

# Retiree Plans



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## Executive Retiree Plans

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Underwritten by





## Health and Dental Coverage for Retiring Owners and Principals

For many people, retiring means leaving their group health and dental coverage behind. While provincial plans cover some health care expenses, many day-to-day and emergency expenses will now be your responsibility. Johnston Group Retiree Plans allow owners and principals to easily transition their group plan coverage to an individual health and dental plan.

Johnston Group Retiree Plans provide guaranteed health and dental benefits to owners and principals and their dependents previously covered under the Chambers of Commerce Group Insurance Plan®, Maximum Benefit® and designated Johnston Group Inc. administered plans.

To be eligible, individuals must have been employed with their company for the last five years prior to retirement as an owner, principal or executive, and actively at work at time of retirement. In addition, they must have been an insured employee in their company's Johnston Group Inc. administered plan for two years prior to retirement.

Dependent children are eligible for coverage up to age 21, extended to age 25 for students. To be eligible for coverage as an over-age dependent, the student must be undergoing full-time educational training.

### Making the transition

Johnston Group Retiree Plans include Health, Dental and Prescription Drug coverage. Simply apply for and purchase this coverage within 60 days following the date of your retirement.

There are no medical statements required and coverage is guaranteed.

Benefits will begin the 1st of the month following the date of application. For example, if you apply on November 7th, your benefits would begin December 1st.

For individuals to be eligible for any benefits under the Emergency Travel benefit, coverage must be in effect prior to departure. If individuals are out of the country when the plan goes into effect, the travel coverage will not go into effect until they return to their province of residence.

Extended health care coverage for a dependent who is hospitalized on the date they become eligible for coverage, other than a newborn child, will be delayed until the first day immediately following his/her discharge from the hospital.

## Choose one of three coverage options:

Retirees can choose any option to begin, but can only switch to a plan with less coverage every three years.

### EXAMPLES:

**Retiree chooses Plan A to start.** After three years retiree can switch to either Plan B or C.

**Retiree chooses Plan B to start.** Retiree cannot switch to Plan A in the future - after three years retiree could switch to Plan C.

**Retiree chooses Plan C to start.** Retiree cannot switch to Plan A or B in the future.

Plan A	Plan B	Plan C
Extended Health Care 100% coverage	Extended Health Care 100% coverage	Extended Health Care 100% coverage
Emergency Travel Benefits 120 day trip limit	Emergency Travel Benefits 90 day trip limit	Emergency Travel Benefits 90 day trip limit
Dental Care 100% Basic / 50% Major	Dental Care 80% Basic / 50% Major	

## Add Prescription Drug coverage:

There is no deductible. Prescription drug purchases are processed at the pharmacy using the ASSURE drug card. The plan substitutes generic equivalents, whenever possible.

The plan incorporates a prior authorization drug program. A small number of prescription drug treatments will require prior approval for coverage.

*Please note individuals can choose NOT to include drug coverage at original enrolment, but CANNOT add prescription drug coverage at a future date.*

**For residents of Quebec younger than age 65**, it is mandatory that members of Johnston Group Retiree Plans have prescription drug coverage, unless other private coverage is in place. For members age 65 or older, enrolment in RAMQ is automatic. If the member also decides to purchase drug coverage, then RAMQ becomes first payer and Johnston Group Retiree Plans would be the second payer (for supplementary coverage).

Prescription Drug Coverage	No Drug Coverage
80% reimbursement of prescription drug purchases up to \$5,000 and 100% reimbursement thereafter \$50,000 per person calendar year maximum	
\$1,000,000 lifetime maximum	

