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PRESCRIPTION DRUGS	
Maximum	Year 1 & 2: \$2,500 Year 3+: \$3,500 per year Paid at 80% Pay-Direct card

DENTAL		
Maximums	Not included	
Recall Frequency	Not included	
Basic services	Not included	
Comprehensive basic services	Not included	
Major services	Not included	
Orthodontic services	Not included	

EXTENDED HEALTH		
Accidental Dental	\$5,000 per year	
Ambulance Transportation	Includes land air	
Hearing Aids	Year 1-4: \$350 every 4 years Year 5+: \$500 every 4 years thereafter	
Medical Services Diagnostic tests and x-rays, dialysis equipment, laboratory tests	\$2,000 per year	



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Medical Items and Home Support Services (in-home nursing) Separate maximums for Medical Items and Home Support Services	Year 1: \$2,000 Year 2: \$3,000 Year 3: \$4,000 Year 4+: \$5,000 per year thereafter	
Professional Services/ Registered Therapists Maximums per practitioner	\$400 per year \$20 per visit	
Acupuncturist, Chiropractor, Chiropodist/ Podiatrist, Massage Therapist, Naturopath, Osteopath Physiotherapist Psychologist, Speech Therapist	\$400 per year	
Vision Prescription eyeglasses, contact lenses, laser eye surgery	\$150 every 2 years	
Eye Examination	\$80 every 2 years	
Emergency Travel Out-of-Province/ Country coverage	First 15 days of trip \$5,000,000 per year	

Health Assist ZONE

ZONE 4 - MODERATE HEALTH, TRAVEL, ESSENTIAL DRUG

(Medical underwriting is required)

PRESCRIPTION DRUGS

Benefits include prescription drugs approved for use in Canada that require a prescription by law and have been prescribed by an authorized medical practitioner.

Brand name drugs covered if no generic equivalent exists.

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Coverage does not include smoking cessation products or drugs for the treatment of obesity, infertility, and erectile dysfunction.

For Quebec residents: To be eligible for the ZONE prescription drug coverage, you must be covered by the RAMQ (Régie de l'assurance maladie du Québec) plan. Your prescription drug claims must be submitted to RAMQ first. When RAMQ reimburses a portion of the drug cost, unpaid balances (including co-payments and deductibles) will be co-ordinated so that you may be reimbursed up to 100% of the eligible expense incurred. If the drug is not covered by RAMQ, the standard co-pay applies.

DENTAL

Basic services (Not included)

- Preventive cleaning
- Routine examinations, x-rays
- Fillings and extractions
- Fluoride treatment for children

Comprehensive basic services (Not included)

- Endodontic treatment root canal therapy
- Periodontal treatment scaling and root planing, occlusal adjustment, and equilibration
- Denture repairs, rebasing, and relining

Major services (Not included)

Payable in Year 3

- Crowns and onlays
- Dentures
- Bridgework

Orthodontic services (Not included)

Payable in Year 3

Orthodontic treatment to straighten teeth and correct the bite



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EXTENDED HEALTH

Medical Items include:

- Aids for daily living (such as hospital style beds, IV stand, trapeze, bedpan)
- Braces, casts, catheters, and ostomy supplies
- Compression stockings
- Diabetic supplies
- Custom made boots or shoes, custom made foot orthotics
- Mobility aids (such as canes, crutches, walkers, wheelchairs)
- Prosthetics
- Respiratory/Cardiology items (such as breathing and heart monitors for infants, compressors, oxygen)

Hospital Accommodation

(Medical underwriting is required)

This option is available on all plans.