2024 Bulletin on Quebec Social Legislation



beneva

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on Quebec Social Legislation

We are pleased to present the 2024 Beneva Bulletin on Quebec Social Legislation, which summarizes the government programs available to citizens. This document provides information on how these programs and group insurance plans work in synergy to improve the well-being of Quebec citizens.

The programs covered in this bulletin are tools our society has introduced to improve conditions for its members. This document highlights legislation that maintains social acquisitions, programs for maintaining citizens' quality of life, as well as measures for supporting and protecting the dignity of fellow citizens who are experiencing difficulties.

It also reflects the solidarity and humanity that defines our society. These values are particularly relevant for the people at Beneva. As a mutual company, our mission is to improve people's lives by putting them at the heart of our thinking and our actions. In publishing this bulletin, we hope to offer a tool to guide organizations and individuals in making choices that promote their physical and financial health.

NOTES:

We recognize that sex is based on the physical and biological characteristics of a person at birth and that gender is a multi-dimensional concept shaped by various factors such as cultural and behavioural norms and personal identity. Given current social change, this concept is also evolving. We use the term "women" to designate people who identify as women. We also recognize that many health issues covered in this document may apply not only to women but also to transgender people and non-binary persons who were assigned the female sex at birth.

In this bulletin, the word "spouse" refers both to people who are married as well as to those who live together.

The measures and programs presented in this document are the responsibility of the various government bodies that administer them and are subject to change. As a result, certain information contained in the document may change after publication. In the event of a discrepancy, the wording of the laws and regulations takes precedence over the information provided in this bulletin.

If you have any comments about the Beneva Bulletin on Social Legislation, please email us at bulletin@beneva.ca.

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FEDERAL PLAN

01. Employment Insurance Act

Employment Insurance provides an income to workers who lose their jobs through no fault of their own or who must take a leave from work for illness, the birth or adoption of a child or to be a caregiver.

Premiums paid by employers and workers

Employment Insurance is financed by premiums paid by employers and workers.

Parameters		2024		2023
Maximum yearly insurable earnings		\$63,200		\$61,500
Employees	Canada, except Quebec	Quebec ¹	Canada, except Quebec	Quebec ¹
Premium rate per \$100 of gross insurable earnings	1.66%	1.32%	1.63%	1.27%
Maximum annual premium	\$1,049.12	\$834.24	\$1,002.45	\$781.05
Employers	Canada, except Quebec	Quebec ¹	Canada, except Quebec	Quebec ¹
Premium rate per \$100 of gross insurable earnings (1.4 times the employee's premium)	2.324%	1.848%	2.282%	1.778%
Maximum annual premium	\$1,468.77	\$1,167.94	\$1,333.84	\$1,093.47

1. Quebec has its own parental benefits plan. This is why the rates are lower than those in effect elsewhere in Canada.

Regular benefits

To be eligible for regular Employment Insurance benefits, workers must have accumulated the required number of insurable employment hours for a reference period, i.e. between 420 and 700 hours based on the unemployment rate in their area.

They must also:

- Have lost their job through no fault of their own
- Not worked or received earnings for at least 7 consecutive days in the last 52 weeks
- Be able to work each day
- Be actively seeking employment

Note: Different eligibility criteria may apply to certain groups of workers such as farmers, fishers, workers or residents outside Canada and self-employed workers.

Payment amount and calculation of regular benefits

Parameters	Terms
Waiting period before receiving benefits	7 days
Benefits	55% of the average insurable earnings of the 14 to 22 best weeks over the past 52 weeks, based on the regional unemployment rate
Maximum weekly benefit	\$668
Duration	14 to 45 weeks, based on the unemployment rate in the region

GOOD TO KNOW

Reduced premiums for employers who provide disability insurance

Some employers are entitled to a reduced Employment Insurance premium rate while better protecting their staff. How? By providing a short-term disability insurance plan that provides benefits that are equal to or greater than those provided by the government. Depending on the type of plan, the reduction may be from \$0.23 to \$0.41 per \$100 of insurable earnings.

To be eligible, the plan must:

- Offer at least 15 weeks of benefits for a short-term disability
- Provide benefits equal to or greater than those provided by Employment Insurance
- Provide benefit payments within 8 days of the start of the illness or injury (the waiting period cannot exceed 7 consecutive days)
- Be available to employees within 3 months of hire
- Cover employees 24/7

For more information: El Premium Reduction Program

Maternity and parental benefits

Maternity and parental benefits provide financial aid to parents who are on leave from work to care for a newborn or a newly adopted child.¹

To qualify for coverage, applicants must:

- Have experienced a drop in earnings of more than 40% for at least one week
- Have accumulated at least 600 insurable hours of work during the reference period

Maternity benefits

Maternity benefits are paid to biological mothers, including surrogate mothers, who cannot work because they are pregnant or have recently given birth.

The benefits cannot be shared between the two parents. The mother receiving maternity benefits may also be entitled to receive parental benefits.

Parental benefits

Parental benefits are paid to the parents of a newborn or newly adopted child. Parents must choose between two options: standard parental benefits or extended parental benefits.

Each parent must submit their own application. Parents sharing benefits must each choose the same option. Once they start receiving parental benefits, they cannot change options. They can receive their benefits at the same time or one after another.

Sickness benefits

To be eligible for Employment Insurance sickness benefits, workers must have accumulated 600 insurable hours of work during the reference period.

They must also:

- Be unable to work for medical reasons
- Have experienced a more than 40% reduction of their weekly earnings for at least one week
- Provide a medical certificate

Calculation and payment of sickness benefits

Parameters	Terms
Waiting period before receiving benefits	7 days
Benefits	55% of insurable earnings
Maximum weekly benefits	\$668
Maximum duration	26 weeks

1. Quebec has its own program, the Québec Parental Insurance Plan, that provides maternity, paternity and adoption benefits.

Calculation of parental benefits

Type of benefit	Maximum weeks	Benefit rate	Weekly maximum
Maternity	15 weeks	55%	\$668
Parental			
Standard	40 weeks	55%	\$668
	Can be shared, but one parent cannot receive more than 35 weeks of standard benefits		
Extended	69 weeks	33%	\$401
	Can be shared, but one parent cannot receive more than 61 weeks of extended benefits		

Caregiving benefits

Caregiving benefits provide financial assistance to individuals who must take time away from work to care for or support a close relative who is critically ill or injured or who needs end-of-life care.

To be eligible, the applicant must have accumulated at least 600 insurable hours of work during the reference period.

They must also:

- Be a family member or a person who is considered a family member of this person
- Have experienced a more than 40% reduction of their weekly earnings for at least one week because they are on leave from work to provide care or support to the person
- Provide a medical certificate confirming that the person is seriously ill or injured or in need of end-of-life care

The weeks of benefits may be shared by eligible caregivers. In this situation, they can receive their weeks of benefits at the same time or one after another.

Calculation and payment of caregivers' benefits

Parameters	Terms
Waiting period before receiving benefits	7 days
Benefits	55% of insurable earnings
Maximum weekly benefits	\$668
Maximum duration of benefits ¹	
Family caregiver benefit for children	35 weeks
Family caregiver benefit for adults	15 weeks
Compassionate care benefits	26 weeks

1. Benefits can be paid for up to 52 weeks following the date the person is certified as critically ill or injured or in need of end-of-life care.

Working while on claim

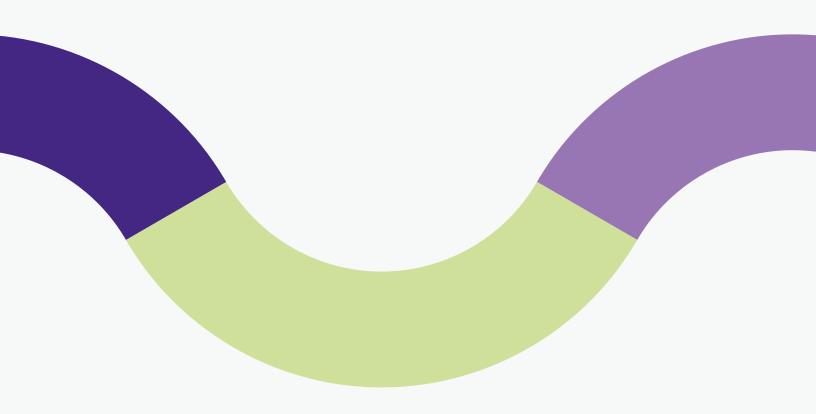
Individuals who earn employment income may continue receiving part of their benefits. For each dollar earned, they may keep \$0.50 of the Employment Insurance benefits up to the earnings threshold. This threshold is defined as 90% of the insurable weekly earnings used to calculate the benefit amount. Each dollar that exceeds this threshold is deducted from the benefits.

For more information:

Employment Insurance - Working While on Claim

Additional information

Employment Insurance benefits and leave



PROVINCIAL PLAN

02. Québec Parental Insurance Plan

The Québec Parental Insurance Plan (QPIP) pays benefits to wage earners and self-employed workers who go on maternity, paternity, parental or adoption leave.

This plan replaces Employment Insurance parental benefits paid by the federal government in the other Canadian provinces.



Premiums

QPIP premiums are deducted by *Revenu Québec*. They are indexed on January 1 of each year. In 2024, the plan's premium rates remained the same as the previous year.

Calculations	2024	2023
Maximum annual insurable earnings	\$94,000	\$91,000
Wage earners		
Premium rate as a percentage of earnings	0.494%	0.494%
Maximum premium	\$464.36	\$449.54
Self-employed workers		
Premium rate as a percentage of earnings	0.878%	0.878%
Maximum premium	\$825.32	\$798.98
Employers		
Premium rate as percentage of earnings	0.692%	0.692%
Maximum premium	\$650.48	\$629.72

Eligibility conditions

To qualify for QPIP benefits, applicants must:

• Pay a premium

• Have insurable earnings of at least \$2,000 during the reference period

Other conditions apply depending on the status of the worker as indicated in the table below.

Eligibility conditions based on worker status

Status	Eligibility conditions
Wage earners	 Be a resident of Quebec at the start of the benefit period Have stopped working or seen a reduction of at least 40% of weekly earnings
Self-employed workers (including persons receiving QPIP insurable earnings as a family-type or intermediate resource)	 Be a resident of Quebec at the start of the benefit period as well as on December 31 of the year preceding the start of the benefit period Have ceased business activities or reduced the time spent on business activities by at least 40%
Wage earners who are also self-employed	 Be a resident of Quebec at the start of the benefit period and on December 31 of the year preceding the start of the benefit period Have stopped working or seen a reduction of at least 40% of usual weekly earnings and Have ceased business activities or reduced the time spent on business activities by at least 40%

Benefits

The following tables summarize different possibilities. For each plan, benefits are calculated as a percentage of average weekly earnings.

The maximum insurable earnings for 2024 is \$94,000.

