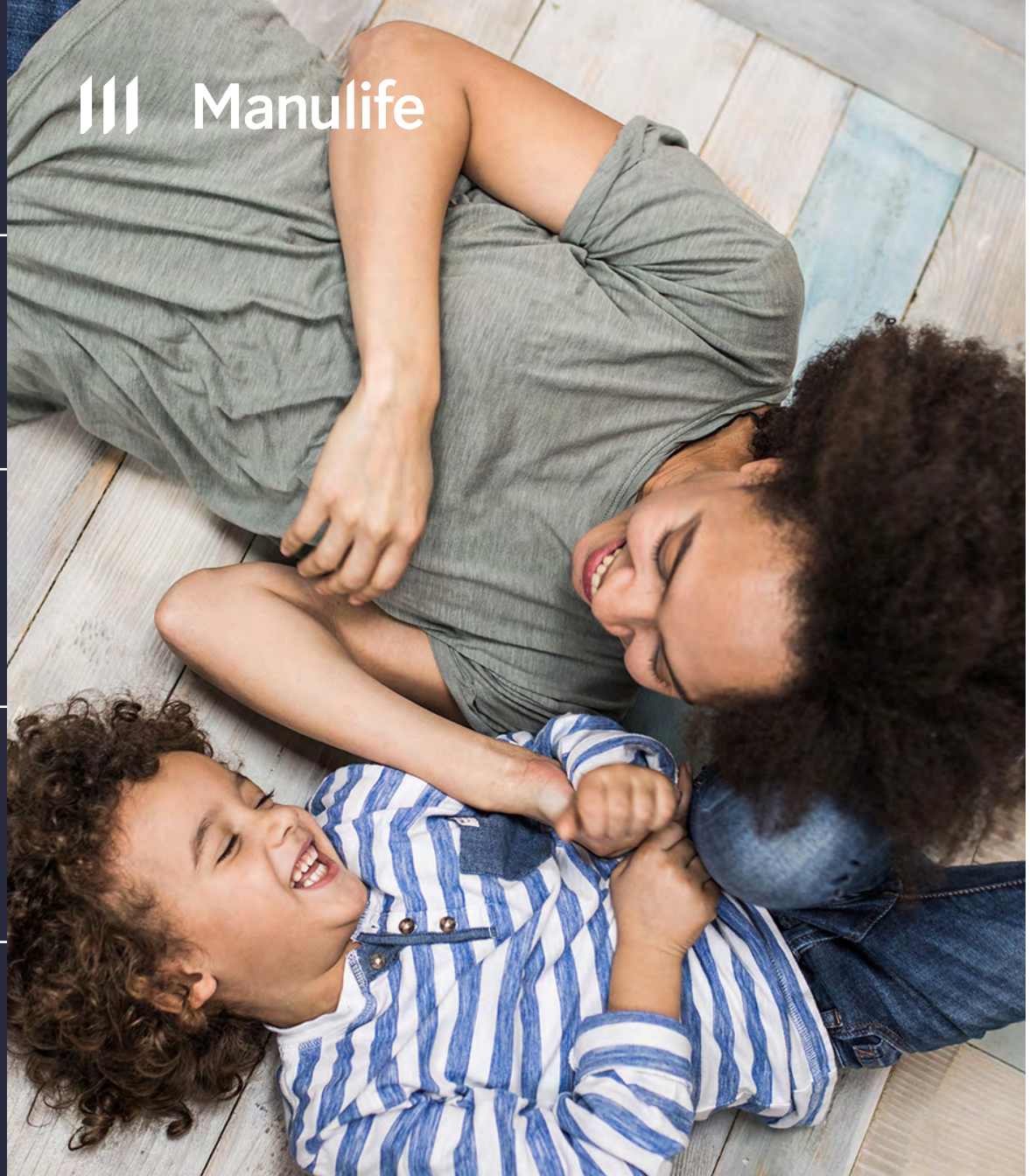


Manulife

The Association Health & Dental Plan

Coverage that fits *you*, and your budget.

The Manufacturers Life Insurance Company

How to navigate!

The side tabs take you to the different sections in this document.

Look for the icons below to help you navigate through:

These arrows take you to the next page or the previous page.

