



BENEFIT	STANDARD HEALTH & MEDICAL
<p>DRUGS Pay Direct Drug Card</p> <ul style="list-style-type: none"> • Co-Insurance • Co-Pay • Maximum 	<p>90% \$5 per prescription Unlimited Generic Substitution</p>
<p>HOSPITAL</p> <p>Semi-Private</p> <p>Convalescent Physical</p> <p>Rehab & Substance Abuse</p>	<p>Max of \$125/day</p> <p>\$20/day for 180 days/ occurrence</p> <p>\$20/day up to a max of 180 days/ occurrence combined.</p>
<p>TRAVEL Co-Insurance, 60 day Trip Limit, Travel Assist – per instance</p>	<p>100% Max. \$2,000,000</p>
<p>EXTENDED HEALTH</p> <p>Co-Insurance</p> <p>Overall Maximum</p> <p>Vision Care</p> <ul style="list-style-type: none"> • Eye Exams • Frames, Lenses & Contact Lenses <p>Private Duty Nursing</p> <p>Hearing Aids</p> <p>Paramedical Practitioners</p> <ul style="list-style-type: none"> • Physiotherapist • All other Paramedicals <p>Orthopaedic Shoes combined with Orthotics</p>	<p>90% Unlimited</p> <p>1/24 months \$200/24 months</p> <p>\$20,000/policy year</p> <p>\$600/5 policy years</p> <p>\$600/policy year \$400/policy year</p> <p>\$400/policy year</p>

Please note that this summary is provided for illustrative purposes only. For a full plan description, please refer to the plan booklet in your benefits package.



BENEFIT	STANDARD DENTAL
Preventative and Basic Services	
Co-Insurance	90%
Recall Exams dependents under age 16	1/6 consecutive months
Recall Exams – 16 and over	1/9 consecutive months
Major Dental Services	
Co-Insurance	50%
Orthodontic Services	
Co-Insurance	50%
Lifetime Maximum	\$1,500 per person
Combined Maximum	\$2,000/person, per policy year, excluding Orthodontic Services
Dental Fee Guide	Current in province where treatment is received

BENEFIT	
Basic Life	2 times the annual salary, to the nearest \$1,000. Maximum \$750,000
AD & D Basic	2 times the annual salary, to the nearest \$1,000. Maximum \$1,000,000

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