Benefits for pregnancy or birth

Type of benefits	Basic plan	Special plan
Maternity or exclusive to the person for pregnancy or childbirth	18 weeks: 70% of earnings	15 weeks: 75% of earnings
Paternity or exclusive to the parent who did not give birth	5 weeks: 70% of earnings	3 weeks: 75% of earnings
Parental	32 weeks	25 weeks: 75% of earnings
Shareable	First 7 weeks: 70% of earningsNext 25 weeks: 55% of earnings	
	4 additional weeks	3 additional weeks
	at 55% of earnings once 8 shareable parental benefit weeks have been paid to each parent	at 75% of earnings once 6 shareable parental benefit weeks have been paid to each parent
Parental for multiple births Non-shareable	5 weeks for each parent: 70% of earnings	3 weeks for each parent: 75% of earnings
Single parent parental Non-shareable	5 weeks: 70% of earnings	3 weeks: 75% of earnings

Adoption

Type of benefit	Basic plan	Special plan
Adoption	5 weeks for each parent: 70% of earnings	3 weeks for each parent: 75% of earnings
Non-shareable		
Adoption-related welcome and support	13 weeks: 70% of earnings	12 weeks: 75% of earnings
Shareable		
Adoption	32 weeks	25 weeks: 75% of earnings
Shareable	• First 7 weeks: 70% of earnings	
	Next 25 weeks: 55% of earnings	
	4 additional weeks	3 additional weeks
	at 55% of earnings once 8 shareable adoption benefit weeks have been paid to each parent	at 75% of earnings once 6 shareable adoption benefit weeks have been paid to each parent
Multiple adoption	5 weeks for each parent: 70% of earnings	3 weeks for each parent: 75% of earnings
Non-shareable		
Single parent parental	5 weeks: 70% of earnings	3 weeks: 75% of earnings
Non-shareable		

Increased benefit amount

Benefits are increased to recipients whose average weekly income is below a threshold equal to the minimum wage for a regular work week of 40 hours. Eligibility for this increase is automatically determined. It is not necessary to apply for it.

Income to report while receiving benefits

People who receive benefits must report their income. They are entitled to receive some earnings without having their benefits reduced. The amount of the exemption is obtained by calculating the difference between the average weekly earnings and the amount of benefits. When weekly earnings exceed the permitted exemption, QPIP benefits are reduced by this amount.

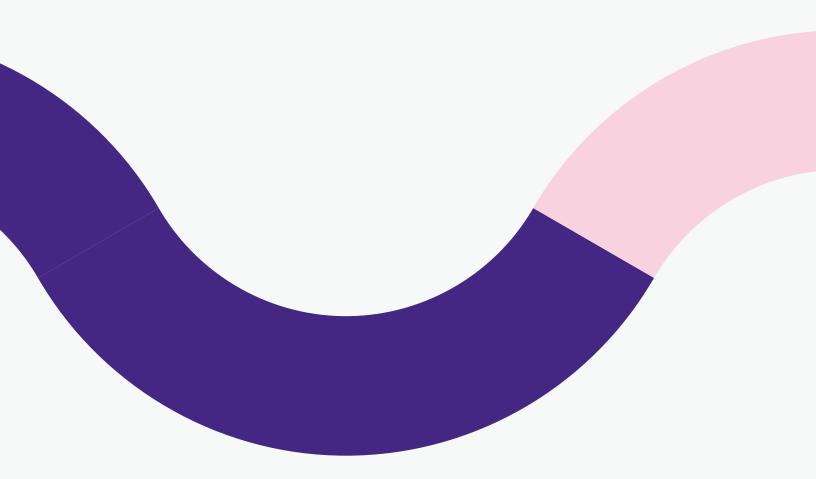
Example

Let's assume that the average weekly income of a parent is \$800. If the parent choses the basic plan, the benefit will be \$560, i.e. 70% of the average income.

Calculation:	
Average income	\$800
Benefit	- \$560
Exemption	\$240

Additional information

Quebec Parental Insurance Plan



FEDERAL PLAN

03. Canada Child Benefit

The Canada Child Benefit (CCB) is paid every month to families who have children under 18. The CCB may include the Child Disability Benefit (CDB), where applicable. These benefits are not taxable.



Eligibility

To be eligible for the CCB, the applicant must:

- Live with a child under age 18
- Be designated as primarily responsible for the care and upbringing of the child
- Be a resident of Canada for tax purposes
- Have one of the following statuses or have a spouse with one of the following statuses:
 - Canadian citizen
- Permanent resident
- Protected person
- Temporary resident of Canada for the last 18 months and have a valid permit as of the 19th month
- Be registered, or entitled to be registered, under the Indian Act

Benefits

Benefits are paid over a 12-month period from July of one year to June of the following year.

The information used to calculate the benefit is:

- The number of children living with the person primarily responsible for their care and upbringing
- The age of the children
- The primary caregiver's marital status
- The adjusted family income indicated on line 236 of the income tax return and to which is added the net income of the spouse, where applicable
- The eligibility of a child for the Child Disability Benefit

GOOD TO KNOW

Income tax reports must be up to date for entitlement to government programs

The Canada Child Benefit, as with other provincial benefits for families, is established and recalculated in July each year based on the tax information provided for the tax year ending December 31 of the previous year.

To receive benefits, applicants must file their income tax reports every year, even if they don't have any income. In the case of couples, both spouses must complete an income tax report but only one payment will be issued for the household.

Basic Benefit for the period of July 2023 to June 2024

For the period of July 2023 to June 2024, households with a net income under \$34,863 receive the maximum allowance for each child:

- Under age 6: \$7,437 per year (\$619.75 per month)
- Age 6 to 17: \$6,275 per year (\$522.91 per month)

When the adjusted family income exceeds \$34,863, the allowance is reduced in accordance with the terms indicated in the table below.

CCB reduction based on adjusted family income

	Reduction according to adjusted family income level (% of amount exceeding the established threshold)	
Number of children	Between \$34,863 and \$75,537	Over \$75,537
1 child	7%	\$2,847 + 3.2%
2 children	13.5%	\$5,491 + 5.7%
3 children	19%	\$7,728 + 8%
4 children or more	23%	\$9,355 + 9.5%

Child Disability Benefit

The Child Disability Benefit is paid in addition to the CCB.

For the period of July 2023 to June 2024, the basic amount of this benefit is \$3,173 (\$264.41 per month) for each eligible child.

The CDB is reduced when adjusted family net income is greater than \$75,537. The reduction is calculated according to the terms indicated in the table below.

CDB reduction based on family income

Number of eligible children	Adjusted family income above \$75,537 (% of the portion exceeding the established threshold)
1 child	3.2%
2 or more	5.7%

GOOD TO KNOW

How and when to apply?

The individual primarily responsible for the child's care and upbringing must submit a CCB application as soon as possible, namely:

- As of the child's birth
- As soon as the child lives with them
- As soon as the situation meets the eligibility conditions

There are three ways to submit a CCB application:

- Automated Benefits Application: Possible through the partnership of the CRA and the provincial vital statistics office. The CRA uses the information on the child's birth registration form to determine the primary caregiver's eligibility for benefits and tax credits.
- <u>My Account:</u> The primary caregiver can apply online using their personal CRA account. They need to sign in, go to Apply for Child Benefits, and follow the instructions.
- <u>RC66 Canada Child Benefits Application</u>: This form can be used to apply for all federal, provincial and territorial child benefit programs.

Additional Information

Canada Child Benefit

PROVINCIAL PLAN

04. Family Allowance

The Family Allowance is paid to all eligible families with one or more dependent children under age 18 living with them.



Eligibility

To be eligible for the Family Allowance, the applicant must meet the following conditions or live with a spouse that meets them:

- Be responsible for the care and upbringing of a child under 18
- Live in the same household as the child
- Reside in Quebec
- Have one of the following statuses:
 - Canadian citizen
- Protected person
- Permanent resident
- Temporary resident who has been living in Canada for the last 18 months

Payment calculation

The amount of the Family Allowance varies. It is calculated according to:

- The number of children under age 18 who live in the household
- The number of children in shared custody
- Adjusted family income
- Marital situation (single parent or couple)

In 2024, the Family Allowance payment was between \$1,163 and \$2,923 per child. This represents an increase of 5.08% over the previous year.

These amounts are indexed in January of each year and are not taxable. They are recalculated in July each year.

Each parent with shared custody will get 50% of the benefit they would have received if the child lived with them full time.

<u>CalculAide</u> provides an estimate of the payments individuals could be entitled to receive depending on their family situation.

Annual maximum and minimum Family Allowance amounts

	Minimum allowance	
Per child	\$1,163	\$2,923
Single-parent family	+\$409	+\$1,026

Payment frequency

The Family Allowance is paid four times a year to one person per family on the first business day of each quarter: July, October, January, April. Parents can also request monthly payments.

Shared custody

Shared custody means that a child lives alternately with each parent between 40% and 60% of the time each month. This must be reported to *Retraite Québec* and payments will be recalculated according to the new family situation of each parent.

This means the Family Allowance:

- Is shared by both parents
- Is paid to each parent depending on the payment frequency chosen (quarterly or monthly)
- May be paid retroactively for 11 months preceding receipt of the application

Supplement for the purchase of school supplies

Annual financial assistance for the purchase of school supplies, paid in July of each year, is intended for people who:

- Receive the Family Allowance
- Have a child from age 4 to 16 as of September 30
- Have custody of the child the month the supplement is paid

The supplement for the 2024-2025 school year is \$121. In cases of shared custody, each parent will receive half the amount.

Supplement for handicapped children

The supplement for handicapped children helps families with the costs for the care and education of a handicapped child. The impairment or mental function disability must significantly limit the child in carrying out life habits for a period expected to last for at least 1 year.

In 2024, the supplement is \$229 per month, per eligible child, or \$2,748 per year, regardless of family income or the child's handicap.

Supplement for handicapped children requiring exceptional care

The supplement for handicapped children with exceptional care needs is available for children who have multiple severe handicaps that prevent them from carrying out life habits or who require specified complex medical care at home.

This assistance is provided for parents who must assume extraordinary responsibilities in terms of special care or ensure a constant presence with their child.

Annual amount for a handicapped child

Financial support	Annual amount
Supplement for handicapped children	\$2,748
Supplement for handicapped children requiring exceptional care	
Tier 1	\$13,896
Tier 2	\$9,240

Additional information

Family Allowance

05.Act Respecting Industrial Accidents and Occupational Diseases

The Act Respecting Industrial Accidents and Occupational Diseases provides benefits for workers who are unable to perform their job due to a work-related injury. The public workers' compensation plan is managed by the Commission des normes, de l'équité, de la santé et de la sécurité du travail (CNESST).



Average premium rate

The public workers' compensation plan for work-related injuries and diseases is financed by annual contributions from employers.

The 2024 average premium rate is set at \$1.48 per \$100 of assessable payroll. This is a \$0.02 decrease from 2023.

Premiums vary depending on the employers' operations.

Annual insurable earnings

The benefit amount is based on the person's gross earnings. Gross earnings is the income set out in the work contract and includes all forms of remuneration such as bonuses, tips, premiums and overtime.