The house icon takes you back to the table of contents.

Table of Contents

What is
The Association
Health & Dental Plan?

Pick your plan

What each plan
covers

A little every month can *save you* a lot later.

One-size-fits-all usually fits no one - especially when it comes to health and dental coverage. That's why the Association Health & Dental Plan offers 8 choices, to give you the coverage that's right for you, at the price you need.

- **Without coverage?**
- **Employer plan doesn't provide enough coverage?**
- **Self-employed?**

The Association Health & Dental Plan starts where your government health plans stop. They could help save you thousands of dollars on routine and unexpected prescription drugs, dental care, vision care and more.

Pick your plan.

8 affordable choices make it easy to find a plan that fits your family's needs and budget.

Your 4 Health & Dental Plan choices:

Base Health & Dental Plan
Bronze Health & Dental Plan
Silver Health & Dental Plan
Gold Health & Dental Plan

Your 4 Dental Plan choices:

For dental coverage alone, choose from:

Base Dental Plan
Bronze Dental Plan
Silver Dental Plan
Gold Dental Plan

Plus, all 8 plans give you coverage for:

- Vision care
- Registered specialists and therapists
- Ambulance services

The next 2 pages show you all 8 plans, so you can compare coverage levels at a glance.

For details on each Health & Dental Plan
For details on each Dental Plan

Compare to choose your level of coverage.

Your 4 Health & Dental Plan choices:

Plans	Base Plan	Bronze Plan	Silver Plan	Gold Plan
Medical Questionnaire at time of application	Not required	Required	Required	Required
Prescription Drugs† (reimbursement per year)††	70% of first $750 to $525 maximum	70% of first $500 80% of next $2,500 to $2,350 maximum	70% of first $500 100% of next $4,650 to $5,000 maximum	90% of first $2,222 100% of next $8,000 to $10,000 maximum
Dental Services ‡ Basic and supplementary	$400 per year maximum	$500 per year maximum	Per year maximum Year 1: $600 Year 2+: $900	Per year maximum Year 1: $750 Year 2: $1,000 Year 3 and 4: $1,200 Year 5+: $1,500 **Also includes Major Restorative**
Vision care	$100 per 2 benefit years plus $60 for optometrist visits per 2 benefit years	$100 per 2 benefit years plus $60 for optometrist visits per 2 benefit years	$150 per 2 benefit years plus $60 for optometrist visits per 2 benefit years	$250 per 2 benefit years plus $60 for optometrist visits per 2 benefit years
Registered Specialists and Therapist*	Included	Included	Included	Included
Travel coverage	Included to age 65	Included to age 65	Included to age 65	Included to age 65

For a more detailed plan comparison, click here

Compare to choose your level of coverage.

Your 4 Dental Plan choices with basic health coverage:

Plans	Base Dental Plan	Bronze Dental Plan	Silver Dental Plan	Gold Dental Plan
Medical Questionnaire at time of application	Not required	Not required	Not required	Not required
Dental Services ‡ Basic and supplementary	$400 per year maximum	$500 per year maximum	Per year maximum Year 1: $600 Year 2+: $900	Per year maximum Year 1: $750 Year 2: $1,000 Year 3 and 4: $1,200 Year 5+: $1,500 **Also includes Major Restorative**
Vision care	$100 per 2 benefit years plus $60 for optometrist visits per 2 benefit years	$100 per 2 benefit years plus $60 for optometrist visits per 2 benefit years	$100 per 2 benefit years plus $60 for optometrist visits per 2 benefit years	$100 per 2 benefit years plus $60 for optometrist visits per 2 benefit years
Registered Specialists and Therapist*	Included	Included	Included	Included

Note: Prescription drugs not included.

For a more detailed plan comparison, click here

Help when you need it most: that's available too!

Akira by TELUS Health (Virtual Healthcare App)**

24/7 access to healthcare practitioners online, through the app. This benefit is included at no cost and available once you have registered to submit your claims online through Manulife's SecureServe portal.

TELUS LivingWell Companion**

The LivingWell Companion gives you live access to a trained operator for emergency assistance 24/7 and includes an optional fall detector.

TELUS SmartHome Security**

Offering you home security and home monitoring right from your smartphone.

