



JEUNE BARREAU DE MONTRÉAL
YOUNG BAR OF MONTREAL

Competitive
Prices



Added-Value
Coverage

Personalized
Service



PROGRAM SUMMARY

May 2017 - Policy number 32385

Program administered by

 **médicassurance**

HELP MAINTAIN YOUR FINANCIAL STABILITY

with the Young Bar of Montreal's insurance program

Why you need insurance?

The Young Bar of Montreal understands the importance of providing financial security for your loved ones – and peace-of-mind for you. Comprehensive insurance coverage can provide you with a solid foundation of protection to help maintain a comfortable lifestyle for you and your family should an accident or illness prevent you from working. That's why the Young Bar of Montreal has partnered with MédicAssurance Inc. to offer you a quality insurance program that combines the flexibility of individual insurance with the price advantage of group insurance. As a member of the Young Bar of Montreal you have access to these important and affordably-priced insurance benefits.

Extended Health Care, Drugs insurance and Dental insurance

Comprehensive yet cost effective solutions for your health care needs

The program's Extended Health Care (EHC), Drugs insurance and Dental insurance plans provide coverage for a range of medically necessary health expenses which are not covered by your provincial health care plan. Whether you need prescription medications, emergency medical assistance when you're travelling outside the province, or dental care, EHC and Dental coverage can help cover your costs.

Critical Illness insurance

Because the right protection is critical

Advances in medical technology are making the chances of surviving the increasing incidence of a life-threatening illness greater than ever. The physical and emotional impact of being diagnosed with a critical illness is hard enough to endure. But what about the financial impact? The loss of employment income and the cost of medical treatments not covered by provincial or private health plans can put your financial security and independence at risk. Critical Illness insurance is designed to help give you peace-of-mind so you can concentrate fully on what matters most – your recovery.

GENERAL INFORMATION

Exclusive member benefit

The Young Bar of Montreal's insurance program is offered exclusively to members. You are eligible to apply if you are:

- a member of the Young Bar of Montreal;
- working as a lawyer 20 hours or more weekly;
- under 65, and;
- reside in Canada.

Coverage will become effective the first day of the month following the reception of your completed application.

Coverage for your dependents

If you required couple, single parent or family coverage, your spouse and children will be automatically covered by Drug insurance. If you required Extended Health Care and/or Dental insurance coverages (options 2, 3, 5 or 6), these coverages will automatically be extended to them.

Spouse means your spouse by marriage or under any other formal union recognized by law, or a person of the same or opposite sex with whom you have cohabited for at least twelve months, and who has been publicly represented as your spouse. The minimum cohabitation period does not apply if a child is born from this relationship.

Dependent child means a child, other than a foster child, of yours or your spouse, who is not married or in any other formal union recognized by law, under age 18, or age 26 if a full-time student and entirely dependent on you for support, or of any age if incapable of self-support because of physical or mental disability. However, the physical or mental disability had to be declared before the age of 18 and during the time the child had been recognized as a dependent.

Termination of coverage

Coverage will terminate on the earliest of the following:

- the date of the policy termination
- the date you no longer meets eligibility requirements as member
- the date the premium payment is in default
- the date of the last day of the month following receipt of a 30-day written notice from you
- the date you reach the age 65

Management and administration of the program

MédicAssurance Inc. administers the Young Bar of Montreal's insurance program, and is available to answer questions regarding the coverage and provide any necessary forms. The insurer of this plan is Assumption Life.

This summary provides the highlights, but not all the details of the insurance program. The complete terms, conditions exclusions and limitations governing the insurance coverage are found in the group insurance policy issued to the Young Bar of Montreal by Assumption Life.

PLAN BENEFITS AND FEATURES

Drug insurance

The prescription drugs covered are those appearing on the RAMQ list. The prescription drugs are reimbursed at the lowest price (**Bill 28**) and generics are compulsory. Any request for payment for an exceptional medication or patient must be sent to MédicAssurance for authorization in advance by the insurer.

