



Summary of Health & Dental Coverage

Benefit	Plan I	Plan II	Plan III	Retiree
Medical/Drugs				
Ambulance	Unlimited	Unlimited	Unlimited	Unlimited
Hospital	Semi-Private Room	Semi-Private Room	Semi-Private Room	Semi-Private Room
Prescription Drugs				
Co-insurance Covered	100%/Unlimited	100%/Unlimited	100%/Unlimited	80%/ \$5,000 per Cal. Year
Manitoba Formulary	Covers Pharmacare Deductible	Covers Pharmacare Deductible	Covers Pharmacare Deductible	Covers Pharmacare Deductible
Non-Formulary	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year
Travel Health Expense	\$5,000,000	\$5,000,000	\$5,000,000	\$5,000,000
Travel Trip Duration	90 Days	90 Days	90 Days	30 Days
Travel Termination Age	Age 70	Age 70	Age 70	Age 70
Professional Services				
Chiropractor	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year
Podiatrist	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year
Dietician	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year
Speech Therapist	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year
Physiotherapy	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year
Psychologist	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year	\$350/Calendar Year
Athletic Therapy	\$100/Calendar Year	\$100/Calendar Year	\$100/Calendar Year	\$100/Calendar Year
% Covered	100%	100%	100%	100%
Orthopedic Shoes	\$300/Annual Maximum	\$300/Annual Maximum	\$300/Annual Maximum	\$300/Annual Maximum
Deductible (Single or Family):				
• Ambulance/Hospital	Nil	Nil	Nil	Nil
• Pres. Drugs/Other Expenses	\$25/Calendar Year	Nil	Nil	\$25/Calendar Year
Vision Care				
Basic Glasses and Frames or Contacts (by choice)	Not Covered	\$200/24 Months	\$300/24 Months	Not Covered
Eye Exams	\$55/2 Years	\$65/2 Years	\$65/2 Years	\$55/2 Years
Dental Care				
Basic Services	50%	80%	100%	50%
Major Restorative Services	50%	60%	80%	50%
Basic & Major Restorative Combined Cal. Year Max.	\$1,000	\$1,500	\$1,500	\$1,000
Orthodontic Services	50%	50%	50%	Not Covered
Lifetime Maximum	\$1,000	\$1,500	\$1,500	Not Covered
Health and Dental				
Termination Age	No Maximum Age	No Maximum Age	No Maximum Age	No Maximum Age

Retiree Plan

- Available only to persons who were covered under the AMM Health and Dental Plan.
- Retiring employees must elect to participate within 30 days following retirement.
- Retiring councilors must elect to participate within 30 days following going off council.
- Member and spouse must remain a Manitoba resident to continue coverage.
- Premium payable by pre-authorized chequing only.