



RWTO/OERO Insurance Plans

Hospital & Home Care Plan

Personal Accidental Death
& Dismemberment Plan

Benefits of Membership

in The Retired Women Teachers of Ontario Organisation
des enseignantes retraitées de l'Ontario



Manulife



RWTO/OERO's Hospital and Home Care Plan

One of the biggest fears associated with being seriously ill or injured is the time we expect to spend in the hospital, away from family and friends. But hospital stays have shortened significantly and surgery may only be needed on an outpatient basis, if at all. Convalescing at home becomes a reality. Often there are unexpected costs attached to this, such as the need for home nursing care, special equipment, and transportation to and from the hospital or doctor's office.

It is for this reason that the RWTO/OERO established the Hospital and Home Care Insurance Plan. It supplements your provincial health plan and is different from your extended health care insurance. It provides you with financial assistance for the unexpected costs associated with getting well – so that you can return to your active lifestyle as soon as possible. With a range of benefits at an affordable cost, the plan has proven to be very popular with RWTO/OERO members.

The trend to shortened hospital stays can mean that you pay for expensive home care services yourself



Eligibility

Coverage is available to you, as an RWTO/OERO member in good standing, and your spouse. Each applicant must be insured under a provincial health plan. There are no age restrictions. Members and/or spouses who live in a facility that provides health care and convalescent services as part of the resident fee are not eligible.

Guaranteed Enrollment

If you apply within one year of the date of your retirement, you are guaranteed enrollment in the plan and do not need to complete a medical questionnaire. A pre-existing condition clause applies (see page 9).

When Is a Medical Questionnaire Required?

If you apply later than one year after your retirement date, you will be required to complete a medical questionnaire. Your application will be subject to approval by Manulife.

Your spouse must complete a medical questionnaire regardless of your retirement date.

Satisfaction Guarantee

If, upon receipt of your contract, you are not completely satisfied, the premium you have paid will be refunded, provided the policy is returned to Manulife within 10 days.

Detailed coverage information

Convalescent Benefit

Pays \$350 a month for up to 6 months when confined indoors following hospitalization for 3 or more days.

Pays \$72.50 per week for up to 4 weeks when confined indoors for convalescence following outpatient surgery or hospitalization of less than 3 days.

Home Nursing Benefit

Pays 80% of the incurred expense for nursing services at home, as a result of an injury or sickness and when recommended by a physician. Services are to be provided by a Registered Nurse, Practical Nurse, or a Personal Support Worker. Subject to a \$1,500 maximum for any one injury or sickness.

Fracture Benefit

Pays a scheduled amount depending on which bone is fractured. If more than one bone is fractured in a single injury, the amount payable is for the most severe fracture.

Examples of fracture benefit maximums as the result of any one accident include:

- hip \$200
- ankle \$200
- pelvis \$350

It is not necessary to have been hospitalized to obtain this benefit.

Cataract Surgery Benefit

Pays for the cost of prescribed pre- and post-operative medical supplies, including medications, sunglasses, lenses, frames, cataract testing and eye patches. Subject to a \$100 maximum per eye.

Comfort Care Benefit

Pays \$25 a day when confined to a hospital for the cost of non-medical "comfort" items such as rental of a television or

radio, telephone charges and/or reading materials. Subject to a \$600 maximum for any one injury or sickness.

Transportation Benefit

Pays for the cost of scheduled travel by bus, train, air, taxi or private passenger automobile to and from the hospital or doctor's office, following a period of hospital confinement or outpatient surgery (at the rate of \$0.35 per kilometre). This includes coverage for cost of transportation by volunteer drivers for the Canadian Cancer Society to a maximum of \$100. Subject to a \$350 maximum for any one injury or illness.

Pays for the cost of scheduled bus, train or private passenger automobile expenses including parking costs for a member of your immediate family (at the rate of \$0.35 per kilometre) to visit you while you are hospitalized. (You must be hospitalized for 7 days or more, and be more than 150 kilometres from home.) Subject to a \$350 maximum for any one injury or sickness.