Gross earnings must be taken into account up to the maximum annual insurable earnings in effect at the time of the injury. In 2024, the maximum insurable earnings was \$94,000.

The maximum insurable earnings applicable for an injury occurring in 2024 (in French only)

Benefits

The CNESST pays various types of benefits to workers who sustain an occupational injury. It also compensates the family members of workers who die due to a work accident.

Income replacement

When a person sustains an occupational injury that prevents them from performing their job, the CNESST pays benefits based on the terms and conditions indicated in the table.

Terms and conditions for income replacement indemnities

Day of disability	Benefit	Payor
Date of accident	100%	Employer
First 14 days after the accident	90% of net income ¹	Employer, who is reimbursed by the CNESST
As of the 15th day	90% of weighted net income ²	CNESST

 Net earnings: the gross annual income that the worker would have earned had it not been for the injury, from which is deducted federal and provincial taxes as well as contributions to *Retraite Québec*, Employment Insurance and the Québec Parental Insurance Plan.

2. Weighted net income: the gross annual income stipulated in the employment contract from which is deducted the same amounts as for the net earnings but taking into account the family situation for tax law purposes. However, a worker may prove to the CNESST that they earned a higher gross annual income during the 12 months preceding the disability. Bonuses, premiums, tips, commissions, overtime payments and employment insurance benefits are taken into consideration.

Compensation for bodily injury

The purpose of the lump-sum indemnity is to compensate workers who have sustained permanent physical or psychological impairment.

It is equal to the product of the percentage of the permanent physical or mental impairment multiplied by the amount provided for in <u>Schedule II, Indemnity for Bodily Injury</u>³ at the time of the employment injury based on the worker's age at that time. The minimum indemnity is \$1,299.

The amounts used to calculate compensation for bodily injury are adjusted annually.

3. Act Respecting Industrial Accidents and Occupational Diseases

Other benefits

The CNESST reimburses expenses related to medical aid and physical, social or vocational rehabilitation, which can include adapting a worker's residence or principal vehicle, child care or maintenance expenses, as well as training and refresher programs.



A CLOSER LOOK AT GROUP INSURANCE

Work-related injury: What about disability insurance?

When a person sustains a work injury and the employer provides a disability insurance plan, who pays the indemnities: the CNESST or the private plan? It could be both. First the CNESST assesses the claim. It pays the indemnities set out in law. The private plan may supplement the basic coverage.

In other words, the CNESST is the first payor and the private insurance company is the second payor. The insurer calculates benefits taking into account the amounts paid by the CNESST. This is called "coordination of benefits." It reflects a central principle of insurance: Combined benefits should not exceed the amount of income the person earned before disability. Coordination also applies to other benefits such as those for rehabilitation treatments or drugs that may be covered by a group insurance plan.

Death benefits

Spouses and dependants of workers who die as a result of a work accident or occupational disease may receive benefits.

Death benefits for surviving family members

Type of indemnity	Payment amount and terms
Surviving spouse	 Monthly pension 55% of the income replacement indemnity to which the worker was entitled on the date of their death, for 1 to 3 years depending on the spouse's age Lump-sum indemnity Up to 3 times the worker's gross earnings at the time of death, up to the maximum annual insurable earnings of \$94,000 Minimum indemnity: \$129,975 Maximum indemnity: \$282,000
Dependent children	 Minor child: Monthly pension of \$651 per child (adjusted annually) until the age of majority Dependent children age 18 to 25 who are full-time students: Lump sum of \$23,401 per child
Funeral expenses	 Up to \$6,318 for funeral expenses Expenses for the transportation of the worker's body Up to \$2,600 for other funeral expenses

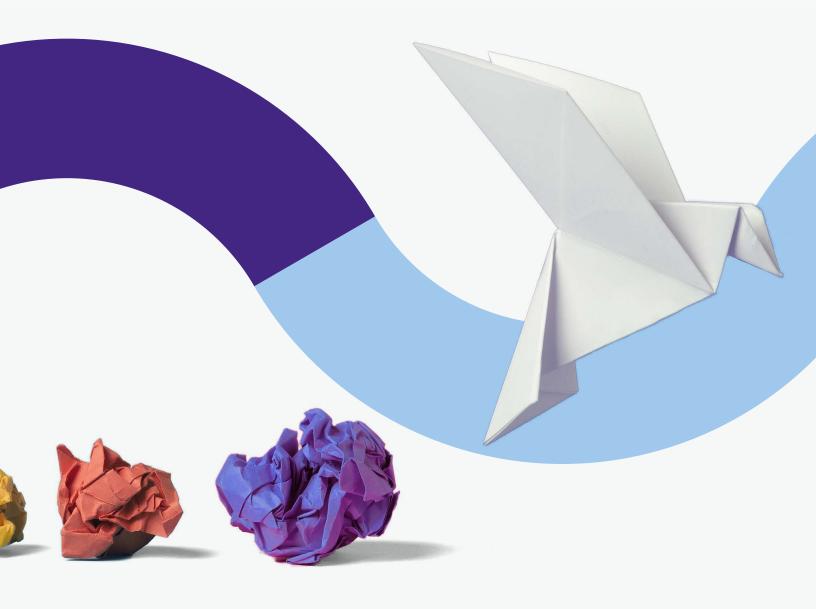
Additional information

Commission des normes, de l'équité, de la santé et de la sécurité du travail

PROVINCIAL PLAN

06.Act Respecting Labour Standards

The Act Respecting Labour Standards aims to ensure that the labour rights and obligations of both workers and employers in Quebec are respected. It establishes minimum conditions that apply to workplaces, particularly with regard to earnings, vacation time and holidays as well as promoting work-life balance. The Commission des normes, de l'équité, de la santé et de la sécurité du travail (CNESST) is responsible for implementing it.



Contributions

Most employers in Quebec must pay premiums to finance implementation of the *Act Respecting Labour Standards*. In 2024, this premium is 0.06% of the remuneration paid to employees. Any portion of a person's remuneration that exceeds \$94,000 is not subject to this contribution.

Absences

Workers are entitled to be absent from work without jeopardizing their employment. There are paid and unpaid absences. Depending on the situation, the employer may request an official document to justify the absence and its duration.

Type of absence	Maximum length	Eligibility
Non-work-related accident or illness In the event of illness, accidents, organ or tissue donations, domestic or sexual violence	Per 12-month period:2 paid days that may be divided, with the employer's consent.	Employees with at least 3 months of uninterrupted service
Parental or familial obligations Related to: • The care, health or education of their child or their spouse's child	 26 unpaid weeks Per 12-month period: Employees with at least 3 months of uninterrupted service: 2 paid days and 8 unpaid days Employees with less than 3 months of 	As of hire
 The health of a family member or a person for whom they act as an informal caregiver Caregivers for a relative or a person who is seriously ill or injured 	uninterrupted service: 10 unpaid days Per 12-month period: • For an adult: 16 unpaid weeks	As of hire
To be with a person with a serious or life-threatening illness	 For a minor child: 36 unpaid weeks For an adult: 27 unpaid weeks per 12-month period For a minor child: 104 unpaid weeks 	As of hire
Death or disappearance Death or disappearance of a minor child or suicide by an immediate family member	104 unpaid weeks	As of hire
Death of a relative Child, spouse, parent, brother or sister or the spouse's child	5 days, 2 of which are paid	As of hire These days must be taken between the death and the funeral service.
Birth or adoption	5 days, 2 of which are paid	As of hire

Annual vacation

Employees are entitled to three weeks of paid vacation after three years of uninterrupted service.

Minimum wage

	As of May 1, 2023	As of May 1, 2024
Hourly rate - general	\$15.25	\$15.75
Hourly rate - employees receiving tips	\$12.20	\$12.60

Personnel placement agencies

Under the law, personnel placement agencies may not pay agency workers a lower hourly rate than that granted to workers in the client company who perform the same tasks in the same establishment solely because of their agency worker status, such as because the workers are paid by an agency or because they usually work fewer hours per week.

Standard work week

A standard work week is 40 hours.

The standard work week is used to determine at what point workers begin to do overtime, in which case the regular hourly rate must be increased by 50% (time-and-a-half). Some exceptions are provided for under the law.

Statutory holidays

Workers are entitled to paid time off for statutory holidays. The pay for each statutory holiday is equal to 1/20 of the wages earned during the 4 complete weeks of pay preceding the week of the holiday. An employer cannot decide to have its employees work on a statutory holiday and close its establishment another day instead. This rule applies to all statutory holidays.

National holiday

June 24 is Quebec's national holiday, which is a non-working, paid statutory holiday for all wage earners in Quebec. If June 24 falls on a Sunday, then Monday, June 25 becomes the statutory holiday for people who do not usually work on Sunday. Employers can choose to pay holiday pay or give paid time off at another time to all their employees, whether or not they worked on the statutory holiday.

Additional information

Commission des normes, de l'équité, de la santé et de la sécurité du travail

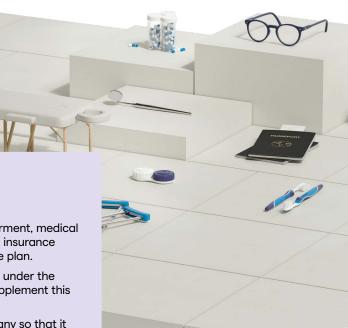
PROVINCIAL PLAN

07. Automobile Insurance Act

The Automobile Insurance Act guarantees that all persons who suffer bodily injury caused by an automobile are entitled to compensation.

Moreover, all vehicle owners in Quebec are required to hold liability insurance covering material damage caused by their vehicle. This liability insurance, in the mandatory minimum amount of \$50,000, must be purchased from a private insurance company





A CLOSER LOOK AT GROUP INSURANCE

Coordination of benefits: SAAQ benefits count as well!

Income replacement indemnities, compensation for permanent impairment, medical expenses and fees of healthcare professionals: The public automobile insurance plan reimburses these expenses that may also be covered by a private plan.

In the event of a motor vehicle accident, benefits are usually paid first under the public SAAQ plan. Health insurance or disability insurance benefits supplement this basic coverage.

It is important to report SAAQ benefits to the private insurance company so that it may correctly coordinate benefits.

Compensation for accidents and deaths occurring between January 1 and December 31, 2024

Type of indemnity	Amount
Income replacement indemnity ^{1,2}	90% of the victim's net annual income, calculated based on gross annual income of up to \$93,500
	The income replacement indemnity is paid every 2 weeks for the duration of the disability, with the exception of the first 7 days following the accident.
Indemnity for care expenses	Weekly amounts:
	• \$527 for 1 person
	\$592 for 2 people\$653 for 3 people
	• \$719 for 4 or more people
Lump-sum indemnity for students ²	 \$6,318 for each school year missed at the elementary level \$11,596 for each school year missed at the secondary level \$11,596 for each semester missed at the post-secondary level, up to a maximum of
	\$23,189 per year
Income replacement indemnity — after the scheduled date of completion of studies	Students may be entitled to receive an indemnity based on \$56,848, which corresponds to the average earnings of Quebec workers
Indemnity for injury	\$1,690
Lump-sum indemnity for permanent impairment	\$295,687 ³

1. Accident victims receiving an income replacement indemnity will see their payments reduced by 25% at age 65, by 50% at age 66, by 75% at age 67, and benefits cease altogether on their 68th birthday.

