



GROUP INSURANCE

**REAL ESTATE BROKERS
AND EMPLOYEES**

- / A whole new experience
in health insurance
- / All-new plan
- / Save more money



MONTHLY PREMIUM (TAX INCLUDED)

		ESSENTIAL	PLUS	COMPLETE
Under 70 years old	Single	\$101.06	\$140.83	\$191.47
	Family	\$251.72	\$347.56	\$489.31
	Single-Parent	\$162.45	\$223.82	\$304.83
	Couple	\$202.12	\$278.80	\$380.13
70 to 75 years old	Single	\$153.38	\$193.15	\$243.79
	Family	\$356.36	\$452.20	\$593.95
	Single-Parent	\$267.09	\$328.46	\$409.47
	Couple	\$306.76	\$383.44	\$484.77
Prescription drugs (direct payment)		\$ 9 Ticket fee per prescription 75 % Covered	\$ 9 Ticket fee per prescription 75 % Covered	\$ 9 Ticket fee per prescription 75 % Covered
Hospitalization		Not included	Semi-private room 100% Covered	Semi-private room 100% Covered

	ESSENTIAL	PLUS	COMPLETE
MEDICAL CARE WITH DEDUCTIBLE (PER CALENDAR YEAR)			
Calendar Year Deductible	None	\$ 25 single, \$ 50 with dependants	
Coverage percentage	Not included	80 % of the eligible expenses listed below	
Ambulance		Subject to contractual maximum	
Hearing care		\$ 500 per 48 month period	
Eye exam		\$ 100 per 24 month period	
Custom Orthotics		\$ 300 per year	
Specialists Chiropractor, Chiropodist/Podiatrist, Osteopath, Naturopath, Speech Therapist, Audiologist, Occupational Therapist, Acupuncturist, Homeopath		\$ 500 per year per specialist	
Registered Massage Therapist, Orthotherapist, Kinesitherapist		\$ 500 per year for all specialists combined	
Physiotherapist, Athletic Therapist		\$ 500 per year for all specialists combined	
Psychologist, Counselor/Social Worker, Master of Social Work (MSW), Registered Psychotherapist, Psychoeducator		\$ 500 per year for all specialists combined	
Dietitian, Nutritionist		\$ 500 per year for all specialists combined	
Medical services Diagnostic and laboratory tests, X-rays, MRI		Maximum of \$ 1,000 per calendar year	
CPAP, BIPAP, APAP machine (and supplies)		Subject to contractual maximum. Lifetime maximum \$ 10,000	
Diabetic equipment and supplies		Contractual maximum	
Telemedicine		Included	

	ESSENTIAL	PLUS	COMPLETE
TRAVEL INSURANCE (NO DEDUCTIBLE & NO CO-PAY)			
Trip cancellation		\$5,000 per person	
Travel assistance		Included	
Travel insurance		Maximum 5 million per trip of 180 days or less	

DENTAL CARE			
Deductible (per calendar year)	Not included	Not included	\$ 25 single, \$ 50 with dependants
Basic services			80 % of the eligible fees
Comprehensive Basic Services			80 % of the eligible fees
Major Services			50 % of the eligible fees
Oral examination & prevention (cleaning)			Every 9 months
Maximum per calendar year			\$ 1,250 per person