**Questions? Call the National Service Centre at 1.800.893.7587 Monday to Friday, 7:30 am - 6:00 pm CST**

# Coverage Options

	Plan A	Plan B	Plan C
<b>Extended Health Benefits - 100% coverage</b>			
<b>Chiropractors*, Podiatrists, Naturopaths, Osteopaths, Acupuncturists, Dieticians, Massage Therapists*</b>	\$600 per specialty per person per calendar year	\$600 per specialty per person per calendar year	\$600 per specialty per person per calendar year
<b>Physiotherapists*, Psychologists, Speech Therapists</b>	\$1,000 per specialty per person per calendar year	\$1,000 per specialty per person per calendar year	\$1,000 per specialty per person per calendar year
<i>* Maximum \$30 per visit, up to the specified maximums.</i>			
<b>Semi-private Hospital</b>	Maximum 90 days	Maximum 90 days	Maximum 90 days
<b>Orthotics</b>	\$300 per person every 2 years	\$300 per person every 2 years	\$300 per person every 2 years
<b>Orthopaedic Shoes</b>	\$300 per person per calendar year	\$300 per person per calendar year	\$300 per person per calendar year
<b>Ambulance Care</b>	Ground ambulance - unlimited Air ambulance - unlimited	Ground ambulance - unlimited Air ambulance - unlimited	Ground ambulance - unlimited Air ambulance - unlimited
<b>Nursing Care</b>	\$10,000 per year \$80,000 lifetime maximum	\$10,000 per year \$80,000 lifetime maximum	\$10,000 per year \$80,000 lifetime maximum
<b>Hearing Aids</b>	\$1,000 every 4 years	\$500 every 4 years	\$500 every 4 years
<b>Wheelchairs &amp; Hospital Beds</b>	\$10,000 every 5 years	\$10,000 every 5 years	\$10,000 every 5 years
<b>Oxygen Equipment</b>	Covered	Covered	Covered
<b>Medical Equipment such as splints, trusses and wigs</b>	\$500 combined maximum per year	\$500 combined maximum per year	\$500 combined maximum per year
<b>Breast Prosthesis</b>	\$500 every 2 years	\$500 every 2 years	\$500 every 2 years
<b>Blood Pressure Monitor</b>	One every 5 years	One every 5 years	One every 5 years
<b>Diabetic and Ostomy supplies</b>	Covered (Diabetic testing devices - one every 4 years)	Covered (Diabetic testing devices - one every 4 years)	Covered (Diabetic testing devices - one every 4 years)
<b>Artificial Prosthesis</b>	\$10,000 lifetime maximum	\$10,000 lifetime maximum	\$10,000 lifetime maximum
<b>Accidental Dental</b>	\$2,000 per year	\$2,000 per year	\$2,000 per year
<b>Emergency Travel Benefits - 100% coverage</b>			
	<b>120 day trip limit</b> \$1,000,000 lifetime maximum	<b>90 day trip limit</b> \$1,000,000 lifetime maximum	<b>90 day trip limit</b> \$1,000,000 lifetime maximum
Emergency Travel benefits include a Pre-Existing Condition provision ▪ For individual under age 75 a pre-existing condition is any injury or sickness for which diagnosis has been made, treatment has been recommended, treatment has been rendered, or expenses have been incurred, or was not stable within 90 days prior to departure. ▪ For individuals age 75 and over a pre-existing condition is any injury or sickness for which diagnosis has been made, treatment has been recommended, treatment has been rendered, or expenses have been incurred, or was not stable within 180 days prior to departure.			
<b>Dental Benefits</b>			
<b>Basic, Endodontic &amp; Periodontal services**</b>	<b>100% coverage:</b> Includes exams, cleanings, fillings, scaling, polishing and oral surgery	<b>80% coverage:</b> includes exams, cleanings, fillings, scaling, polishing and oral surgery	No coverage
<b>Major services**</b>	<b>50% coverage:</b> Includes crowns, bridges and dentures.	<b>50% coverage:</b> Includes crowns, bridges and dentures.	No coverage
	Dental Services have a combined maximum of \$750 per person per calendar year	Dental Services have a combined maximum of \$750 per person per calendar year	

\*\* Dental fees are based on your province's current Dental Fee Guide



## Things to consider...

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- Johnston Group Retiree Plans coverage is not identical to your group coverage. This brochure provides you with an overview of the benefits available, with your policy covering all of the details.
- You must be a resident of Canada and be covered under the provincial health plan in your province of residence to apply for this retiree program. If you apply for family coverage, your spouse and dependent children must also have provincial health care coverage.
- Rates are based on your age and province of residence and will change as you age or move to another province, or change plans.
- All annual or lifetime maximums are per person. Yearly maximums are based on a calendar year.

## And more...

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Whichever options you choose, all plans include **survivor benefits**. Should you pass away while insured, your spouse and dependent children may retain the coverage, provided premiums continue to be paid.

For Quebec residents, due to RAMQ legislation, survivor benefits are provided for two years without premium payment. After two years, the survivor must apply to RAMQ for their drug coverage. At that time, they can continue the program without drug coverage, on a premium paying basis.

## Making a claim is easy

- If you choose the drug plan option, you'll receive your own pay-direct drug card for prescription drug purchases. Simply present the card to the pharmacist and the portion that is covered by your plan is automatically paid. You just pay any remaining balance of the cost at the counter.
- Your benefits card will have our EDI (electronic data interchange) number, allowing dentists to electronically submit your dental claims directly to us. We'll mail you or your dentist a reimbursement cheque for any eligible expenses.
- Don't like waiting for cheques? Sign up for direct deposit of your reimbursement to the bank account of your choice.

## Premium payment

Premiums are paid on a monthly basis by pre-authorized payment and the application incorporates the pre-authorized payment sign-up. As long as you pay your premiums, you remain insured.

## Cancellation of coverage

You must notify us in writing of your intent to terminate coverage at least 30 days prior to the requested termination date. Your plan will be cancelled the last day of the month following 30 days from the date notification is received.



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