



## Plan Overview

Jan 20, 2025

GTN Technical Staffing Ltd

Policy Number: 62665

## Life Insurance

Class	Coverage	Details
2	10,000.00 Maximum	\$10,000.00 Flat Amount \$10,000.00 Maximum With Evidence \$10,000.00 Maximum No Evidence Reduces by 50% at age 65 Early Payment Privilege: Equal to the lesser of \$50,000 or 50% of the Plan Member Life Amount coverage 0 month waiting period Minimum of 20 hours per week required Terminates at age 70
1	10,000.00 Maximum	\$10,000.00 Flat Amount \$10,000.00 Maximum With Evidence \$10,000.00 Maximum No Evidence Reduces by 50% at age 65 Early Payment Privilege: Equal to the lesser of \$50,000 or 50% of the Plan Member Life Amount coverage 0 month waiting period Minimum of 20 hours per week required Terminates at age 70
3	10,000.00 Maximum	\$10,000.00 Flat Amount \$10,000.00 Maximum With Evidence \$10,000.00 Maximum No Evidence Reduces by 50% at age 65 Early Payment Privilege: Equal to the lesser of \$50,000 or 50% of the Plan Member Life Amount coverage 0 month waiting period Minimum of 20 hours per week required Terminates at age 70

## Accidental Death and Dismemberment

Class	Coverage	Details
2	10,000.00 Maximum	\$10,000.00 Maximum With Evidence \$10,000.00 Maximum No Evidence \$10,000.00 Flat Amount Reduces by 50% at age 65 0 month waiting period Minimum of 20 hours per week required Terminates at age 70
1	10,000.00 Maximum	\$10,000.00 Maximum With Evidence \$10,000.00 Maximum No Evidence \$10,000.00 Flat Amount Reduces by 50% at age 65 0 month waiting period Minimum of 20 hours per week required Terminates at age 70
3	10,000.00 Maximum	\$10,000.00 Maximum With Evidence \$10,000.00 Maximum No Evidence \$10,000.00 Flat Amount Reduces by 50% at age 65 0 month waiting period Minimum of 20 hours per week required Terminates at age 70

## Dental

Class	Coverage	Details
2	80% Reimbursement	\$1,000.00 Basic Maximum 80% Routine Care Reimbursement 80% Endodontics Reimbursement 80% Periodontics Reimbursement 10 Units of Scaling Routine Care Visit Every 9 months 24 months survivor benefit 0 month waiting period Minimum of 20 hours per week required Terminates at age 70
1	N/A	N/A
3	80% Reimbursement	\$1,000.00 Basic Maximum 80% Routine Care Reimbursement 80% Endodontics Reimbursement 80% Periodontics Reimbursement 10 Units of Scaling Routine Care Visit Every 9 months 24 months survivor benefit 0 month waiting period Minimum of 20 hours per week required Terminates at age 70

Drugs		
Class	Coverage	Details
2	N/A	N/A
1	80% Coverage	80% Reimbursement \$5,000.00 Overall Maximum Mandatory Generic Substitute 0 month waiting period Minimum of 20 hours per week required Terminates at age 70
3	80% Coverage	80% Reimbursement \$5,000.00 Overall Maximum Mandatory Generic Substitute 0 month waiting period Minimum of 20 hours per week required Terminates at age 70

## Healthcare

Class	Coverage	Details
2	N/A	80% Major Health Reimbursement \$700.00 Hearing Aids Maximum over a 48 month period Artificial Eye/Limb: Initial prosthesis; 1 per lifetime \$2,000.00 Apnea Machine Maximum; 1 per 60 consecutive months \$5,000.00 Insulin Pump Maximum per 5 calendar years \$100.00 Blood Pressure Monitor Lifetime Maximum \$100.00 Compression Stockings Maximum \$3,500.00 Insulin Pump Supplies Maximum \$1,000.00 Artificial Eye/Limb Repair/Replacement Maximum \$4,000.00 Glucose Monitoring Equipment and Supplies Maximum \$3,500.00 TENS Machine Lifetime Maximum \$600.00 Viscosupplementation Maximum \$1,000.00 Wheelchair - Manual Lifetime Maximum \$3,000.00 Wheelchair - Electric Lifetime Maximum \$500.00 Wigs Lifetime Maximum \$500.00 Cardiac Rehabilitation Maximum
1	80% Paramedical Coverage	\$300.00 Foot Orthotics Maximum 300.00 Orthopedic Shoes Maximum \$10,000.00 Private Duty Nursing Maximum \$25,000.00 Prosthetics Lifetime Maximum Reasonable and Customary Expenses: Ambulance Services Hospital Medical Equipment Medical Services and Supplies Apnea Machine Supplies Apnea Mask Braces With Rigid Supports Crutches IPP Breathing Machine Ostomy Supplies Surgical Bra 80% Paramedical Reimbursement \$350.00 Acupuncturist Maximum \$350.00 Audiologist Maximum \$350.00 Chiropractor Maximum \$350.00 Massage Maximum

