



Wawanesa
Life

Diversity

Basic & Enhanced



***Innovative group insurance
plans designed for employers
with 3 to 9 employees***

Diversity Basic & Diversity Enhanced

Benefit Plans

Basic

Enhanced

Life Insurance

Benefit Amount	\$25,000	\$50,000
Termination	Earlier of retirement or age 70	Earlier of retirement or age 70

Accidental Death Insurance

Benefit Amount	\$25,000	\$50,000
Termination	Earlier of retirement or age 70	Earlier of retirement or age 70

Long Term Disability

Benefit Amount per month	\$750	Without Evidence \$1,500 (Minimum Salary \$25,000/yr) With Evidence \$2,500 (Minimum Salary \$45,000/yr)
Qualifying Period	120 days	120 days
Maximum Benefit Period	5 Years	5 Years
Definition of Disability	5 years own occupation	5 years own occupation
Pre-existing Condition Clause	6/12 months	6/12 months
Benefit Offsets	No Offsets	Primary CPP/QPP, WCB, EI and any government plan of insurance including auto
Critical Illness Feature	\$1,000 single payment per Lifetime	\$1,500 single payment per Lifetime
Termination	Earlier of retirement or age 65 minus qualifying period	Earlier of retirement or age 65 minus the qualifying period

Extended Health Benefit

<p>Maximums apply individually to each employee and dependent Maximums will be reduced by 50% in the first policy year for groups with an effective date from July 1 through December 31. (Not applicable to Extended Health Benefit - Other Services)</p>		
Reimbursement (applies to Drugs, Paramedical Services & Medical Services & Supplies)	80%	90%
Drugs - deductible equal to the dispensing fee applies	\$5,000 calendar year maximum	\$10,000 calendar year maximum
Paramedical Services	Overall maximum of \$800 per calendar year, with a maximum of \$400 per practitioner group	Overall maximum of \$1000 per calendar year, with a maximum of \$500 per practitioner group
Medical Services & Supplies	\$1,500 calendar year maximum combined for all services & supplies	\$2,000 calendar year maximum combined for all services & supplies

Basic

Enhanced

Extended Health Benefit - Other Services

Reimbursement (applies to Ambulance, Hospital and Emergency Out of Country)	100%	100%
Ambulance (Ground)	\$500 per calendar year	\$500 per calendar year
Hospital, Semi-Private	\$500 per calendar year	\$1,000 per calendar year
Emergency Out of Country/ Travel Assist	30 Day Trip Limit \$1,000,000 Lifetime	30 Day Trip Limit \$1,000,000 Lifetime
Termination	Earlier of retirement or employee age 70, dependent children at age 21	Earlier of retirement or employee age 70, dependent children at age 21

Vision Care Benefit

No deductible applies to any portion of the Vision Care Benefit Maximums apply individually to each employee and dependent		
Reimbursement	Not available	100%
Frames, Lenses & Contacts	Not available	\$150 per 24 consecutive months
Termination	Not available	Earlier of retirement or employee age 70, dependent children at age 21

Dental Care Benefit

No deductible applies to any portion of the Dental Care Benefit Maximums apply individually to each employee and dependent Maximums will be reduced by 50% in the first policy year for groups effective from July 1 through December 31.		
Basic Reimbursement	80%	90%
Major Reimbursement	Not available	50%
Calendar Year Maximum	\$1,000	\$1,500 combined basic & major
Recall Exam	9 Months	9 Months
Scaling	10 Units per calendar year	10 Units per calendar year
Fee Guide	Current General Practitioner for Province of Residence	Current General Practitioner for Province of Residence
Termination	Earlier of retirement or employee age 70, dependent children at age 21	Earlier of retirement or employee age 70, dependent children at age 21

Key Elements Overview

Employee Life Insurance

- Coverage provided is a Flat Benefit amount
- Benefit amount **does not reduce** because of age
- Conversion Privilege available to age 65
- Reduction in premium available if approved for LTD Claim
- Coverage terminates at the earlier of retirement or age 70

Employee Accidental Death Insurance

- Coverage provided is a Flat Benefit amount
- Benefit amount **does not reduce** because of age
- Coverage terminates at the earlier of retirement or age 70

Employee Long Term Disability

- Coverage provided is a Flat Benefit amount, depending on the plan chosen and minimum salary requirements
- **Definition of Disability is 5 year own occupation**
- Critical Illness feature included
- POSACTION Plus™ services included
- Reduction in premium available if approved for LTD Claim
- The benefit is non taxable providing employees pay a minimum of 15% of the monthly premium for either the **Diversity Basic or Enhanced** Benefit Plan
- Coverage terminates at the earlier of retirement or age 65 minus the qualifying period
- Pre-existing condition clause may apply

Extended Health Benefit

- Coverage available for employee and dependents
- Maximums and Reimbursement vary by plan design
- Drugs provided on a Pay Direct Drug Card basis with dispensing fee deductible

Extended Health Benefit (con't)

- Paramedical Coverage broken into two groups:
 1. Chiropractors, Physiotherapists, Massage Therapists and Acupuncturists
 2. Osteopaths, Chiropodists or Podiatrists, Naturopaths, Psychologists, Speech Therapists, Dieticians, Audiologists, Ophthalmologists or Optometrists for Eye-exams

Expenses for services of each group of practitioners is subject to a maximum.

- Medical Services and Supplies include but are not limited to: Custom-made Orthopedic Shoes and Foot Orthotics, Hearing Aids, Surgical Bras, and Surgical Stockings. Some individual maximums apply.
- Annual maximum is reduced by 50% in the first policy year for groups with an effective date from July 1 through December 31.
- Coverage for the employee and spouse terminates at the earlier of employee retirement or age 70, or attained age of 21 for dependent children

Extended Health Benefit Other Services

- **No deductible applies**
- Ambulance Services – Ground Transportation
- Semi-Private Hospital
- Emergency Out of Country Coverage and Travel Assistance
- Out of Country Coverage and Travel Assistance - coverage is limited to maximum of 30 days and \$1,000,000 overall. Other restrictions and limitations may apply.

Vision Care Benefit

- Available with **Diversity Enhanced**
- Coverage available for employee and dependents
- **No deductible** applies
- Eye Glasses and Contact Lenses
- Coverage for the employee and spouse terminates at the earlier of employee retirement or age 70, or attained age of 21 for dependent children

Dental Care Benefit

- Coverage available for employee and dependents
- **No deductible** applies to any Dental coverage
- Maximums and Reimbursement vary by plan design
- Basic Dental Coverage included in all Dental plans include but are not limited to: examinations and x-rays, cleaning and fluoride treatments, routine extractions and fillings, root canals, denture repair, periodontal treatment, surgical procedures performed by dentist, including anesthetics
- Coverage for the employee and spouse terminates at the earlier of employee retirement or age 70, or attained age of 21 for dependent children
- Annual maximum is reduced by 50% in the first policy year for groups with an effective date from July 1 through December 31.
- **Diversity Enhanced** includes Major Dental Coverage. These services include but are not limited to: bridges and crowns, full/partial dentures, inlays and onlays, including veneers