Ambulance/Taxi Benefit

Pays for the cost of an ambulance or taxi to and/or from hospital confinement and/or outpatient treatment. Subject to a \$45 maximum for any one injury or sickness, and to a benefit year maximum of \$135.

Physician Validation Benefit

Pays for expenses charged by a doctor for validating or completing a claim form as a result of any one injury or sickness for which medical or surgical treatment is required. Subject to a \$50 maximum per injury or sickness.

Patient Transfer Benefit

Pays for the cost of a private ambulance to and/or from a hospital or doctor's office following a period of hospital confinement and/or outpatient surgery, when recommended by a physician. Subject to a benefit year maximum of \$135.

Medical Expense Reimbursement Benefits

- a. **Special Equipment Benefit:** Pays for the rental or purchase of lift chairs, hospital beds or adjustable beds when required, and when recommended by a physician. Subject to a \$200 maximum per benefit year.
- a. **Mobility Assistance Benefit:** Pays for the purchase or rental of walkers, crutches, ergonomic walking poles or wheelchairs when recommended by a physician. Subject to a \$150 maximum for any one injury or sickness.
- a. **Assistive Devices Benefit:** Pays for the purchase or rental of grab bars, bath seats, raised toilet seats, reachers, commodes and bedrails if required, and when recommended by a physician. Subject to a \$100 maximum for any one injury or sickness.
- a. **Physiotherapy Benefit:** Pays for the services of a licensed, professional physiotherapist following a period of confinement in hospital and when recommended by a physician. Subject to a \$200 maximum per anniversary year.
- a. **Hearing Aid Benefit:** Pays for the purchase of or repairs to hearing aids, including the initial cost of batteries, or Cochlear implants, prescribed by a physician or speech or hearing specialist. Subject to a \$200 maximum, every four benefit years.
- a. **Oxygen Benefit:** Pays for the purchase, lease or rental of oxygen and necessary equipment including CPAP machines and accessories for the administration of oxygen. Subject to a \$300 maximum per benefit year.

RWTO/OERO's Personal Accidental Death And Dismemberment Plan


A serious accident or death can have devastating consequences for you and your family – physically, emotionally and financially. RWTO/OERO's Personal Accidental Death and Dismemberment Plan provides 24-hour coverage, anywhere in the world, for accidents causing loss or loss of use of limb, paralysis or even accidental death.

Purchased on its own or as a companion to your Hospital & Home Care Plan, enrollment is guaranteed and there are no medical questions to answer. Rates are low and coverage amounts are available from \$25,000 to \$200,000 for both you and your spouse.

Eligibility

As an RWTO/OERO member in good standing, you and your spouse are eligible. You and/or your spouse must be under the age of 85 and covered under a provincial health plan. Benefits are reduced by 50% at age 70, and further reduced by 50% at age 80. Personal Accidental Death & Dismemberment coverage terminates at age 85.

The policy does not cover loss caused by suicide, sickness, disease or infection, intentional or self-inflicted injury, war or act of war, or service in any military, naval or air service of any country.



Having the right insurance can allow you to focus on your retirement dreams comfortably.

Coverage Details

Pays a cash benefit as a result of an accident causing loss or loss of use of limb, paralysis or accidental death. Additional benefits include:

Family Transportation Benefit

Pays the transportation and accommodation expenses for an immediate family member to visit the insured at the hospital, if the insured is confined to a hospital for at least 5 days and if the hospital is located more than 200 km away from home, on the recommendation of a physician. Subject to a \$5,000 maximum per accident.

Home Alteration and Vehicle Modification Benefit

Pays for wheelchair accessibility in the home or vehicle utilized by the insured. This benefit is only payable when an insured has lost (or lost the use of) both feet, or becomes paraplegic, hemiplegic or quadriplegic. This is a one-time payment, and the insurer will not modify subsequently acquired vehicles. Subject to a \$10,000 maximum per accident.