\$350.00 Naturopath Maximum  
\$350.00 Occupational Therapist Maximum  
\$350.00 Physiotherapy Maximum  
\$350.00 Registered Dietician Maximum  
\$350.00 Speech Therapy Maximum  
\$350.00 Psychologist Maximum  
\$350.00 Psychotherapist Maximum  
\$350.00 Social Worker Maximum  
\$350.00 Chiroprapist Maximum  
\$350.00 Osteopath Maximum  
\$350.00 Podiatrist Maximum  
100% Eye Exam Reimbursement  
\$120.00 Adult Eye Exam Maximum over 24 months  
\$120.00 Child Eye Exam Maximum over 12 months  
100% Eye Glasses & Contacts Reimbursement  
\$300.00 Adult Eye Glasses & Contacts Maximum over a  
24 month period  
\$300.00 Child Eye Glasses & Contacts Maximum over a  
12 month period  
0 month waiting period  
Minimum of 20 hours per week required  
Terminates at age 70

**80%**  
Paramedical Coverage

- 80% Major Health Reimbursement
- \$700.00 Hearing Aids Maximum over a 48 month period
- Artificial Eye/Limb: Initial prosthesis; 1 per lifetime
- \$2,000.00 Apnea Machine Maximum; 1 per 60 consecutive months
- \$5,000.00 Insulin Pump Maximum per 5 calendar years
- \$100.00 Blood Pressure Monitor Lifetime Maximum
- \$100.00 Compression Stockings Maximum
- \$3,500.00 Insulin Pump Supplies Maximum
- \$1,000.00 Artificial Eye/Limb Repair/Replacement Maximum
- \$4,000.00 Glucose Monitoring Equipment and Supplies Maximum
- \$3,500.00 TENS Machine Lifetime Maximum
- \$600.00 Viscosupplementation Maximum
- \$1,000.00 Wheelchair - Manual Lifetime Maximum
- \$3,000.00 Wheelchair - Electric Lifetime Maximum
- \$500.00 Wigs Lifetime Maximum
- \$500.00 Cardiac Rehabilitation Maximum
- \$300.00 Foot Orthotics Maximum
- 300.00 Orthopedic Shoes Maximum
- \$10,000.00 Private Duty Nursing Maximum
- \$25,000.00 Prosthetics Lifetime Maximum
- Reasonable and Customary Expenses:
  - Ambulance Services
  - Hospital
  - Medical Equipment
  - Medical Services and Supplies
  - Apnea Machine Supplies
  - Apnea Mask
  - Braces With Rigid Supports
  - Crutches
  - IPP Breathing Machine
  - Ostomy Supplies
  - Surgical Bra
- 80% Paramedical Reimbursement
- \$350.00 Acupuncturist Maximum
- \$350.00 Audiologist Maximum
- \$350.00 Chiropractor Maximum
- \$350.00 Massage Maximum
- \$350.00 Naturopath Maximum
- \$350.00 Occupational Therapist Maximum
- \$350.00 Physiotherapy Maximum
- \$350.00 Registered Dietician Maximum
- \$350.00 Speech Therapy Maximum
- \$350.00 Psychologist Maximum



\$350.00 Psychotherapist Maximum

\$350.00 Social Worker Maximum

\$350.00 Chiroprapist Maximum

\$350.00 Osteopath Maximum

\$350.00 Podiatrist Maximum

100% Eye Exam Reimbursement

\$120.00 Adult Eye Exam Maximum over 24 months

\$120.00 Child Eye Exam Maximum over 12 months

100% Eye Glasses & Contacts Reimbursement

\$300.00 Adult Eye Glasses & Contacts Maximum over a  
24 month period

\$300.00 Child Eye Glasses & Contacts Maximum over a  
12 month period

0 month waiting period

Minimum of 20 hours per week required

Terminates at age 70

## Out Of Country

Class	Coverage	Details
2	N/A	N/A
1	\$5,000,000.00 Maximum	\$5,000,000.00 Out of Country/Province Maximum 60 Day Out of Country/Province Period 0 month waiting period Minimum of 20 hours per week required Terminates at age 70
3	\$5,000,000.00 Maximum	\$5,000,000.00 Out of Country/Province Maximum 60 Day Out of Country/Province Period 0 month waiting period Minimum of 20 hours per week required Terminates at age 70