Details](#)

Jack Doe

Relationship: Child

D.O.B: Jul 5, 2000

Coverage: Medical, Dental

[View Details](#)

> As you choose your benefits, you can select the **RECALCULATE** button to see how much they cost. If you've got flex credits left over, they will be allocated to your HCSA. You choose how many flex credits you want to keep in your HCSA or move to your Group RSP or Tax-Free Savings Account, or take as taxable cash!



Benefits: a shared responsibility

You might not realize it, but every claim has an impact on the Johnson & Johnson benefits plan. Good benefits consumerism is one of the best ways to help keep the plan sustainable, and keep your out-of-pocket expenses to a minimum.

Here are a few tips:



Coordinate coverage

Coordination of benefits (COB) is an insurance process that allows you to submit claims to the Johnson & Johnson benefits plan first and then, if your plan doesn't cover all of the cost, to submit the remainder to your spouse's plan.

If your spouse has coverage with his or her employer, you can coordinate coverage to get up to 100% of your healthcare expenses reimbursed.



Shop for cheaper dispensing fees

A **dispensing fee** is what you pay the pharmacist to prepare your prescription and to give you information and advice about the drug you're buying. Did you know that dispensing fees vary significantly between pharmacies? Some offer dispensing fees as low as \$4, while others charge more than \$12 per prescription.

By shopping at pharmacies with lower fees, you can save yourself money, and help keep the benefits plan sustainable.



Get a trial supply of a new prescription

If you are prescribed a new long-term medication, choose a trial supply first to ensure the drug works for you and there are no adverse side effects.

By choosing a trial supply before committing to a medication, you can ensure you get the right medication for you without the added cost of switching.



Get a 90-day supply of your prescriptions

If you take medication on a daily basis, ask your doctor for a **90-day supply**. This helps reduce the number of times you have to go to the pharmacy and saves you money – instead of paying a dispensing fee three times, you pay it once. It adds up!

Doing so throughout the year can save you hundreds of dollars and helps to keep the benefits plan sustainable.



Be proactive with your health!

Make time to take care of yourself – both physically and mentally. By focusing on your well-being, you'll not only feel better, but you can reduce the need for costly medical treatments or prescription drugs down the road –which helps keep the plan affordable.

Johnson & Johnson is committed to supporting your overall health, including your mental health. Free, confidential support is available through our Employee and Family Assistance Program (EFAP). Reach out today.



1-800-663-9099



healthymind.jnj.com



Questions?

We empower our employees to be their healthiest selves by offering cutting-edge programs, policies and resources across their journey.

Contact the Benefit Help Centre

✉ fyb@hroffice.com



1-866-769-8521

Monday to Friday, 8:30 AM to 5:00 PM ET

Ask AVA

Ava is a digital assistant that can answer your questions 24/7. Ava can help you access information about your benefits coverage, your retirement & savings program contributions, and account balances.

Launch Ava from the FYB portal!