Seat Belt Advantage Benefit

Increases the amount payable by 10% when the injury is a result of a vehicular accident and the insured is wearing a properly fastened seat belt.

Repatriation Benefit

Pays the expenses incurred in preparing the body for burial or cremation and the transportation of the body to his or her city of residence, should an injury result in the loss of life outside Canada. Subject to a maximum of \$5,000.

Comfort Care Benefit

Experience And Expertise You Can Count On

The RWTO/OERO is the official sponsor of these plans, which have been exclusively designed for and are available only to RWTO/OERO members and their spouses. These plans offer solid protection at reasonable rates. Apply today to ensure you have the assistance you need no matter what the future brings.

Insurance Provider

Manulife is a leading Canadian-based financial services group serving millions of customers in 22 countries and territories worldwide. Operating as Manulife in Canada and Asia, and primarily through John Hancock in the United States, the Company offers clients a diverse range of financial protection products and wealth management services through its extensive network of employees, agents and distribution partners. Manulife can be found on the Internet at www.manulife.ca

Recovery can improve with the ongoing support of your loved ones



IMPORTANT NOTICE – This is not a contract. Actual terms and conditions are detailed in the policy issued by Manulife upon final application approval. It contains important details concerning exclusions, conditions and limitations. Please review them carefully upon receipt.

PRE-EXISTING CONDITION – You are not covered for any bodily injury or illness for which you have received medical treatment or advice during the 3-month period immediately preceding the Effective Date of coverage. All pre-existing conditions will be covered after a member and/or spouse has been free of medical treatment or advice for those conditions for 3 months after the Effective Date or reinstatement date of the Policy or until the Policy has remained continuously in force for twelve (12) consecutive months, whichever occurs first.

MEDICALLY UNDERWRITTEN – If/when the plan is “Medically Underwritten” or “requires a medical questionnaire,” you must disclose any medical condition, injury or illness that occurred or existed on or before the date of your application, regardless of whether you went to see a doctor about the condition or were given a diagnosis, or whether or not you believe that it is important. Coverage may be declined based on your or your spouse’s medical background.

EFFECTIVE DATE OF COVERAGE – Coverage is effective the first day of the month following final approval of the application.

MAXIMUMS – All maximums are per person. Any unused portion of benefits cannot be accumulated and added to coverage in future months or years.

NOTICE ON PRIVACY AND CONFIDENTIALITY – The specific and detailed information requested on the application form is required to process the application. To protect the confidentiality of this information, Manulife will establish a “financial services file” from which this information will be used to process the application, offer and administer services and process claims. Access to this file will be restricted to those Manulife employees, mandataries, administrators or agents who are responsible for the assessment of risk (underwriting), marketing and administration of services and the investigation of claims, and to any other person you authorize or as authorized by law. These people, organizations and service providers may be in jurisdictions outside Canada, and subject to the laws of those foreign jurisdictions. Your consent to the use of personal information to offer you products and services is optional and if you wish to discontinue such use, you may write to Manulife at the address shown below. Your file is secured in our offices or those of our administrator or agent. You may request to review the personal information it contains and make corrections by writing to: Privacy Officer, Affinity Markets, Manulife, PO Box 4213, Stn A, Toronto, ON M5W 5M3.



Officially sponsored by, designed exclusively for, and available only to members of **THE RETIRED WOMEN TEACHERS OF ONTARIO/ ORGANISATION DES ENSEIGNANTES RETRAITÉES DE L'ONTARIO**

If you have any question on new enrollment, or you are currently insured in the plan and have questions, please call toll-free:

1-877-222-7340

or e-mail us at:

am_info@manulife.ca

For further assistance, please contact:

Terry M. Kennedy

519 583-0098

tkennedy34@bell.net



Plans underwritten by

The Manufacturers Life Insurance Company (Manulife)

Manulife, Manulife & Stylized M Design, and Stylized M Design are trademarks of The Manufacturers Life Insurance Company and are used by it, and by its affiliates under license. © 2021 The Manufacturers Life Insurance Company. All rights reserved. Manulife, PO Box 670, Stn Waterloo, Waterloo, ON N2J 4B8.