2. One year after the accident, the income replacement indemnity of an accident victim who has sustained injury or impairment granting entitlement to an income replacement indemnity based at a minimum on the average earnings of Quebec workers is calculated on the basis of a gross annual income that is not lower than \$56,848.

3. The maximum amount is paid if, for instance, the injured person is in a vegetative comatose state.

Other indemnities

Type of expenses	Maximum amounts
Travel expenses to receive care or undergo treatment	 Private vehicle: \$0.60 per km when the state of health does not allow for taking public transit, when public transit is not available for the route or when it is more economical to use a private vehicle rather than public transit \$0.17 per km in other cases Public transit: reimbursed in full Taxi: reimbursed in full when public transit is not available for the route or when the victim's medical condition does not allow for taking public transit
Meals	Daily maximums: • \$13.75 for breakfast • \$18.90 for lunch • \$28.50 for supper
Care expenses	Weekly maximums: • \$351 for 1 person • \$383 for 2 people • \$437 for 3 or more people
Homecare expenses	 Weekly maximums: \$1,055 \$1,668 for an accident victim whose state of health requires continuous care or whose needs have been assessed as being greater than those granting entitlement to the amount of \$1,055
Availability allowance	 \$39 for availability of 4 hours or less \$78 for availability of more than 4 hours
Clothing	 \$445 for dry cleaning, repairing or replacing clothing worn during the accident \$1,112 for leather clothing or a helmet worn in a motorcycle accident
Medical reports	 Reports filled out by a physician or a specialized nurse practitioner (SNP): \$33 for an <i>initial report</i> \$85 for an assessment report \$89 for a progress report \$84 for a report on impairment \$33 when the report is completed otherwise than on a form provided for that purpose by the SAAQ Reports filled out by a healthcare professional other than a physician or an SNP: \$33 per report
Professional fees for prescribed treatments	 Physiotherapy: \$62 per prescribed treatment Chiropractic treatment: \$45 per prescribed treatment Acupuncture: \$61 per prescribed treatment Psychological treatment: \$110 per hour of treatment Other types of professional fees: Contact the SAAQ customer relations centre.
Reimbursement of fees to obtain a second opinion (expert report written by a healthcare professional)	 Per report: \$1,779 Report prepared following an assessment by more than one healthcare professional: \$1,779 per healthcare professional, up to \$5,337
Substitute labour costs in a family business	\$1,053 per week for the first 180 days after the accident (supporting documents required)
Drugs	Automated reimbursement at the pharmacy or determined on presentation of bills or receipts to the SAAQ

Other indemnities (continued)

Type of expenses	Maximum amounts
Prescribed prostheses and orthoses	Reimbursement determined on presentation of bills or receipts, up to the maximum amount provided for by the regulations.
	Ocular prosthesis: \$2,240
	• Hairpiece: \$2,240
	Prescription eyeglasses: Frames: \$222
	- Lenses: actual cost
	• Prescription contact lenses: \$122 (up to a \$334 in certain specific cases)
	 Other prostheses and orthoses: in accordance with conditions prescribed by the regulations
Wheelchairs	Reimbursable in accordance with the conditions and maximum amounts prescribed by the regulations
Lost income	\$177 per day
(for a temporary leave from work to receive medical or paramedical care or to undergo an examination by a healthcare professional at the request of the SAAQ)	
Dental care	Maximum amounts set out in the following documents:
	 Honoraires versés aux chirurgiens dentistes aux fins d'indemnisation par la SAAQ (fees paid to dental surgeons for the purpose of compensation by the SAAQ)
	 Honoraires versés aux dentistes spécialistes aux fins d'indemnisation par la SAAQ (fees paid to dental specialists for the purpose of compensation by the SAAQ)
	 Honoraires versés aux denturologistes aux fins d'indemnisation par la SAAQ (fees paid to denturologists for the purpose of compensation by the SAAQ)
	See documents (French only)

Compensation for accidents and deaths occurring between January 1 and December 31, 2024

Amount
Lump-sum benefit based on the victim's gross income multiplied by a factor of 5. Maximum gross income eligible: \$93,500
Minimum indemnity: \$165,228Maximum indemnity: \$467,500
\$40,051 to \$73,787 according to the dependent's age
Additional lump-sum benefit of \$34,782
In addition to their own indemnity, the lump-sum benefit that would have been paid to the spouse, divided equally among them
\$67,586 divided equally between the victim's father and mother (if the victim is a minor) or to the succession (if the victim is age 18 or over)
\$8,339 paid to the victim's succession

Additional information

Société de l'assurance automobile du Québec

PROVINCIAL PLAN

08. Québec Pension Plan

The Québec Pension Plan (QPP) provides people who work or have worked in Quebec and their families with basic financial protection in the event of retirement, death, or disability.

Contributions

The plans are financed by contributions paid by Quebec employers and workers.

Base plan

All workers age 18 and over whose annual employment income is greater than \$3,500 must contribute to the base plan up to maximum pensionable earnings. This maximum is \$68,500 for 2024.

- The rate for employees' contributions is 5.4% and their employer pays the same amount.
- Self-employed workers pay both parts of the contribution i.e. 10.8%.

Additional plan

The mandatory QPP can be enhanced with an additional plan to help future generations of workers improve their financial security in retirement. The contribution to the additional plan is 1% for employees and their employers. For self-employed workers, the contribution to the additional plan is 2%.

Members of the additional plan will receive a higher benefit based on the number of years of contributions.

Contributions to the Québec Pension Plan in 2024

Calculations	
Basic exemption	\$3,500
Indexation rate for benefits as at January 1, 2024	4.4%
Maximum pensionable earnings (MPE)	\$68,500
Yearly additional maximum pensionable earnings (YAMPE) (\$68,500 x 107%)	\$73,200
Maximum pensionable earnings for the additional plan (\$73,200 – \$68,500)	\$4,700
Contribution rate ¹	
On income from \$3,500 to \$68,500	
Base plan	10.8%
Additional plan	2%
On income from \$68,500 to \$73,200	
Additional plan	8%
Maximum contribution for employees and employers	
On \$65,000 (earnings between \$3,500 and \$68,500) (MPE)	
Base plan (5.4%)	\$3,510
Additional plan (1%)	\$650
On \$4,700 (earnings between \$68,500 and \$73,200) (YAMPE)	
Additional plan (4%)	\$188
Maximum contribution for self-employed workers	
On \$65,000 (earnings between \$3,500 and \$68,500) (MPE)	
Base plan (10.8%)	\$7,020
Additional plan (2%)	\$1,300
On \$4,700 (earnings between \$68,500 and \$73,200) (YAMPE)	
Additional plan (8%)	\$376
1. Employers and employees each pay half of the contribution. Self-employed workers pay both shares of the contribution.	

1. Employers and employees each pay half of the contribution. Self-employed workers pay both shares of the contribution.

Retirement pension

The pension benefit is calculated based on the employment income a person has earned since age 18.

The retirement age has an impact on the amount you receive for life. If an individual applies for their pension benefits:

- At age 65, they receive 100% of the amount each month.
- Between ages 60 and 65, they receive a lower amount. The earlier the pension is applied for, the lower the amount.
- After age 65, a higher pension is received. The later the pension is applied for, the higher the amount.

The maximum age for applying for pension benefits is age 72.

Additional plan

Those who contributed to the additional plan are entitled to:

- An increased income replacement rate (increases from 25% to 33.33%)
- An increased maximum pensionable salary, up to 114% of the maximum pensionable earnings

GOOD TO KNOW

A plan better adapted to workers age 65 and over

Several changes were made to the QPP on January 1, 2024 to better adapt it to the needs and realities of workers age 65 and over.

Option to cease making contributions

Generally, it is more advantageous to continue contributing to the QPP after age 65. However, many people who are working and already receiving a retirement pension prefer to stop contributing. They would rather take advantage of more money in the short term than benefit from a supplement for life.

Workers age 65 and over who are already receiving their pension benefit can now stop contributing to the QPP. Their employer's contributions also cease.

Protecting pension benefits

Lower earnings by workers age 65 and over were previously taken into account when establishing the average earnings used to calculate their pension benefits. This meant that those who applied for their pension after age 65 were penalized.

Now, the lower earnings of these workers cannot lower the average earnings used to calculate the retirement income. This measure benefits people who wish to work part-time after age 65. It also allows retirees to receive their pension later, if desired.

Maximum age for applying for pension benefits

The maximum age for applying for pension benefits has been increased by two years. People who apply for their pension benefits at age 72 will receive a higher amount than if they had started their benefits at age 70, which was the case under the plan until recently.

Disability pension

Workers under age 65 with a permanent and severe disability, and who have made sufficient contributions to the QPP, could be entitled to disability benefits. Workers may also receive a disability pension or an additional amount for disability if they are already a beneficiary of a retirement pension that they cannot cancel to receive the disability pension.



A CLOSER LOOK AT GROUP INSURANCE

Fairer calculations for those age 60 and over who are receiving a disability pension

Before January 1, 2024, the disability pension was the total of two amounts:

- A fixed amount that was the same for all workers of \$583.29 and
- A variable amount based on the employment earnings of the person who contributed

Since January 1, 2024, the disability pension benefit provides a fixed amount for disability and a retirement income based on the employment earnings of the person who contributed. For most people, the total amount is more advantageous.

Does this new way of calculating have an effect on the benefits paid under private disability insurance? Yes. To calculate disability insurance benefits that a person is entitled to, insurers integrate the benefits. They take into account the amounts paid under the Quebec Pension Plan and other public plans. Since the amounts paid by the government are increased, those paid under disability insurance may be reduced.

Benefits for loved ones

Survivors' benefits, such as a surviving spouse's pension, orphan's pension and death benefit, may be paid to the relatives of the deceased or certain third parties, provided that the individual made sufficient contributions to the QPP.

The children of a person receiving a QPP disability pension may be entitled to a pension for a disabled person's child until the age of 18, even if they are working.

