

# Manitoba Government Retirees Plan Comparisons

## Extended Health Care (EHC)

	I. Blue Cross Coverage As of February 2019	II. MARGE EHC Plan, Travel, & Dental Options As of April 2019	
		BASIC Option	ENHANCED Option
Benefit Reimbursement	80% unless otherwise specified, R&C (individual limits apply)	80% of eligible Reasonable and Customary (R&C) expenses, unless otherwise specified (individual limits apply)	
Prescription Drug Coverage	<ul style="list-style-type: none"> <li>80% provincial formulary drugs</li> <li>\$1,500 <b>per family</b></li> <li>\$10 dispensing fee cap</li> <li><b>Direct pay drug card</b></li> </ul>	<ul style="list-style-type: none"> <li>80% provincial formulary &amp; LCA</li> <li>\$1,750 <b>per family</b></li> <li>\$10 dispensing fee cap</li> <li>8% mark-up limit</li> <li><b>Direct pay drug card</b></li> </ul>	<ul style="list-style-type: none"> <li>85% provincial formulary &amp; LCA</li> <li><b>PLUS 75% all other prescribed</b></li> <li>\$2,000 <b>per family</b></li> <li>\$12.50 dispensing fee cap</li> <li>8% mark-up limit</li> <li><b>Direct pay drug card</b></li> </ul>
Vision Care	None	None	<ul style="list-style-type: none"> <li>\$200 every 2 years</li> <li>Eye exams: 1 exam per 2 years (up to \$100)</li> </ul>
Hearing Aids	None	\$1,000 per 5 years	\$1,500 per 5 years
Private Duty Nursing	\$3,000 per year	\$5,000 per year	\$10,000 per year
Home Care	None	\$50 per day up to 10 days after a minimum 12-hour hospital stay	
Hospital	100% semi-private	100% semi-private	100% private
Ambulance (in prov.)	100% Reasonable and Customary; \$250 outside MB	100% Reasonable and Customary limits per occurrence; \$250 outside province	
Emergency Out-of-Province/Country	<p><b><u>Terminates on 75<sup>th</sup> Birthday (Required Coverage as part of Health Plan)</u></b></p> <ul style="list-style-type: none"> <li>\$5,000,000 lifetime Maximum</li> <li>Multiple trips of 60 days per trip, no extensions. Any trip extended over 60 days will invalidate all coverage for trip.</li> <li><b>No Trip Cancellation Coverage</b></li> <li><b>90 day pre-existing condition limitation</b></li> </ul>	<p><b><u>Prestige Travel(Optional Coverage), only available with EHC Plan**, no termination age</u></b></p> <ul style="list-style-type: none"> <li>\$5,000,000 per policy year</li> <li><b>\$8,000 Trip Cancellation Coverage</b></li> <li>Base Plan covers multiple trips up to 62 days duration per trip outside of Canada</li> <li>Unlimited Travel within Canada.</li> <li>Supplemental Plan for single trips longer than 62 days outside of Canada</li> <li><b>No Pre-existing Condition</b> limitation on plan, covers <b>Sudden and Unforeseen emergencies.</b></li> </ul>	
Paramedical Coverage (Annual Limits/person)	<ul style="list-style-type: none"> <li>Athletic Therapy: \$100</li> <li>Dietitian/Nutritionist: \$350</li> <li>Physiotherapy: \$350</li> <li>Podiatry: \$350</li> <li>Psychology: \$350</li> </ul>	<ul style="list-style-type: none"> <li>\$75 per visit; \$750 combined:</li> <li>- Acupuncturist</li> <li>- Athletic Therapist</li> <li>- Chiropractor*</li> <li>- Dietitian</li> <li>- Massage Therapist*</li> <li>- Nutritionist</li> <li>- Naturopath</li> <li>- Osteopath</li> <li>- Physiotherapist*</li> <li>- Podiatrist / Chiropodist</li> <li>- Psychologist</li> <li>- Speech Therapist</li> </ul> <p>*\$500 combined maximum</p>	<ul style="list-style-type: none"> <li>\$75 per visit; \$1,200 combined:</li> <li>- Acupuncturist</li> <li>- Athletic Therapist</li> <li>- Chiropractor*</li> <li>- Dietitian</li> <li>- Massage Therapist*</li> <li>- Nutritionist</li> <li>- Naturopath</li> <li>- Osteopath</li> <li>- Physiotherapist*</li> <li>- Podiatrist / Chiropodist</li> <li>- Psychologist</li> <li>- Speech Therapist</li> </ul> <p>*\$750 combined maximum</p>
Prescribed Health Educational Programs	<b>Cardiac Rehabilitation only</b> to a lifetime maximum of \$300	Lifetime maximum of \$300 per person for <b>any prescribed health education program</b> – cardiac, COPD, diabetes etc.	
Foot Orthotics / Orthopedic Shoes	\$300 per calendar year maximum.	\$500 every 2 years maximum	\$500 every 2 years maximum