Deductible and reimbursement level

Basic Option	
Deductible	Maximum annual contribution established by RAMQ* *Adjusted on July 1 of each year
Reimbursement percentage	100% of the lowest price
Payment type	Direct payment

Option 1	
Deductible	\$200 per calendar year – individual \$300 per calendar year – couple, single-parent or family
Reimbursement percentage	100% of the lowest price for generic drugs 70% of the lowest price for brand-name drugs
Payment type	Direct payment

Option 4	
Deductible	\$900 per calendar year – individual, couple, single-parent or family
Reimbursement percentage	100% of the lowest price
Payment type	Direct payment

Extended health care insurance

Drug insurance included (Travel insurance included)

Deductible and reimbursement level

Eligible expenses are reimbursed at the following levels:

Options 2 and 3	
Deductible	\$200 per calendar year – individual \$300 per calendar year – couple, single-parent or family Applicable to drugs and extended health care expenses excluding hospital expenses and expenses incurred outside the province
Reimbursement percentage	100% of the lowest price for generic drugs 70% of the lowest price for brand-name drugs 100% for hospital and out of province expenses 80% for all other eligible expenses
Paramedical services	Maximum reimbursable \$400 per specialist per calendar year
Payment type	Direct payment

Options 5 and 6	
Deductible	\$900 per calendar year – individual, couple, single-parent or family Applicable to drugs and extended health care expenses excluding hospital expenses and expenses incurred outside the province
Reimbursement percentage	100% of the lowest drug price 100% for hospital and out of province expenses 80% for all other eligible expenses
Paramedical services	Maximum reimbursable \$400 per specialist per calendar year
Payment type	Direct payment

Below is a summary of expenses eligible under this coverage. These expenses are subject to the deductible and co-insurance.

Covered expenses	Maximum
Alcoholism, Drug Addiction Treatment	\$80 per day - lifetime maximum of \$2,500
Ambulance	Unlimited (air transport: \$2,000)
Blood Glucose Meter	\$300 per 36 months period
Dental Surgery / Accident	Unlimited
Eye Exam	\$50 per 24 months period
Hair Prosthesis	\$150 lifetime
Hearing Aids	\$300
Hospitalization (semi-private room)	Maximum of 180 days
Intra Uterine Device	\$60 per 24 months period
Laboratory Tests and X-rays	\$500
Mastectomy Prosthesis	\$200 per 24 months period
Miscellaneous Renting Fees	Reasonable maximum (1)
Orthopaedic Shoes and Orthotics	\$200
Paramedical Services	Maximum reimbursable amount is \$400 per calendar year, per specialist: acupuncturist, chiropractor (X-rays taken by chiropractor not included), dietician, hearing therapist, massage therapist, masseur*, naturopath, occupational therapist, ortho-therapist, osteopath, physiotherapist, podiatrist, psychologist and speech therapist. *Medical referral required for the massage therapy.
Private Duty Nursing	\$5,000
Rehabilitation Center and Convalescent Home (semi-private room)	Lifetime maximum of 180 days
Sclerosing Injections	\$25 per treatment
Support Hose	\$80
Surgical Brassieres	\$200
Transcutaneous Electrical Nerve Stimulator T.E.N.S.	\$500 lifetime

The maximum applies per calendar year unless otherwise specified and by insured. (1) Eligible expenses under the Health Insurance benefit are those reasonably incurred and justified by the serious-ness of the case as well as by current medical practice and the customary and reasonable charges applicable in the area.

Travel insurance (included with options 2, 3, 5 and 6)

Hospital and medical insurance, trip cancellation and interruption insurance

If you or your family suffers an unexpected medical emergency out of province in which you live, you may be covered for medical assistance and other family services and support provided by Hospital and Medical Insurance coverage. This coverage reimburses hospitalization expenses for a semi-private room and certain expenses occurring during emergencies when the insured is outside his province of residence for a stay not expected to exceed 60 consecutive days.

The medical/hospital insurance does not cover losses or expenses wholly or partially related, directly or indirectly, to any illness, injury or medical condition (other than a minor condition) that was not stable during the 90 days that preceded the departure date.

The annual maximum reimbursement for eligible out-of-province expenses is \$5,000,000 per trip, per participant. For travel cancellation or interruption insurance, the benefit is \$5,000 per trip, per insured.

Dental insurance

The insured must enrol for a minimum of 2 years. If the coverage is cancelled, the insured will have to wait for 2 years before it can be restored.

Deductible

No deductible will be applied to eligible incurred expenses.

Reimbursement level

80% of the cost of eligible expenses will be reimbursed. Reimbursement will be based on the current Dental Association Fee guide for General Practitioners in the province of Quebec.¹

Covered expenses will be reimbursed to an annual combined maximum of \$500 per person in the first year of coverage, \$1,000 per person in the second year of coverage, and \$1,500 per person thereafter.

