

Retiree Plans



Executive Retiree Plans



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 Tricor Maximum Benefit program 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, actively at work at time of retirement, and must have been an insured employee of their company's group plan with the Tricor Maximum Benefit 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 overage dependent, the student must be undergoing full-time educational training.

Making the transition

Johnston Group Retiree Plans let you choose options that 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.

Choose one of three health/dental 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 180 day trip limit	Emergency Travel Benefits 120 day trip limit	Emergency Travel Benefits 90 day trip limit
Dental Care 100% Basic / 50% Major	Dental Care 80% Basic / 50% Major	No dental coverage

Add prescription drug coverage:

Prescription drug purchases are processed at the pharmacy using the ASSURE drug card. The plan substitutes generic equivalents, whenever possible.

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

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

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. Members must choose either Drug Option 1 or Drug Option 2 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 Option 1 or Drug Option 2, then RAMQ becomes first payer and Johnston Group Retiree Plans would be the second payer (for supplementary coverage).

Option 1	Option 2	No Drug Coverage
\$5.00 per prescription deductible 100% reimbursement of prescription drug purchases \$100,000 per person calendar year maximum	\$5.00 per prescription deductible 80% reimbursement of prescription drug purchases up to \$5,000 and 100% reimbursement thereafter, up to \$100,000 per person calendar year maximum	
\$1,000,000 lifetime maximum	\$1,000,000 lifetime maximum	

Add life coverage:

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

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

Option 1	Option 2	No Life Coverage
\$25,000	\$15,000	

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

Health and Dental Coverage Options

	Plan A	Plan B	Plan C
Extended Health Benefits - 100% coverage			
Chiropractors, Podiatrists, Naturopaths, Osteopaths, Acupuncturists, Dieticians, Massage Therapists	\$600 per specialty per person per calendar year	\$600 per specialty per person per calendar year	\$600 per specialty per person per calendar year
Physiotherapists, Psychologists, Speech therapists	\$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
Semi-private Hospital	Maximum 90 days	Maximum 90 days	Maximum 90 days
Orthotics	\$300 per person every 2 years	\$300 per person every 2 years	\$300 per person every 2 years
Orthopaedic Shoes	\$300 per person per calendar year	\$300 per person per calendar year	\$300 per person per calendar year
Ambulance Care	Ground ambulance - unlimited Air ambulance - unlimited	Ground ambulance - unlimited Air ambulance - unlimited	Ground ambulance - unlimited Air ambulance - unlimited
Nursing Care	\$10,000 per year \$80,000 lifetime maximum	\$10,000 per year \$80,000 lifetime maximum	\$10,000 per year \$80,000 lifetime maximum
Hearing Aids	\$1,000 every 4 years	\$500 every 4 years	\$500 every 4 years
Wheelchairs & Hospital Beds	\$10,000 every 5 years	\$10,000 every 5 years	\$10,000 every 5 years
Oxygen Equipment	Covered	Covered	Covered
Medical Equipment such as splints, trusses and wigs	\$500 combined maximum per year	\$500 combined maximum per year	\$500 combined maximum per year
Breast Prosthesis	\$500 every 2 years	\$500 every 2 years	\$500 every 2 years
Blood Pressure Monitor	One every 5 years	One every 5 years	One every 5 years
Diabetic and Ostomy supplies	Covered (Diabetic testing devices - one every 4 years)	Covered (Diabetic testing devices - one every 4 years)	Covered (Diabetic testing devices - one every 4 years)
Artificial Prosthesis	\$10,000 lifetime maximum	\$10,000 lifetime maximum	\$10,000 lifetime maximum
Accidental Dental	\$2,000 per year	\$2,000 per year	\$2,000 per year
Emergency Travel Benefits - 100% coverage			
	180 day trip limit \$1,000,000 lifetime maximum	120 day trip limit \$1,000,000 lifetime maximum	90 day trip limit \$1,000,000 lifetime maximum
<p>Emergency Travel benefits include a Pre-Existing Condition provision ■ For individual under age 75 a pre-existing condition is any injury or sickness, directly or indirectly related to, 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, directly or indirectly related to, 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.</p>			
Dental Benefits			
Basic, Endodontic & Periodontal services*	100% coverage: Includes exams, cleanings, fillings, scaling, polishing and oral surgery Dental services have a \$1,500 maximum per year	80% coverage: includes exams, cleanings, fillings, scaling, polishing and oral surgery Dental services have a combined maximum of \$2,000 per year	No coverage
Major services*	50% coverage: Includes crowns, bridges and dentures. Dental services have a \$1,500 maximum per year	50% coverage: Includes crowns, bridges and dentures. Dental services have a combined maximum of \$2,000 per year	No coverage

* Dental fees are based on your provinces' current Dental Fee Guide

Things to consider...

- **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 will change as you age or change plans.
- All annual or lifetime maximums are per person. Yearly maximums are based on a calendar year.

And more...

Whichever health and dental options you choose, these plans include **survivor benefits**. If you die 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, for health and dental. 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 a 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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