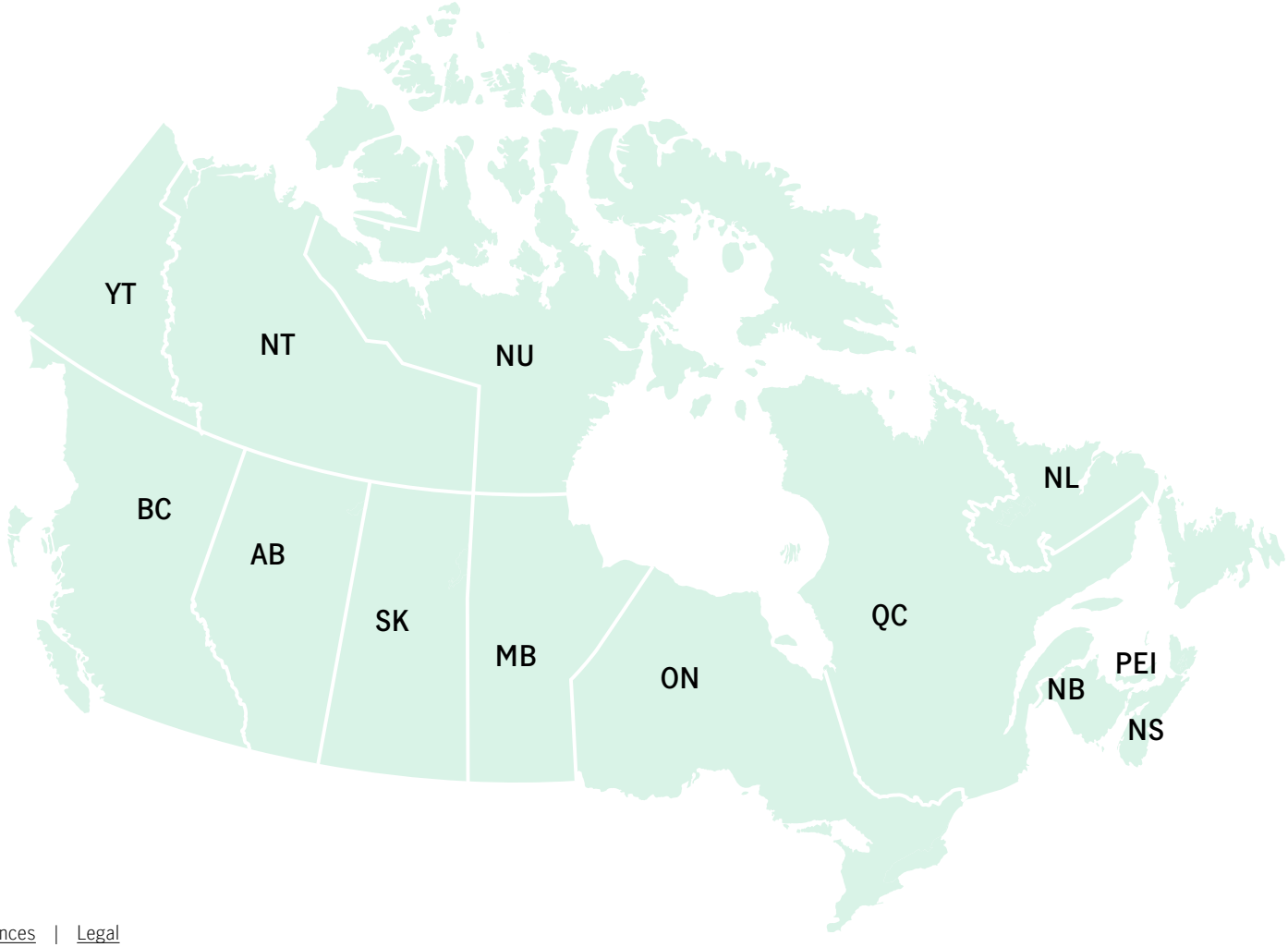
Get faster coverage, with:

Online claims
Make and view your claims history online, 24/7.

Immediate coverage
that starts the first day of the month after you're approved.

No medical questionnaire
for all 4 dental plans, or with the base health and dental plan.

