

# Aon Choice, Retiree Health Exchange

## Healthcare Insurance: Plan Description

### Medical (core)

Benefit	Classic	Advance	Premium
<b>Minimum term</b>	24 months or life event*	36 months or life event*	36 months or life event*
Deductible	None	None	None
<b>A – Expenses Reimbursed at 100%</b>			
Hospitalization	Unlimited semi-private room	Unlimited semi-private room	Unlimited semi-private room
Rehabilitation center	Not covered	180 days per year, semi-private room	180 days per year, semi-private room
Residential and long term care center	90 days per year, semi-private room	180 days per year, semi-private room	180 days per year, semi-private room
<b>Travel insurance<sup>1</sup></b>			
Maximum	\$1 million per trip	\$5 million per trip	\$5 million per trip
Duration of trip	30 days	90 days (to age 80) 30 days (as of age 80)	180 days (to age 75) 90 days (age 75 to 79) 30 days (as of age 80)
Trip cancellation insurance	\$5,000 per trip	\$5,000 per trip	\$5,000 per trip
<b>B – Other Eligible Expenses</b>			
Coinsurance for other healthcare	70%	75%	80%
<b>Prescription drugs</b>			
Coinsurance for prescription drugs	70%	75%	80%
Annual maximum per insured	\$7,500	\$10,000	\$15,000
Formulary <sup>2</sup>	Mandatory substitution	Mandatory substitution	Mandatory substitution
<b>Medical services</b>			
Ambulance	Unlimited	Unlimited	Unlimited
Dentist following accident	\$5,000 per accident	\$5,000 per accident	\$5,000 per accident

Home care and assistance	Not covered	Not covered	\$500 per calendar year
Nursing care	\$3,000 per calendar year	\$5,000 per calendar year	\$5,000 per calendar year
<b>Healthcare professionals (paramedical)</b>			
Psychologist/speech therapist <sup>3</sup>	\$250 per year combined	\$400 per year combined	\$600 per year combined
Massage therapist	Not covered	Not covered	Included in the maximum for Other healthcare professionals
Other healthcare professionals <sup>4</sup>	\$250 per year combined	\$400 per year combined	\$600 per year combined
<b>Vision care</b>			
Eye exam, eyeglass frames and lenses, contact lenses, and laser eye surgery	Not covered	Not covered	\$250/24 months
<b>Other eligible medical expenses</b>			
Artificial limb or eye, supports, corsets, trusses, crutches or other orthopedic equipment	Covered	Covered	Covered
Compressions stockings	2 pairs per 12 consecutive months	3 pairs per 12 consecutive months	3 pairs per 12 consecutive months
Custom made orthotics and orthopedic shoes	\$250 per calendar year	\$350 per calendar year	\$500 per calendar year
Devices for diabetics (blood glucose monitor)	Not covered	\$200 per 36 months	\$250 per 36 months
External breast prosthesis	Not covered	\$150 per calendar year	\$250 per calendar year
Hearing aid	\$250 per 24 months	\$500 per 24 months	\$1,000 per 24 months
Insulin pump	Not covered	\$3,000 per 36 months	\$6,000 per 60 months
Other therapeutic devices	Covered	Covered	Covered
Respirator and oxygen	Covered	Covered	Covered
Transcutaneous electrical nerve stimulation (TENS)	Not covered	\$750 per 60 months	\$1,000 per 60 months
Wheelchair, hospital bed	Covered	Covered	Covered
Wig (capillary prosthesis)	\$100 per lifetime	\$300 per lifetime	\$300 per lifetime

\* The minimum term refers to the period for which the chosen module must be kept before a change in module is allowed. Certain life events may allow a module change regardless of the minimum period. Modules are only allowed to change one level at a time (and only downgrades are allowed). The insurance can be canceled at any time, but re-enrollment will no longer be possible.

<sup>1</sup> Travel: Travel coverage terminates at age 85 for all three plan options.

<sup>2</sup> Prescription drugs not reimbursed under the prescription drug insurance plan of the province of residence. Deductibles and coinsurance for drugs reimbursed under provincial drug insurance plans will also be covered.

<sup>3</sup> Includes Social Worker.

<sup>4</sup> Covered healthcare professionals include: acupuncturist, audiologist, naturopath, occupational therapist, osteopath, podiatrist, chiropractor (including x-rays), dietitian, homeopath, kinesiologist, orthotherapist, physiotherapist.

## Dental (optional)

Benefit	Classic	Advance	Premium
Minimum term	24 months or life event*	36 months or life event*	36 months or life event*
Deductible	None	None	None
Preventive services	65%	70%	75%
Basic restorative services	65%	70%	75%
Major restorative services	50%	50%	60%
Orthodontic services	Not covered	Not covered	Not covered
Maximum	\$500 per year	\$500 in year 1 \$750 after year 1	\$750 in year 1 \$1,000 after year 1

\* Dental benefit cannot be added once the core policy is in force.

\*\* Termination prior to the end of the minimum term will result in the termination of the entire contract.

\*\*\* The dental choice has to be the same as the core medical choice. If the Classic option is selected for medical, then only the classic dental option is available.

- No medical underwriting is required if member enrolls within 60 days of becoming eligible for cover
- Expenses are considered to be incurred on the day services are provided, and must be incurred while this insurance coverage is in force
- Eligible expenses are those reasonably incurred and justified by current medical practice and the reasonable and customary charges in force

## Life Insurance

Benefit	Classic	Advance	Premium
Core life insurance (automatic)*	\$10,000	\$10,000	\$10,000
Optional life insurance **	Maximum \$200,000 per person	Maximum \$200,000 per person	Maximum \$200,000 per person

### \*Core life insurance:

- Coverage is embedded in medical options (automatically included) and is not optional
- No medical underwriting is required if member enrolls within 60 days of becoming eligible
- Core life Insurance includes principal member only (not spouses)

### \*\*Optional life insurance:

- Available in units of \$10,000 (1 to 20 units) for each the principal member and spouse
- Life insurance coverage terminates at age 85 for all plan options
- Medical underwriting is required for optional life insurance in all circumstances

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