Québec Pension Plan benefits

Maximum amount for lump-sum payment	
Maximum amount of the death benefit	\$2,500
Maximum monthly amounts ¹	
Retirement pension	
Age 65 (100% of the maximum pension)	\$1,364.60
Age 60 (64% of the maximum pension)	\$873.34
Age 72 (158.8% of the maximum pension)	\$2,166.98
Disability benefit	
Disability pension for individuals age 18 to 59	\$1,606.75
Disability pension for individuals age 60 to 65	\$583.29
Additional amount for disability for those receiving the retirement pension	\$583.29
Pension for a disabled contributor's child	\$93.39
Survivor's pension	
Orphan's pension	\$294.12
Surviving spouse's pension ²	
Beneficiary under age 45, not disabled, without dependent children	\$668.91
Beneficiary under age 45, not disabled, with dependent children	\$1,061.12
Beneficiary under age 45, disabled, with or without dependent children	\$1,102.80
Beneficiary between ages 45 and 64	\$1,102.80
Beneficiary age 65 or over	\$822.14

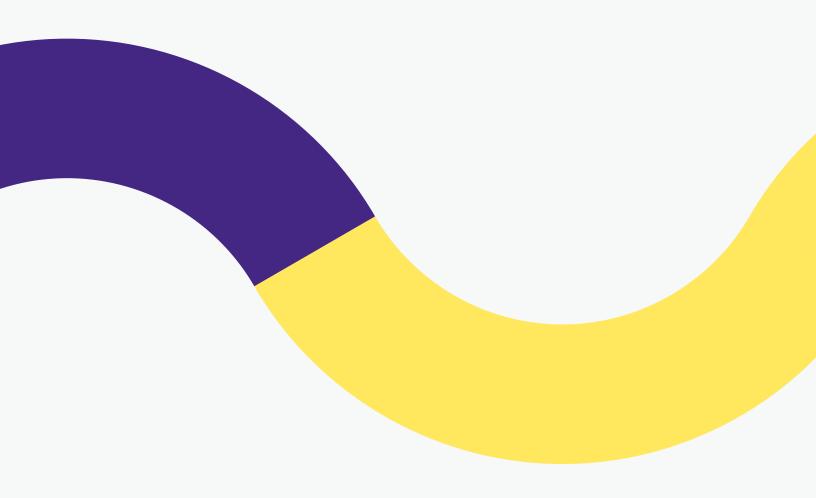
1. Pensions are calculated based on the average of maximum pensionable earnings for the last five years. The amounts paid under the additional plan are included in the maximum amounts shown.

2. Pension calculated with respect to contributors who were not receiving a retirement pension.

Additional information

Québec Pension Plan

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PROVINCIAL PLAN

09. Voluntary Retirement Savings Plan

A Voluntary Retirement Savings Plan (VRSP) allows all workers, including self-employed workers, to save for retirement. This plan is intended for wage earners age 18 or over who do not have access to a Registered Retirement Savings Plan (RRSP) or Tax-Free Savings Account (TFSA) through payroll deductions or to a Registered Pension Plan (RPP).



When can employers set up a VRSP?

Employers are obligated to provide a VRSP or another plan allowed under the *Voluntary Retirement Savings Plan Act* by December 31, 2024, if they:

- Employed five or more eligible employees on December 31, 2023 and
- Employ ten or more eligible employees on June 30, 2024

Instead of a VRSP, employers may offer an RRSP or TFSA with payroll deductions or a registered pension plan.

Participating in a VRSP

When the employer sets up a VRSP, employees are automatically enrolled, although they can opt out.

There are a set of default options to reduce the number of decisions that employees must make. However, employees can decide to:

- Interrupt or suspend their participation in a VRSP in compliance with regulations
- Increase or decrease their contribution rate

Employers are not required to contribute to the plan.

Contributions

Contributions to the VRSP are tax deductible, similar to RRSP contributions, according to the rules established by the Canada Revenue Agency (CRA). Since these contributions are deducted from payroll, employees immediately benefit from a tax savings.

Individuals who participate in a VRSP may set their own contribution rate if they wish. The default contribution rate applies to employees who have not selected a contribution amount within the required deadline. Accumulated capital and interest are tax-free until withdrawal.

The contribution ceiling is the same as that for RRSPs, i.e. 18% of annual income up to the amounts indicated in the table. These maximums are reduced when the person contributes to an RRSP. Each dollar contributed to an RRSP reduces the maximum allowed as VRSP contributions.

Voluntary Retirement Savings Plan (VRSP) 2024 parameters

Parameters	Amounts
Default contribution rate	4% of gross earnings
Maximum pensionable earnings	\$68,500
Fees payable per member	\$6.00
Annual statement as at December 31, 2023	
Maximum contribution	
2022	\$29,210
2023	\$30,780
2024	\$31,560

VRSP management

VRSPs are administered by legally authorized entities such as:

- Investment fund managers
- Trust companies
- Life and health insurance companies

To be able to offer and administer a VRSP, administrators must:

- Have authorization from the Autorité des marchés financiers
- Register their VRSP with Retraite Québec

The list of VRSPs registered with *Retraite Québec* is posted on the <u>Retraite Québec</u> website.

Additional information

Voluntary Retirement Savings Plan (VRSP)

FEDERAL PLAN

10. Old Age Security Act

The Old Age Security plan is an essential piece of Canada's public pension system. It provides citizens with a basic income when they reach retirement age.



Eligibility

The Old Age Security Act includes four benefits aimed at specific segments of the population, based on financial and conjugal situations. Entitlement is based on the eligibility conditions indicated below.

Type of benefits	Eligibility
Old Age Security Pension	 Be age 65 or older Be a Canadian citizen or have legal resident status when the application for the pension is approved Must have resided in Canada for at least 10 years since age 18
	Other criteria apply to eligible individuals who reside outside of Canada.
Guaranteed Income Supplement (GIS) Provides additional income to low- income seniors living in Canada	 Receive the OAS pension Be a Canadian citizen or have legal resident status Live in Canada Have an income below the maximum annual income threshold for GIS (see the table on the next page)
Allowance Offered to low-income seniors	 Must be the spouse of a person who receives the GIS Must be age 60 to 64 Be a Canadian citizen or have legal resident status Must have resided in Canada for at least 10 years since age 18 Report a combined (for the couple) annual income below the maximum annual income threshold for the Allowance
Allowance for the Survivor Additional income for low-income seniors	 Had a spouse who has died, and has not remarried or lived in a common-law union within 12 months since the death Must be age 60 to 64 Be a Canadian citizen or have legal resident status Must have resided in Canada for at least 10 years since age 18 Report an annual income below the maximum annual income threshold for the Allowance for the Survivor

Payment amounts

Old Age Security payments are revised on a quarterly basis (January, April, July and October) to reflect the cost-of-living increase as determined by the Consumer Price Index.

Maximum payments and income thresholds - January to March 2024

Situation	Maximum amount ¹	Income level cut-off ²	Income level cut-off for top-ups
Old Age Security pension (OAS) ^{3, 4}			
Age 65 to 74	\$713.34	\$142,609	n/a
Age 75 or over	\$784.67	\$148,179	n/a
Guaranteed Income Supplement (GIS)			
Single, widowed or divorced	\$1,065.47	\$21,624	\$9,968
Spouse/common-law partner of someone who:			
Does not receive the OAS pension	\$1,065.47	\$51,840	\$19,936
Receives the OAS pension	\$641.35	\$28,560	\$8,512
Receives the Allowance	\$641.35	\$39,984	\$8,512
Allowance ⁴	\$1,354.69	\$39,984	\$8,512
Allowance for the Survivor	\$1,614.89	\$29,112	\$9,968

1. The maximum amount includes top-ups to the Guaranteed Income Supplement and Allowances.

2. The income level cut-offs do not include the OAS pension, the first \$5,000 of employment or self-employment income and 50% of employment or self-employment income between \$5,000 and \$15,000.

3. The OAS pension repayment range in 2024 is for net world income, from \$99,997 to \$148,065 including OAS, for individuals age 65 to 74. For those age 75 and over, the upper threshold is \$153,771.

4. Individuals can defer receiving the OAS pension beyond age 65 in exchange for a higher pension. The monthly OAS pension is increased by 0.6% for every month it is delayed up to a maximum of 36% at age 70.

Additional information

Public pensions

FEDERAL PLAN

11. Canada Pension Plan

The Canada Pension Plan (CPP) retirement pension is a taxable monthly benefit that provides partial income replacement upon retirement. Those who qualify receive the CPP retirement pension for the rest of their lives.

Eligibility

For entitlement to benefits from the CPP, applicants must:

- Be at least 60 years old
- Have made at least one valid contribution to the CPP

Contributions

Every person over the age of 18 who works in Canada and earns more than \$3,500 per year must contribute to the CPP. Employees pay half the required contributions and their employer pays the other half. Those who are self-employed pay 100% of the contribution.

At age 70, workers no longer contribute to the CPP, even if they are still working.

The contribution amount is based on employment income. The contribution rate is indexed on January 1 of each year.

GOOD TO KNOW

Canada Pension Plan enhancement: A second earnings ceiling

On January 1, 2024, the CPP added a second earnings ceiling. The first ceiling works the same as previously: Workers contribute a fixed portion of their earnings up to the threshold set by the government, which is \$68,500 in 2024. The contribution rate for those who earn this amount or less will not change.

A second contribution level was introduced for people who earn more than this amount. This level tops out at \$73,200. Workers in this group pay 4% more on their earnings above the first ceiling, i.e. the amount they earn between \$68,500 and \$73,200. For 2024, this means a maximum of \$188 in additional deductions.

Therefore, in 2024, most workers earning more than \$73,200 will contribute \$300 more than their contribution in the previous year.

2024 CPP contributions

Contributions	
Maximum annual pensionable earnings	\$68,500
Additional maximum annual pensionable earnings (CPP2) NEW	\$73,200
Basic exemption	\$3,500
Contribution rate	
Employees and employers	5.95%
Self-employed workers	11.90%
Contribution rate – second additional contribution (CPP2)	
Employees and employers	4%
Self-employed workers	8%
Maximum contribution	
Employees and employers	\$3,867.50
Self-employed workers	\$7,735
Maximum contribution – second additional contribution (CPP2)	
Employees and employers	\$188
Self-employed workers	\$376

Benefits

The standard age to start collecting CPP benefits is 65. Workers, however, can take a permanently reduced pension as early as age 60.

Contributions entitle workers to the following benefits:

- Retirement pension
- Post-retirement benefit
- Disability benefits
- Survivor benefit

The CPP allows pension splitting for married or common-law couples and credit splitting for divorced or separated couples under certain conditions.

A contributor who wishes to receive benefits must submit an application.

CPP benefits as of January 2024¹

Type of benefits	Maximum monthly amounts			
	Portion based on standard rate	Portion based on earnings	Total	
Retirement and post-retirement pensions				
Retirement pension (at age 65)	n/a	\$1,364.60	\$1,364.60	
Post-retirement pension (at age 65)	n/a	\$44.46	\$44.46	
Disability pension				
Disability pension	\$583.32	\$1,023.46	\$1,606.78	
Post-retirement disability benefit	\$583.32	n/a	\$583.32	
Survivor's pension				
Survivor's pension – under age 65	\$227.58	\$511.73	\$739.31	
Survivor's pension – age 65 and over	n/a	\$818.76	\$818.76	
Children's benefit				
Children of disabled CPP contributor	\$294.12	n/a	\$294.12	
Children of deceased CPP contributor	\$294.12	n/a	\$294.12	
Death benefit (one-time payment)	\$2,500	n/a	\$2,500	
Combined benefits				
Survivor/Retirement pension (at age 65)	n/a	\$1,375.41	\$1,375.41	
Children of CPP contributor	n/a	\$1,613.54	\$1,613.54	

1. The amounts shown in this table are maximum amounts for new CPP benefits beginning in January 2024. They are enhanced each month (monthly data available at <u>Statistics on CPP monthly</u> maximum amounts for new benefits).