Eligible expenses

Below is a summary of expenses reimbursable under this coverage. These expenses are subject to the co-insurance.

Basic treatments Diagnostic, Prevention, Mino restoration, Extraction and Medication.	<ul style="list-style-type: none">• Complete examination, once every 6 months• Recalls, once every six months• Scaling, once every six months• Extractions• Reline and rebase of removable prosthodontics, once every 6 months• Fillings• Antibiotics related to dental procedures
Endodontics, Periodontics, Surgery, General anaesthesia.	<ul style="list-style-type: none">• Root canal treatments• Immobilization of loose teeth due to injuries• Treatment of gingival and supporting tissues• Gingival curettage and tissue debridement; root planing• Oral surgery; fractures and luxations; postoperative care• General anaesthesia for oral surgery

¹ Fee Guide and Description of Dental Treatment Services published by the Association des chirurgiens dentistes du Québec (ACDQ)

Critical Illness Insurance (included in the options 1, 2, 3, 4, 5 and 6)

Nowadays, people live longer, thanks to healthier lifestyles and medical progress.

While more people now escape diseases once considered deadly, a disturbing number of Canadians will suffer from a critical illness at some time in their life¹.

- 1 Canadian in 2 will suffer from some form of heart disease
- 1 Canadian in 3 will have a life-threatening type of cancer
- 1 Canadian in 4 will suffer from kidney failure
- 1 Canadian in 20 is at risk of a stroke before the age of 70
- 1 in 500 will suffer from multiple sclerosis.

Solution

Critical illness insurance has been developed in response to these needs and to reduce the stress and financial burden that often accompany the diagnosis of a critical illness.

Amount of coverage

\$10,000 included within each of the options, with no declaration of health required. Coverage offered to the subscriber only.

Critical illnesses covered		
<ul style="list-style-type: none">• Aortic surgery• Aplastic anemia• Benign brain tumor• Blindness• Cancer• Coma• Coronary bypass• Deafness• Dementia, including Alzheimer's	<ul style="list-style-type: none">• Heart attack• Heart valve replacement or repair• HIV infection contracted at work• kidney failure• Loss of autonomy• Loss of limbs• Loss of speech	<ul style="list-style-type: none">• Motor neuron disease• Multiple sclerosis• Paralysis• Parkinsonism• Purulent meningitis• Severe burn• Stroke• Vital organ failure on waiting list• Vital organ transplant

¹Source: Heart and Stroke Foundation, Canadian Cancer Society and Statistics Canada Exclusions

Exclusions

This insurance does not apply and no benefit will be paid if the critical illness results, directly or indirectly, from one of the following causes:

- suicide or attempted suicide by the insured, whether or not in sound mind
- acts of self-mutilation and physical or mental injuries self-inflicted by the insured, whether or not in sound mind
- the perpetration or attempt at perpetration of a criminal act
- (or the fact of committing or attempting to commit a criminal act)
- driving a vehicle with a blood alcohol level exceeding 80 mg of alcohol per 100 ml of blood or the limit allowed by law
- the inhalation of toxic gases, unless that occurs as part of the insured's normal occupational duties
- the consumption of drugs, pharmaceutical products or legal substances except if they are taken in accordance with recommendations and according to the prescription of a duly qualified physician or a duly authorized pharmacist
- consumption by the insured of illegal drugs
- a cosmetic procedure or any other treatment mainly of a cosmetic nature
- injuries incurred during participation by the insured person in civil unrest, a riot, an insurrection or a military operation, whether or not war has been declared

For the purposes of this insurance, included in moments when the insured is not of sound mind are all situations in which they are under the influence of a narcotic, drug, medication or alcohol as well as any disorder or mental state that prevents the insured from forming an intention.

Pre-existing conditions

When the total disability occurs within 24 months from the date on which the subscribed has become insured under this coverage or comparable coverage from another policy, no benefit will be paid under this coverage if, during the 24 months preceding the coming into force of it or of the comparable coverage, as appropriate, the subscriber, for any symptom, condition or illness, whatever its diagnosis, associated with the disease causing the disability for which benefits are claimed under this coverage, has:

- consulted a healthcare professional
- received medical care
- taken drugs prescribed by a physician



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