<u>Grandparented Former Metro</u>

| Benefit | Former Municipality of Metropolitan Toronto – Under age 65 | |
|--|--|---|
| ELIGIBILITY | to age 65 | Toronto - Over age 65 |
| LIFE INS. | 10000 | Lifetime |
| Coverage Optional Life | 3x annual salary | A |
| Optional Life Dependent Life | Nil | \$5,000 flat amount |
| AD&D | Nil | Nil |
| Coverage | | Nil |
| Cost | Nil | 379 |
| LTD | N/A | Nil N/A |
| Coverage | | IN/A |
| Maximum | Nil | Nil |
| Tax Status of Disability Income | N/A | N/A |
| nflationary Adjustment | N/A | N/A |
| HEALTH | N/A | N/A |
| | | *Annual maximum of \$15,000 |
| Reimbursement of Bligible Expenses | 1009/ | 7 |
| (+ | 100% | 100% |
| Deductible Programme Transfer of the Program | Nil | |
| News 21 | **** | Nil |
| Orug Coverage | Generic Prescription | |
| Iospital - | | *Nil |
| roahitai a | Semi-Private | Semi P. L. |
| Vision Benefit | | Semi-Private |
| Bonont | \$200/18 mos. | \$175/24 mos. |
| learing Alds | феродо и | Ψ173724 mos. |
| 37 | \$500/family/year | \$400/family/year |
| ut of Country | Van Durana | |
| • | Yes - Emergency Only | Nil |
| rivate Duty Nursing | Unlimited | 3 |
| gramadit | | \$6,000/Lifetime maximum |
| <u>aramedical</u> | 1 | 1 |
| lassage Therapy | | 1 |
| | Maximum \$7.00 per visit to a maximum | Maximum \$7.00 per visit to a maximum |
| | of 12 visits per year | of 12 visits per year |
| ychologist | \$35.00 Tultura 1 to 1 | A SECRETARIAN SECTION |
| | \$35.00 Initial visit. Maximum \$20.00 | \$35.00 Initial visit. Maximum \$20.00 |
| | each subsequent visit to a maximum of \$200 per year | each subsequent visit to a maximum of |
| | φ200 per year | \$200 per year |
| iropractor | Maximum \$15.00 per visit to a combined | 3 |
| | maximum of \$250 per year (after OHIP)* | Maximum \$15.00 per visit to a combined |
| | * was per year (aner OHIP)* | maximum of \$200 per year (after |
| teopath | 1200 | OHIP)** |
| wohatii | Maximum \$15.00 per visit to a combined | Maximum \$15.00 1.14 |
| | maximum of \$250 per year (after OHIP)* | Maximum \$15.00 per visit to a combined maximum of \$200 per year (after |
| | | OHIP)** |
| eech Therapist | No | Security V |
| - | Maximum \$200 per year | Maximum \$200 per year |
| ysiotherapist | Unlimited | |
| | | Unlimited |
| diatrist/Chiropodist | Maximum \$15.00 per visit to a combined | Marinum dis an |
| ENTAL | maximum of \$250 per year (after OHIP)* | Maximum \$15.00 per visit to a combined |
| IN I FALL | E Sem fatter OHIF) | max. of \$200 per year (after OHIP)** |
| sic Coverage | 1 | |
| fillings, cleaning) | 100% reimbursement. Unlimited | 100% reimbursement, unlimited. |
| 3-,iiii | * | and a second a second and a second a second and a second a second and a second and a second and |
| jor Coverage | 100% raimburgan | |
| Chicago Carlos Company | 100% reimbursement. \$2,000 maximum per benefit year | Prosthodontic procedures limited to |
| crowns) | Pay concret Acut | denture adjustments, repairs, rebasing and |
| crowns) | 19-00/70/28/01 6 1/00/01 | and administration, repairs, repasting and |
| * | es-portroles es en partir s | relining are eligible |
| hodontic Coverage braces) | 100% reimbursement. \$4,000 lifetime maximum (combined orthodontic & | relining are eligible Nil. |

^{*}Subject to certain exceptions when dispensed outside of Ontario
**Overall Combined Paramedical Practitioner Coverage of \$200 per benefit year (after OHIP)
includes coverage for registered and licensed Osteopaths & Podiatrists/Chiropodists