Additional information

Canada Pension Plan

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PROVINCIAL PLAN

12. Quebec's health insurance plan

Quebec's health insurance plan allows citizens to access health care at no charge. A person who presents a valid health insurance card in an establishment that is part of the public health network is entitled to receive covered medical care, basic hospital services and, for certain population segments, dental and optometric services.



Eligibility

To qualify for health insurance individuals must, among other things:

- Be authorized to live in Canada
- Have a primary residence in Quebec
- Be present in Quebec a minimum of 183 days in the first 12 months after becoming eligible

People who are in Quebec temporarily to work or because they have a scholarship or internship within the scope of an official Quebec government program could qualify under certain conditions.



A CLOSER LOOK AT GROUP INSURANCE

Group insurance: Stand out as an employer

The current labour shortage is causing problems for many employers and there is strong competition to attract and retain talent. Organizations attempt to increase their pool of choice candidates by devising original strategies. Those who offer a comprehensive benefits plan have an edge on the competition. Access to generous health insurance coverage is number one on the list of items likely to tip the scales in their favour.

Job candidates are looking for benefits such as only having to pay a fraction of the fees for physiotherapy, acupuncture or occupational therapy; obtaining medical imaging appointments more rapidly; consulting a psychologist through an employees' assistance program or paying a portion of healthcare costs with a health spending account. Plus a labour force that is healthy is a valuable asset for an employer.

Overview of care and services covered by the RAMQ

Program	Services covered
Medical services	Medical services that are medically necessary and rendered by a general practitioner or a medical specialist, including:
	 Consultations and examinations Diagnostic procedures Therapeutic procedures Psychiatric treatments Surgery Radiology Anesthesia Details, eligibility conditions and registration
Optometric services	• Eye examinations
 Individuals: Under age 18 Age 65 and over Age 18 to 64 who have been receiving last-resort financial assistance for at least the past 12 consecutive months with valid claim slip (<i>carnet de réclamation</i>) Age 60 to 64 who have been receiving a spouse's allowance under the Old Age Security Act for at least 12 consecutive months 	 Prescription of exercises to improve vision Referrals to other health professionals, for instance, an ophthalmologist Prescription of eyeglasses or contact lenses Details and conditions For children under 18 Reimbursement of \$300 for the purchase of eyeglasses or contact lenses Conditions and application for a reimbursement
Who have a visual impairment	
 Any person insured under Quebec's health insurance plan 	Certain oral surgery services rendered in hospitals as well as examinations, local or general anesthesia and x-rays related to a surgery
• Children under age 10	General services rendered by a dentist at a dental clinic or hospital, including:
	 Annual and emergency examination X-rays Local or general anesthesia Grey amalgam fillings on premolar and molar teeth Tooth and root extractions Prefabricated crowns Excluded: Cleaning and scaling Fluoride application Pit and fissure sealing Orthodontics
 Recipients of last-resort financial assistance with a valid claim slip (carnet de réclamation) 	Coverage according to the conditions established by the <i>Ministère du Travail, de l'Emploi</i> et de la Solidarité sociale (MTESS) Covered services are rendered at dental clinics and hospitals.

Coverage varies depending on the number of months the person has been a recipient of last-resort financial assistance, i.e.:

- 12 to 24 consecutive months
- 24 consecutive months or more

Details, conditions, limitations and exclusions

Overview of care and services covered by the RAMQ (continued)

Program	Services covered
Devices which compensate for a motor	Purchase, adjustment, replacement, repair and, in certain cases, adaptation of:
deficiency	Ambulation aids
	Standing aids
	Locomotor assists
	Posture assists
	Several types of orthotics and prosthetics
	More on covered services: <u>Tariff for insured devices which compensate for a motor</u> <u>deficiency and related services</u>
	Details and conditions
Hearing aids	Expenses for the purchase, repair and replacement of hearing aids and assistive listening devices needed to carry out daily activities
	Details and conditions
Appliances for ostomates	Annual lump-sum payment for the purchase of appliances and their replacement:
	• Permanent ostomy: \$1,443 per ostomy
	• Temporary ostomy: \$962 per ostomy
	Recipient of last-resort financial assistance: Fully reimbursed upon presentation of detailed invoices.
	Details, conditions and application
External breastforms Individuals:	For each breast and per 24-month period, the program reimburses the purchase or replacement cost of an external breastform up to a maximum of:
• Who have undergone a total radical or	• For a full breastform: \$512
 Who have undergone a total, radical or partial mastectomy 	• For a partial breastform: \$302
• Age 14 and older who have received a	The breastform must be purchased from a business established in Quebec
diagnosis of breast aplasia	Details, conditions and application
Bandages and compression garments	Reimbursements
used to treat lymphedema	• Individuals age 18 and over: 75% of the purchase cost before taxes and delivery charges, up to the maximum allowable amount
	 Children under age 18: 100% of the purchase cost before taxes and delivery charges, up to the maximum allowable amount
	Per limb affected, per 12-month period:
	• 1 set of multi-layer bandages
	• 3 elastic day-time compression garments
	• 1 non-elastic compression garment
	• 1 night-time compression garment
	• 1 accessory for compression garment
	Children under age 18
	The number of supplies is doubled per 12-month period
	Recipient of last-resort financial assistance
	100% of the purchase cost before taxes and delivery charges, up to the maximum allowable amount
	Maximum allowable amounts, details and conditions

Overview of care and services covered by the RAMQ (continued)

Program	Services covered
Visual aids	Expenses for the loan, replacement and repair of visual devices including:
Persons who have a permanent visual impairment that prevents them from carrying out one of the following activities:	 Reading aids such as closed-circuit television systems, optical systems and calculators Writing aids such as braillers Mobility aids such as white canes, electronic obstacle detectors, night vision goggles
 Read or write Move around in an unfamiliar environment Carry out activities in keeping with their lifestyle or social roles (e.g. student, worker, parent) 	 Amounts for a guide dog: Obtaining a guide dog: \$265 Caring for a guide dog: \$2,240 per year More on covered services: Tariff for visual aids and related services Details and conditions
 Ocular prostheses or artificial eyes Loss of an eye, for instance, during surgery or an accident Eye that is atrophied or without useful vision 	 Maximum amounts for the following services: Purchase and replacement of an ocular prosthesis per eye, once every 5 years: \$1,650 for a custom prosthesis made by an ocularist certified by the Canadian Society of Ocularists or the U.S. National Examining Board of Ocularists \$225 for a manufactured prosthesis
 Eye disease at birth (ophthalmia or microphthalmia) 	 Repair and maintenance: \$75 per calendar year excluding the year following the purchase Purchase and fitting of a conformer, a temporary shell used to hold the shape of the eye socket once the eye has been removed, before fitting the prosthesis \$278 for each custom-made conformer

\$278 for each custom-made conformer\$165 for each prefabricated conformer

Details and conditions



A CLOSER LOOK AT GROUP INSURANCE

Pharmacy services covered by the RAMQ

Pharmacists in Quebec offer services that go beyond preparing medication prescribed by doctors. Their expertise can be called upon for a <u>range of general services</u>. Among other things, they can:

- Prescribe medication for minor conditions or those that don't require a doctor's consultation, such as urinary tract infections, shingles and conjunctivitis
- Extend a prescription to avoid interrupting treatment
- Adjust a prescription, such as modifying the dosage to optimize treatment
- Replace a drug when one is out of stock or there is a shortage
- Prescribe a lab test
- Vaccinate for flu, COVID-19 or for the purposes of travel
- Administer medication in an emergency such as an allergic reaction
- Manage palliative care for end-of-life patients

These services are covered by the RAMQ and available to all citizens. It's a great way to look after your health without going to the clinic.

Financial Contribution Program for Accommodated Adults

Calculating contributions

Adults accommodated in a Quebec public healthcare facility pay a contribution based on their ability to pay and the room category.

Monthly cost per room category

	2024	2023
Private room	\$2,142.30	\$2,079.90
Semi-private room	\$1,789.80	\$1,737.60
Room with 3 beds or more	\$1,333.20	\$1,294.50

Intermediate resources

Accommodation or "intermediate" resources were created to offer people a residential environment that is as close as possible to a home environment in which to receive the support and assistance they require.

There are four main types of residences run by intermediate resources:

- Supervised apartments
- Rooming houses
- Transitional housing
- Group homes

The contribution is charged as of the first day of accommodation. It is prorated to the number of days of accommodation. The day of arrival is included in the calculation but not the day of departure.

Financial Assistance Program for Domestic Help Services

In accordance with the *Health Insurance Act*, anyone age 18 or over residing or staying in Quebec is eligible for the program. However, persons receiving compensation for domestic help services under a public plan (CNSST, SAAQ, Veterans Affairs, etc.) or under a private insurance plan may receive financial assistance from the program only for the portion of the costs exceeding their indemnity.

Services covered outside Quebec

When travelling or residing outside of Quebec, people who have a valid health insurance card may receive healthcare services covered by the Québec's health insurance plan. The care is reimbursed according to the rates in effect in Quebec.

Emergency care obtained outside Canada is covered up to a maximum of \$100 per day for hospitalization and up to \$50 per day for health care received at a hospital outpatient clinic. <u>Details</u>



A CLOSER LOOK AT GROUP INSURANCE

Business travel, expatriates, inpatriates, international offices: Specialized products for every situation

The operations of many organizations have an international dimension these days from companies that open offices on another continent to organizations whose employees visit clients or partners around the globe as well as those who hire foreign workers.

In some countries, expenses for obtaining health care greatly exceed those covered by the public health insurance plan in the event of an emergency. Here, many categories of workers from other countries simply don't have access to public plans.

