## Replacement Health Schedule of Benefits

| Benefits  | PremierPlan  | ChoicePlan®   | Essential Plan®  |
|---|--|---|--|
| Prescription Drugs  | up to 80% to \$2,500/year  | up to 80% to \$1,250/year   | n/a  |
| Dental Care   | 80% preventative & basic<br>50% major<br>\$1,500 combined maximum  | 80% preventative & basic<br>50% major<br>\$1,250 combined maximum   | 80% preventative & basic<br>50% major<br>\$1,000 combined maximum            |
| Accidental Dental   | \$2,000 / injury   | \$2,000 / injury  | \$2,000 / injury   |
| Private Duty Nursing  | 80% to \$5,000   | 80% to \$3,000  | 80% to \$1,000   |
| Private & Semi-Private<br>Hospital Accommodations   | 80% to \$10,000 combined maximum   | 80% to \$5,000 combined maximum   | 80% to \$2,000 combined maximum  |
| Orthopedic Shoes &<br>Custom Made Foot Orthotics  | \$300  | \$300   | \$300  |
| Health Practitioners<br>(acupuncturist, chiropractor,<br>chiropodist/podiatrist, massage<br>therapist, naturopath, speech therapist<br>and physiotherapist)                                   | 100% to \$600 combined maximum   | 80% to \$600 combined maximum   | 50% to \$600 combined maximum  |
| Counselling Services<br>(clinical psychologist, clinical<br>counsellor, registered social worker,<br>psychotherapist)   | \$65/visit x 10 visits combined  | \$65/visit x 10 visits combined   | \$65/visit x 5 visits combined   |
| Vision Care<br>(eye wear and eye exams)   | \$300/ 2 years combined maximum, including 1 eye exam / 2 years  | \$150/ 2 years combined maximum, including 1 eye exam / 2 years   | \$100/ 2 years combined maximum, including 1 eye exam / 2 years              |
| Hearing Aids  | \$800 / 5 years  | \$500 / 5 years   | \$500 / 5 years  |
| Ambulance (road and air)  | Unlimited  | Unlimited   | Unlimited  |
| Medical Equipment & Supplies<br>(including but not limited to blood<br>pressure monitors, casts, compression<br>stockings, crutches, mastectomy/<br>surgical bras, mobility aids and walkers) | \$3,000 combined maximum<br>\$2,500 lifetime limit on sleep<br>apnea machine   | \$3,000 combined maximum<br>\$2,500 lifetime limit on sleep<br>apnea machine  | \$3,000 combined maximum<br>\$2,500 lifetime limit on sleep<br>apnea machine |
| Wheelchairs, Motorized Scooters<br>& Hospital Beds  | 80% to \$10,000 combined lifetime maximum  | 80% to \$10,000 combined lifetime maximum   | 80% to \$10,000 combined lifetime maximum                                    |
| Artificial Limbs, Eyes & Larynx (includes myoelectric limbs)  | \$10,000 combined lifetime maximum   | \$10,000 combined lifetime maximum  | \$10,000 combined lifetime maximum   |
| Breast Prosthesis   | \$325 single / 2 years<br>\$650 bi-lateral / 2 years   | \$325 single / 2 years<br>\$650 bi-lateral / 2 years  | \$325 single / 2 years<br>\$650 bi-lateral / 2 years                         |
| Annual Travel<br>(emergency medical coverage<br>while travelling)   | 15 days out of Canada<br>183 days within Canada<br>90-day stability age 69 and under<br>180-day stability age 70+<br>Out-of-Canada travel ends at age 80<br>\$500,000 of coverage for COVID-19<br>\$1,000,000 lifetime maximum | 7 days out of Canada<br>183 days within Canada<br>90-day stability age 69 and under<br>180-day stability age 70+<br>Out-of-Canada travel ends at age 80<br>\$500,000 of coverage for COVID-19<br>\$1,000,000 lifetime maximum | n/a  |

This is a summary of benefits only. Please refer to the policy wording for complete details. It is important that you read and understand your policy as your coverage may be subject to certain exclusions or limitations.