Monthly *rates*



Rates by province:

British Columbia
Alberta
Saskatchewan
Manitoba
Ontario
Quebec
New Brunswick
Nova Scotia
Newfoundland and Labrador
Prince Edward Island
Yukon
Northwest Territories
Nunavut

References

All references to "year" refer to Anniversary Year. When it relates to Hearing Aids and Vision benefits, year refers to Benefit Year. Anniversary Year refers to the consecutive 12-month period following the effective date of your policy, and each 12-month period thereafter. Benefit Year refers to the consecutive 12-month period following the date a claim for a specific benefit is first incurred under your policy. Calendar Year means the 12-month period commencing January 1 and ending December 31.

† Prescription drug coverage applies to costs not covered by your provincial/territorial prescription drug insurance plan, up to the maximums stated above.

†† Prescription drug coverage is based on Calendar Year for residents of British Columbia, Saskatchewan and Quebec. For all other provinces, coverage is based on Anniversary Year. Generic Drug – A generally less expensive alternative to an interchangeable brand-name drug product. Please note: Not all drugs have a generic equivalent. If a non-generic drug is purchased, payment will be based on the lowest generic drug cost equivalent, if applicable. If no generic brand exists, payment of the brand-name price will be made at the co-payment level of your plan. Exclusions: smoking cessation drugs, over-the-counter drugs, fertility drugs, erectile dysfunction drugs, and drugs not requiring a prescription. Other exclusions apply; please consult your policy for details.

‡ If applicable, dental coverage begins at the age when dental coverage under your provincial/territorial health insurance plan ends. Covers basic services, paid at a percentage of the current Dental Fee Guide or the reasonable and customary charge in your province of residence.

* Registered specialists and therapists include acupuncturists, chiropractors, dietitians, osteopaths, podiatrists, naturopaths, chiropodists, massage therapists, physiotherapists, psychologists, psychotherapists and speech therapists.

**Manulife cannot guarantee the availability of this benefit indefinitely.

For Quebec residents only: The prescription drug coverage available under all plans is limited to costs not covered by the RAMQ Prescription Drug Insurance Plan. It is not intended to be a replacement for the RAMQ Plan. In order to be eligible for coverage under these plans, you must have a provincial health card and be registered under the RAMQ Prescription Drug Insurance Plan or have equivalent coverage under a group plan.

Important Notice
This is not a contract. Actual terms and conditions are detailed in the policy issued by Manulife upon final application approval. It contains important details concerning exclusions, conditions and limitations. Please review them carefully upon receipt.

Medically Underwritten
If the plan is "medically underwritten," or "requires a medical questionnaire," you must disclose to us any medical condition, injury or illness that occurred or existed on or before the date of your application, regardless of whether you went to see a doctor about the condition or were given a diagnosis, or whether or not you believe that it is important. The premium charged and/or benefits offered could be subject to adjustment or modification of coverage or declined based on your or your family's medical background. This will be determined after an evaluation of the information provided on the enclosed medical questionnaire.

Pre-existing Conditions
The insurer will not pay any Emergency Travel Medical Care Benefits for any claims relating directly or indirectly to a pre-existing condition that is not stable within the consecutive nine-month period immediately preceding the date of departure from the insured's province/territory of residence. This means any condition, injury, illness, disease or related complication in relation to which:

- an insured has had new symptoms, or existing symptoms have become more frequent or more severe, or there has been a test result showing deterioration;
- a Physician (or other medical professional) has prescribed or recommended a change in medication (the medication dosage or frequency has been reduced, increased or stopped, and/or new medication has been prescribed) taken for that condition;
- a Physician (or other medical professional) has prescribed or recommended a change in treatment for that condition; or
- there has been an admission to hospital and/or results are pending for further investigation into that condition during such nine-month period. This exclusion does not apply to minor ailments or a change in medication where the active ingredient and strength remain the same (i.e., generic).

Effective Date of Coverage
Coverage is effective no earlier than the first day of the month following final approval of the application and receipt of first premium payment.

Plans underwritten by The Manufacturers Life Insurance Company (Manulife).

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To speak with a Manulife representative, contact 1-888-626-8543.

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For more information visit Manulife.ca or speak to your advisor.