That's why there is an array of products for covering employees in all sorts of situations of international migration, such as:

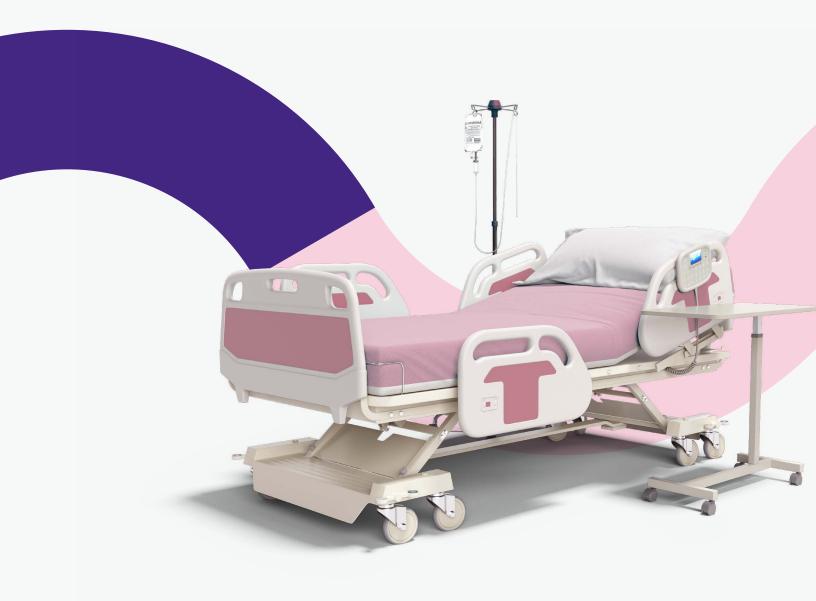
- Health insurance for inpatriates who are not eligible for their employer's plan or for public plans in Canada
- Travel and trip cancellation insurance, including certain products that include coverage in the event of war or for workers whose occupation involves higher risks
- Insurance plans for expatriates, for Canadian employees who work abroad

These products offer comprehensive and specialized coverage and include a multilingual service available 24/7.

PROVINCIAL PLAN

13. Hospital Insurance Act

The Quebec hospitalization insurance plan covers expenses for all Quebec residents for admittance to a ward in a facility of the healthcare system. The costs of a private or semi-private room are not covered by the public plan. These types of rooms must be paid for either by private insurance or by the patient.



Hospitalization expenses according to room category

Room expenses are established by regulation and indexed every year.

Hospitalization in a ward is entirely covered by the *Régie de l'assurance maladie du Québec* for Quebec residents and Canadian residents covered by the public plan in their province.

Room category	January 1, 2024	January 1, 2023
Ward with 3 beds or more	Free	Free
Semi-private room	\$72.26	\$70.16
 With telephone, washbasin or toilet, private or shared with another room (at least two of these items) 	\$79.72	\$77.40
• With telephone, washbasin and toilet, private or shared with another room	\$87.19	\$84.65
With telephone and full bathroom	\$101.82	\$98.85
Private room	\$116.65	\$113.25
 From 9.75 to 11.5 square metres with telephone, washbasin or toilet, private or shared with another room 	\$144.16	\$139.96
 At least 11.5 square metres with telephone, washbasin and toilet, private or shared with another room 	\$171.66	\$166.66
 At least 11.5 square metres with telephone and full bathroom, shared with another room 	\$201.38	\$195.51
• At least 11.5 square metres with telephone and full bathroom	\$232.19	\$225.43
• With telephone, private bathroom and adjoining sitting room	\$289.41	\$280.98



A CLOSER LOOK AT GROUP INSURANCE

Private hospitalization insurance: Greater peace of mind

The public health insurance plan guarantees access to hospitals to people requiring care. Access to a public ward is free for all.

However, private plans offer access to private and semi-private rooms, which is appreciated by those who must spend longer periods of time in a hospital or care facility. Patients can rest easy this way and recover more quickly.

Additional information

Régie de l'assurance maladie du Québec

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PROVINCIAL PLAN

14. Public Prescription Drug Insurance Plan

In Quebec, everyone must be covered at all times by a prescription drug insurance plan. The public plan provides basic coverage to citizens, including the cost of some 8,000 drugs. It applies to people age 65 and over, recipients of last-resort financial assistance and anyone who is not eligible for a private plan.



Annual premium

Generally speaking, persons covered by the public plan must pay an annual premium to *Revenu Québec* when filing their tax return.

For the period of July 1, 2023, to June 30, 2024, this amount varies from \$0 to \$731 per adult, according to net family income.

Certain persons insured under the public plan do not pay a premium. They include:

- Holders of a claim slip issued by the *Ministère du Travail, de l'Emploi et de la Solidarité sociale*
- Persons age 65 and over who receive 94 to 100% of the Guaranteed Income Supplement (GIS)
- Children of persons insured under the public plan if they: - Are under age 18, or
 - Are age 18 to 25 and are full-time students who do not have a spouse and live with their parents
- People with a functional impairment covered by the Regulation respecting the basic prescription drug insurance plan that occurred before age 18



A CLOSER LOOK AT GROUP INSURANCE

Prescription drug insurance for everyone

In Quebec, everyone who has access to a private group insurance plan through their employer is not only required to enrol but must also insure their spouse and children.

These persons may not opt out unless they have access to another private plan such as one provided by the spouse's employer or, in the case of children, a plan in which the other parent is a member.

Can one person by covered by several plans?

Yes. And since coverage can have a real impact on the cost of prescription drugs, people who have access to two plans should study them to choose which plan best meets their needs.

Coverage

Amounts in force - July 1, 2023, to June 30, 2024

Covered persons	Monthly deductible	Co-insurance	Maximum monthly contribution	Maximum annual contribution
Adults age 18 to 64 not eligible for a private plan	\$22.90	33%	\$99.65	\$1,196
Persons age 65 and over not receiving GIS	\$22.90	33%	\$99.65	\$1,196
Persons age 65 and over receiving partial GIS (1% to 93%)	\$22.90	33%	\$56.17	\$674

GOOD TO KNOW

Prescription drug insurance for people age 65 and over: Available options

Persons who turn 65 are automatically registered with the public plan. Many private insurers continue to offer prescription drug coverage to persons age 65 and over who were already covered by such a plan. Two types of coverage may be available to them:

- Basic coverage (at least equal to the coverage provided by the public plan)
- Supplemental coverage to the public plan

They have a choice to make. They may decide to be insured:

- Only by the public plan
- By the public plan (first payor) and by a private plan offering supplemental coverage (second payor)
- Only by a private plan offering at least the basic coverage

Risk pooling by the Public Prescription Drug Insurance Plan

Every year, the Société de compensation en assurance médicaments du Québec (SCAMQ) reviews the pooling parameters of high-cost prescription drug claims. Therefore, every January 1, these parameters are re-evaluated based on the previous year. The pooling threshold is the amount above which the experience of a group is no longer affected by the excess claims for a given certificate.

Pooling terms and conditions since January 1, 2024

	Three	shold	Monthly cost			
			2023		20	24
Group size	2023	2024	Individual	Single-parent, couple, family	Individual	Single-parent, couple, family
Under 25	\$10,000	\$10,000	\$23	\$64.25	\$23.50	\$65.67
25 to 49	\$18,000	\$18,000	\$15.67	\$43.92	\$16.83	\$47.08
50 to 124	\$32,500	\$32,500	\$8.33	\$28.25	\$9.42	\$31.83
125 to 249	\$55,000	\$60,000	\$5.50	\$18.67	\$6.33	\$21.33
250 to 499	\$80,000	\$90,000	\$4.17	\$14.08	\$4.92	\$16.67
500 to 999	\$105,000	\$115,000	\$3	\$11.83	\$3.67	\$14.67
1,000 to 3,999	\$130,000	\$150,000	\$2.58	\$10.25	\$3.08	\$12.08
4,000 to 5,999	\$300,000	\$300,000	\$1.25	\$5	\$1.33	\$5.25
6,000 and over	n/a	n/a	n/a	n/a	n/a	n/a

Additional information

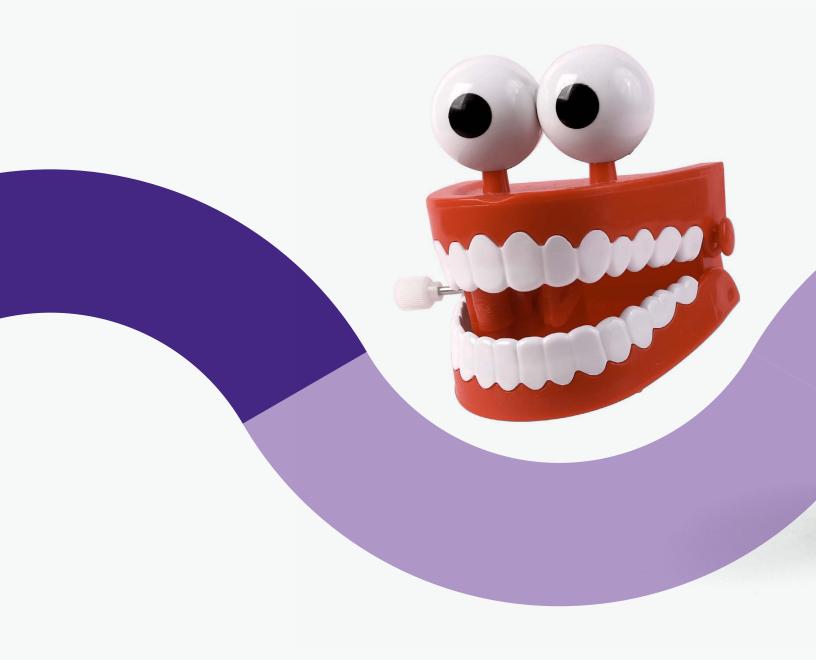
Public Prescription Drug Insurance Plan

FEDERAL PLAN

15. Dental care

The federal government has introduced dental care plans to provide all citizens with affordable access to oral care. These programs are designed to help people who are not covered by private insurance. There are two plans in effect:

- The Canadian Dental Care Plan, launched in December 2023 and being gradually rolled out into to 2025
- The Canada Dental Benefit, which helps families with children under 12, in effect until June 30, 2024



Canadian Dental Care Plan^{NEW}

The Canadian Dental Care Plan is a new program introduced by the federal government to help people who have no dental insurance get access to oral care and services.

Eligibility

To qualify for the Canadian Dental Care Plan, applicants must:

- Be a resident of Canada for tax purposes
- Not have access to any private dental care insurance
- Have an adjusted family net income of less than \$90,000
- Have filed an income tax report for the previous year

Start date of coverage

The Plan began rolling out in December 2023 by segment of the population, as indicated in the table below.

Roll-out of coverage by segment of the population

Segment of the population	Date applications are accepted
Age 87 and over	December 2023
Age 77 to 86	January 2024
Age 72 to 76	February 2024
Age 70 to 71	March 2024
Age 65 to 69	May 2024
People with a valid Disability Tax Credit certificate	June 2024
Children under age 18	June 2024
Other eligible Canadian residents	As of 2025

People who may be eligible according to their segment of the population will receive a letter with a personalized application code and instructions on how to apply.

The effective date of coverage varies for each person based on:

- The date each segment can apply
- The date the application was sent
- The date enrolment is confirmed

It will be confirmed in the documents sent to covered persons after enrolment.

Care and services covered

The purpose of the covered services and care is to treat dental issues and maintain healthy teeth and gums. Examples include:

- Preventive services, including scaling (cleaning), polishing, sealants and fluoride
- Diagnostic services, including examinations and X-rays
- Restorative services, including fillings
- Endodontic services, including root canal treatments
- Prosthodontic services, including: complete dentures and partial removable dentures
- Periodontal services, including deep scaling
- Oral surgery services, including extractions

Reimbursement amounts

The Canadian Dental Care Plan has established the percentage of expenses that will be reimbursed. Some individuals may have to pay a co-payment, which is the percentage of fees that are not covered and must be paid to the dental care service provider. This co-payment is based on adjusted family net income according to the parameters indicated in the table below.