Accessible formats and communication supports are available upon request. Visit [Manulife.ca/accessibility](https://www.manulife.ca/accessibility) for more information.

21_171973 (04/2021)

Rate Tables

RWTO/OERO Hospital And Home Care Plan

	Member	Spouse
Monthly	\$14.49	\$15.57
Annual	\$173.88	\$186.84

RWTO/OERO Personal Accidental Death and Dismemberment Plan

Age	Principal Sum Amount	Annual Premium Per Person	Monthly Premium Per Person
Under 70	\$ 25,000	\$ 19.44	\$ 1.62
	\$ 50,000	\$ 38.88	\$ 3.24
	\$ 75,000	\$ 58.32	\$ 4.86
	\$ 100,000	\$ 77.76	\$ 6.48
	\$ 125,000	\$ 97.20	\$ 8.10
	\$ 150,000	\$ 116.64	\$ 9.72
	\$ 175,000	\$ 136.08	\$11.34
	\$ 200,000	\$ 155.52	\$12.96
70-79	\$12,500	\$ 9.72	\$ 0.81
	\$ 25,000	\$ 19.44	\$ 1.62
	\$ 37,500	\$ 29.16	\$ 2.43
	\$ 50,000	\$ 38.88	\$ 3.24
	\$ 62,500	\$ 48.60	\$ 4.05
	\$ 75,000	\$ 58.32	\$ 4.86
	\$ 87,500	\$ 68.04	\$ 5.67
	\$ 100,000	\$ 77.76	\$ 6.48
80-84	\$ 6,250	\$ 9.72	\$ 0.81
	\$ 12,500	\$19.44	\$ 1.62
	\$ 18,750	\$ 29.16	\$ 2.43
	\$ 25,000	\$38.88	\$ 3.24
	\$ 31,250	\$ 48.60	\$ 4.05
	\$ 37,500	\$ 58.32	\$ 4.86
	\$ 43,750	\$ 68.04	\$ 5.67
	\$ 50,000	\$ 77.76	\$ 6.48

Premiums are subject to change without notice.

Sample Calculations

1 Hospital and Home Care – You and Your Spouse

Name	Monthly Premium
Elizabeth	\$14.49
David	\$15.57

Total monthly premium = \$30.06

2 Personal Accidental Death & Dismemberment – You and Your Spouse

Name	Age Group	Principal Sum	Monthly Premium
Elizabeth	under 70	\$ 150,000	\$ 9.72
David	70-79	\$ 75,000	\$ 4.86

Total monthly premium = \$14.58

3 Hospital and Home Care/Personal Accidental Death & Dismemberment – You and Your Spouse

Plan Type	Name	Monthly Premium
Hospital & Home Care	Elizabeth and David	\$ 30.06
AD&D	Elizabeth and David	\$ 14.58

Total monthly premiums = \$44.64



The Retired Women Teachers of Ontario/
Organisation des enseignantes retraitées de l'Ontario



The Manufacturers Life Insurance Company (Manulife).

Manulife, Stylized M Design, and Manulife & Stylized M Design, and FollowMe are trademarks of The Manufacturers Life Insurance Company, and are used by it and its affiliates under license. © 2021 The Manufacturers Life Insurance Company. All rights reserved. Manulife, PO Box 670, Stn Waterloo, Waterloo, ON N2J 4B8.

Accessible formats and communication supports are available upon request.

Visit [manulife.ca/accessibility](https://www.manulife.ca/accessibility) for more information.