

Elite

Elite - with dental provides the same coverage as the Core Plus plan with significantly higher maximums and co-insurance and the ability to opt in or out of dental coverage.

Elite - with dental provides coverage for the following benefits and benefit levels:

Prescription drugs

Drugs that require a prescription by law are covered at:

- 90% reimbursement for the first \$10,000
- 100% reimbursement for the next \$240,000 for both generic and brand name prescriptions
- \$250,000 maximum per person per calendar year
- \$7 maximum dispensing fee per prescription
- Disposable needles for use with non-disposable insulin injection devices, lancets, test strips, and sensors for flash glucose monitoring machines

If you live in Quebec, read the *Information for Quebec Residents* in the FAQ section.

Dental care (optional)

- Waiting period: 3-month no-claims waiting period
- Deductible of \$25 per person to a maximum of \$50 per family per calendar year

- 80% reimbursement for endodontic, periodontal, oral surgery services and other covered routine services; \$750 per person per calendar year
- 100% reimbursement for accidental injury to natural teeth
- 50% reimbursement for major services (e.g. crowns, bridges, dentures, etc.); \$750 per person per calendar year

Paramedical services

- Paramedical services include treatment by a licensed chiropractor, dietician, osteopath, physiotherapist, podiatrist, psychologist, social worker, massage therapist, speech therapist, naturopath or acupuncturist
- 100% reimbursement to a maximum of \$500 per practitioner per calendar year
- \$50 per visit maximum

Ambulance services

- 100% reimbursement for ground or air transport

Vision care

- 100% reimbursement to a maximum of \$250 every 2 years for lenses and frames, contacts or laser eye surgery
- \$75 for one eye exam every 2 years

In-home nursing and home health aide care

- 100% reimbursement to a combined maximum of \$7,500 per person each calendar year for in-home nursing and home care

Medical supplies

- 100% reimbursement for selected medical supplies

- \$300 maximum per year for orthopedic equipment
- Diabetic equipment – Coverage for blood-glucose, flash glucose, and continuous glucose monitoring machines, including sensors and transmitters for continuous glucose monitoring machines, is limited to \$4,000 per calendar year

Hearing aids

- 100% reimbursement up to a maximum of \$500 every 5 years

Best Doctors ®

- Consultation services that put you in touch with the world's best medical specialists to help with diagnosis and treatment planning for serious illnesses

Consult+

- Health care you can access through an app or online. It lets you talk to doctors, nurses or other health care professionals for non-urgent medical care. You can use it anywhere you're comfortable talking through phone call, video or chat, 24 hours a day and 7 days a week.

PlanDirect also features several included services as part of each plan.

Reimbursement – refers to reimbursement for eligible expenses.

Generic and brand name prescriptions – the plan pays for the lower cost alternative drug, unless the physician has directed that a particular brand name prescription drug not be interchanged.

Waiting period – a 3-month waiting period applies to dentalcare services and supplies. This means no benefits are payable for dentalcare services and supplies expenses incurred during the period starting on your policy's effective date and ending on the last day of the third month following your policy's effective date. However, if you had prior dentalcare coverage, and apply for PlanDirect (Core, Core Plus or Elite) within 60 days of losing your coverage, the 3-month waiting period will be waived for

routine dental services only. The waiting period will still apply to endodontic services, periodontal services, oral surgery and denture maintenance, as well as major dental. If you had no prior coverage, the waiting period will apply for all dentalcare services. There are no waiting periods for the PlanDirect Basic, Comprehensive or Premier plans.

Benefits payable for certain health and dental services and supplies are subject to a limitation. A limitation may apply to a dollar amount which is payable under the policy or the frequency for which benefits will be payable.