Co-payments based on adjusted family net income

Family income	Portion covered by the Plan ¹	Portion paid by patients
Less than \$70,000	100%	0%
\$70,000 to \$79,999	60%	40%
\$80,000 to \$89,999	40%	60%

 Care and services are covered up to the maximum established by Canadian Dental Care Plan fees. Any expenses that exceed the plan fees must be assumed by patients.

Canada Dental Benefit TEMPORARY

The Canada Dental Benefit is a provisional plan that is available until June 30, 2024. It covers a portion of dental care fees for children under age 12. Families receiving the Canada Child Benefit whose annual income is less than \$90,000 and who do not have access to a private dental insurance plan are eligible.

Depending on adjusted family net income, a tax-free payment of \$260, \$390, or \$650 is available for each eligible child.

Eligibility

For expenses to qualify for payment, the following criteria must be met:

- The child must have been under age 12 on July 1, 2023
- The dental care services were received between July 1, 2023, and June 30, 2024
- The child does not have access to a private dental insurance plan
- The child's dental costs are not fully covered by another dental program provided by any level of government

Benefit

The benefit amount is based on adjusted family net income and does not change based on dental costs.

Family income	Payment amount (full custody)	Payment amount (shared custody)
Less than \$70,000	\$650	\$325
\$70,000 to \$79,999	\$390	\$195
\$80,000 to \$89,999	\$260	\$130
\$90,000 or over	Not eligible	Not eligible

Additional information

Dental coverage

PROVINCIAL PLAN

16. Individual and Family Assistance Act

The Quebec government's Social Assistance and Social Solidarity Plans provide financial support and services to help low-income individuals and families achieve social and financial self-sufficiency. They also provide benefits to pay for essential needs such as shelter and food. They encourage recipients to engage in activities that promote their employment integration.



Eligibility

The Individual and Family Assistance Act includes four plans for helping low-income people pay for essential goods and services:

- Social Assistance Program
- Social Solidarity Program
- Aim for Employment Program
- Basic Income Program

To be eligible, applicants must meet assets and income criteria and be age 18 and over. If under age 18, they must be or have been married, or be the parent of a dependent child.

Social Assistance Program

The Social Assistance Program is intended for a single adult or for families without severely limited capacity for employment. It encourages people to engage in activities that promote their employment integration or social participation. The amount allocated varies according to family composition and other criteria, such as the presence or absence of temporarily limited capacity, type of accommodation, income, etc.

The basic benefit paid under the Social Assistance Program may be increased by other amounts, such as:

- An allowance for temporary limitations
- Adjustments for dependent children
- Adjustments for adults
- Special benefits
- An adjustment for single individuals

Social Assistance Program monthly payments

Recipients	Basic benefits	Adjustment to basic benefits (January 1, 2024) ¹	Allowance	Total benefits	Exempted work income
One adult					
No limited capacity	\$762	\$45	\$0	\$807	\$200
Temporarily limited capacity	\$762	\$45	\$161	\$968	\$200
One spouse of a student					
No limited capacity	\$210	\$45	\$0	\$255	\$200
Temporarily limited capacity	\$210	\$45	\$161	\$416	\$200
Two adults					
No limited capacity	\$1,179	\$45	\$0	\$1,224	\$300 ²
Temporarily limited capacity	\$1,179	\$45	\$277	\$1,501	\$300 ²
Two adults in different situations					
One adult with no limited capacity and one adult with temporarily limited capacity	\$1,179	\$45	\$161	\$1,385	\$300 ²

1. The adjusted amount added to the basic benefit each month is based on the composition of the household.

2. For both individuals.

NOTE: The monthly amount granted as a personal expense allowance to a sheltered person is determined by the *Régie de l'assurance maladie du Québec* (RAMQ). This amount is paid to one independent adult who is sheltered, or who is required to live in an institution for social integration purposes, or who is living in a centre that offers addiction treatment services, or one minor who is sheltered in an institution with their dependent child. To learn the amount of the benefit, please visit the <u>RAMQ website</u>

Social Solidarity Program

The Social Solidarity Program is intended for a single adult or for families in which one or more adults have severely limited capacity for employment. This program provides financial assistance and promotes integration and social participation. The amount allocated varies according to family composition and other criteria, such as type of accommodation, income or assets.

Severely limited capacity for employment

The status of severely limited capacity for employment means an adult has serious health problems that limit their opportunities to work.

These health problems may relate to an adult's physical or mental condition and must be noted by a doctor in a medical report.

Examples of severe employment restrictions include:

- Mental disorders, such as neurosis or psychosis
- Intellectual disability, mental retardation or amnesia
- Chronic illness
- Hearing impairment
- The aftermath of an accident
- The inability to move around
- Inability to understand linguistic symbols due to language disruption

Functional limitations are functional losses or decreases, whether physical, cognitive, or sensory. These limitations may be total or partial. They prevent a person from performing an activity in an acceptable manner or within the limits considered normal for a human being. Functional limitations may be directly or indirectly related to work activities.

Examples of functional limitations that may affect employability include:

- Inability to walk
- Inability to climb stairs
- Inability to understand linguistic symbols due to language disruption

Social Assistance Program monthly payments

Recipients	Basic benefit	Adjustment	Total benefit	Exempted work income
One adult	\$1,158	\$103	\$1,261	\$200
Spouse of a student	\$586	\$103	\$689	\$200
Two adults	\$1,731	\$118	\$1,849	\$300 ¹

1. For both individuals

Aim for Employment Program

The purpose of the Aim for Employment Program is to provide financial aid and personalized support to help participants enter the labour market and become financially self-sufficient. People who are eligible for the first time and who meet the conditions must participate.

The benefit paid may include additional amounts such as:

- An amount applicable to work income
- Special benefits
- Adjustments for dependent children

Aim for Employment Program monthly payments

Recipients	Basic benefits	Adjustment	Temporarily limited capacity allowance	Total benefits	Exempted work income
One adult participant	\$663	\$45	\$0	\$708	\$200
Two adult participants	\$1,027	\$45	\$0	\$1,072	\$300
One adult participant and one non- participating adult with no limitations to employment	\$1,027	\$45	\$0	\$1,072	\$300
One adult participant and one non- participating adult with temporarily limited capacity for employment	\$1,027	\$45	\$140	\$1,212	\$300
One adult participant who is the spouse of a student	\$663	\$45	\$0	\$708	\$200
One adult participant who is required to live in an institution for social integration purposes	\$663	\$45	\$0	\$708	\$200

1. Under certain conditions, an additional amount may be added to the benefit of a participant in the Aim for Employment Program who is receiving employment income.

Basic Income Program

The Basic Income Program provides a higher basic income for individuals with a persistent severely limited capacity for employment. Recipients can work to earn more money without affecting their benefit amount. They can also have more property and more money without their benefits being reduced.

Eligibility

To be eligible, applicants must:

- Be receiving benefits under the Social Solidarity Program
- Have had severely limited capacity for employment for at least 66 months over the previous 72 months

Basic income composition

The basic benefit is \$1,273 per month, which is \$15,276 for a period of one year. Additional amounts may be payable based on the individual's family situation.

Basic benefit amounts and adjustments are indexed each year.

2024 Basic Income Program monthly benefits

	Monthly amount	Annual amount
Basic benefit	\$1,273	\$15,276
Adjustments		
Single person	\$354	\$4,248
Person with dependent children	\$21	\$252
Person with dependent children pursuing post-secondary education	\$363	\$4,356

Income affecting the basic income amount

The calculation of the basic income takes into account the total income reported on the Quebec income tax return for the previous fiscal year. Every dollar earned that exceeds \$15,276 will decrease the annual benefit by \$0.55 the following year.

Other income that may affect the basic benefit includes:

- Employment income
- Amounts received as a retirement pension (e.g. Old Age Security pension) or under a pension plan
- Benefits paid by the Régie des rentes du Québec, the Commission des normes, de l'équité, de la santé et de la sécurité du travail or the Société de l'assurance automobile du Québec
- Employment assistance allowances that exceed \$222 per month (or \$353 per month for a single person who lives with a dependent child)
- Support allowances received under a social assistance and support program that exceed \$130 per month
- Maternity, paternity or adoption benefits, parental benefits, caregiver benefits or Employment Insurance benefits
- A spouse's income, if it exceeds \$29,422 per year

Assets affecting the basic income amount

The calculation of the basic income takes into account the liquid assets individuals have in hand, including:

- Cash
- Money in a chequing or savings account, a term deposit
- Funds deposited in a Tax-Free Savings Account (TFSA)

Tangible assets and other property of recipients is also considered. Examples include:

- Vehicles, such as a car, ATV or snowmobile
- Secondary residence, cottage or land (the primary residence is excluded from the calculation)
- An RRSP or RESP
- An inheritance

Exemptions and modifications to the basic income for income and liquid and tangible assets

Income and assets	Exemption	Reduction
Income (earnings, income of the spouse, benefits and allowances)	\$15,275	Benefit reduction for the following year: \$0.55 for each dollar in excess
Liquid assets	\$20,000	Benefit reduction the following month: \$1 for each dollar in excess
Tangible assets	\$500,000	Basic benefit reduction: \$0.15 for each dollar in excess

Additional information

Social Assistance and Social Solidarity

17. Tax impact of group insurance

Providing a group insurance plan has tax implications for both employers and employees.



Tax deductible expenses for the employer

Insofar as the group insurance plan complies with the provisions of the *Taxation Act* and its regulations, all related costs are tax-deductible for the employer.

Benefits taxable for employees

When the employer assumes the expenses for certain benefits, this contribution, including the sales tax, are considered taxable benefits for employees. These benefits are added to their income and indirectly creates tax.

For the employer, these taxable benefits increase the total payroll and, as a result, increase the contributions it must pay to finance various governmental programs such as the QPP, the CNESST, Employment Insurance, etc.

Fiscal impact of coverage included in group insurance plans

	Employer contribution taxable for employee	
Coverage	Federal	Provincial
Life	Yes	Yes
Accidental death and dismemberment due to accident or illness	Yes	Yes
Critical illness	Yes	Yes
Disability insurance	No	No
Health	No	Yes
Dental care	No	Yes

Specifics regarding disability insurance

The benefits paid to employees under most coverages are not taxable except for disability insurance. If the employer pays the premiums, in whole or in part, the benefits are taxable.

Disability benefits are not taxable if:

- The employer pays the premiums and adds them to the remuneration paid to employees
- The premium is entirely paid by employees¹

The disability insurance premiums paid by employees are tax-deductible.

 If the employer pays the 9% sales tax on premiums but the employee pays the premium, the benefits remain non-taxable for the employee and the tax paid by the employer is a taxable benefit for the employee.