## Extended Health Care (EHC) Continued

	I. Blue Cross Coverage As of February 2019	II. MARGE EHC Plan, Travel, & Dental Options As of April 2019	
		BASIC Option	ENHANCED Option
Medical Aids & Appliances / Diagnostics	<p>Covered at 80% (some internal limits apply):</p> <ul style="list-style-type: none"> <li>Prosthetic and Remedial Equipment, as listed in the Blue Cross Brochure (page 5)</li> <li>Medical Appliances, as listed in the Blue Cross Brochure Page 4</li> <li>Other medical equipment when prescribed by the attending physician, occupation therapist, physiotherapist or athletic therapist to a lifetime maximum of \$250 per person.</li> </ul>	<p>Covered at 80% (some internal limits apply):</p> <p><b>Note:</b> Some variations exist between plans. Medical Aids and Appliances needs vary by individual. On balance, this MARGE plan offering is similar to Blue Cross (Column I).</p> <p>In addition, the following MARGE Plan benefits do not appear in the Blue Cross list referred to in Column I:</p> <ul style="list-style-type: none"> <li>Incontinence supplies (\$200 per year)</li> <li>Visual enhancement equipment (\$200 per 2 calendar years), including optical scanner and hand held magnifier.</li> <li>CPAP (Continuous Positive Air Pressure) unit, including eligible supplies, to a maximum of \$2,000 per five calendar years.</li> </ul> <p>For more details of this coverage, please refer to the Certificate of Insurance posted on the website <a href="http://www.johnson.ca/marge">www.johnson.ca/marge</a> or call Johnson at <b>1-877-989-2600</b>.</p>	
Accidental Dental	Treatment to jaw and natural teeth commenced within 90 days of the accident. No maximum	Treatment to jaw and natural teeth commenced within 6 months of the accident; \$1,000 maximum	

## Dental Care Option (Only Available with EHC)

	I. Blue Cross Coverage As of February 2019	II. MARGE EHC Plan, Travel, & Dental Options As of April 2019	
		BASIC Option	ENHANCED Option
<p>Basic/Preventative Services and Minor Restorative</p> <p>Endodontics</p> <p>Periodontics</p>	<ul style="list-style-type: none"> <li>80%</li> <li>\$750 per year per person; includes: <ul style="list-style-type: none"> <li>Denture repairs/fillings</li> <li>2 recall exams per year</li> <li>1 unit polishing twice/yr</li> <li>Fluoride twice/yr</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>80%</li> <li>\$1,000 per year per person; includes: <ul style="list-style-type: none"> <li>Denture repairs/fillings</li> <li>2 recall exams per year</li> <li>1 unit polishing twice/yr</li> <li>8 units of scaling</li> <li>Fluoride twice/yr</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>85%</li> <li>\$1,000 per year per person; includes: <ul style="list-style-type: none"> <li>Denture repairs/fillings</li> <li>2 recall exams per year</li> <li>1 unit polishing twice/yr</li> <li>8 units of scaling</li> <li>Fluoride twice/yr</li> </ul> </li> </ul>
Major Restorative <u>in addition to Basic / Preventative</u>	None	None	<ul style="list-style-type: none"> <li>60%</li> <li>Additional \$1,000 per year Includes: <ul style="list-style-type: none"> <li>Crowns</li> <li>Posts</li> <li>Inlays/Onlays</li> <li>Implants</li> <li>Bridges</li> <li>Dentures</li> </ul> </li> </ul>