



SONATA HEALTH™

ENHANCED
Healthcare
INSURANCE



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Why choose Sonata Health?

Ensuring your family's healthcare needs are met today and in the future is probably foremost on your mind. However, putting a plan into place is not always easy.

Sonata Health can help. It's an enhanced health and dental benefits plan designed for individuals and families, to provide coverage for **expenses not covered by your provincial health plan**.

Province by province, governments are covering fewer of the medical expenses that are part of everyday life, and costs are going up. Many provincial health plans offer limited coverage – or none at all – for expenses such as:

- prescription drugs
- basic dental services
- eye exams and glasses
- ambulance services
- paramedical services such as chiropractic, physiotherapy or acupuncture.

You can count on Sonata Health to help.

With **three plan designs**, and **a choice of options**, *Sonata Health* allows you to choose the level of coverage that fits you and your family. And, if you're self-employed, *Sonata Health* may even be tax-deductible.

Our plans

***Sonata Health* lets you choose your level of coverage, so you can design a plan that fits your needs:**

- **Core**, our basic plan with guaranteed acceptance, provides coverage for a range of medical and dental expenses for you and your family, including prescription drugs.
- **Core Plus** provides more comprehensive coverage than the Core plan, plus vision care and hearing aids.
- **Elite** provides more generous coverage than the Core Plus plan, optional dental coverage, plus major dental services.

For complete coverage details, speak to your advisor or review the sample Policy booklets at www.myinsuranceplan.ca.

Optional coverage

Sonata Health offers options for individuals and families looking for additional protection against medical and dental expenses not covered under their provincial health plan.

- **Accidental Death, Dismemberment and Specific Loss**

This option provides coverage in units of \$25,000 to \$250,000. You can buy the level of coverage you feel you need for added security, should you or your dependants have an accident that causes death or injury.

You're eligible to apply for Accidental Death, Dismemberment and Specific Loss optional coverage at any time, but the option must remain in force for one full policy year before it can be cancelled.

- **Emergency Travel Medical**

You've probably heard that you could face high medical care costs if you have a medical emergency while travelling outside Canada. *Sonata Health* makes it easier than ever to have the travel medical coverage you need. With competitive rates and the convenience of having one less arrangement to make the next time you travel, this option is another excellent addition to your *Sonata Health* plan.

Most emergency medical expenses incurred within Canada but outside your home province are covered by your provincial plan. The Emergency Travel Medical option provides up to \$1,000,000 of coverage per trip for a medical emergency when you're outside Canada.

The Emergency Travel Medical optional coverage can be added at any time, but the option must remain in force for one full policy year before it can be cancelled.

- **Hospital Accommodation**

A private or semi-private room can make your hospital stay much more comfortable, but like many other healthcare costs, the portion you are required to pay out of your pocket has increased in recent years. Without coverage for private or semi-private accommodation in hospital, your costs can add up quickly.

This option provides coverage to pay the difference between a standard ward rate, which may be eligible for payment under your provincial plan, and the cost of private or semi-private accommodation.

Provides up to \$175 per day for up to 60 days.

The Hospital Accommodation option can be added at any time, but you must complete a medical and lifestyle questionnaire to apply, and the option must remain in force for one full policy year before it can be cancelled.

- **Hospital Cash**

If you were faced with an extended hospital stay, wouldn't it be nice to know you have some extra income to help offset some of the costs associated with your stay?

The Hospital Cash option provides \$50 per day, to a maximum of \$200 per day for all insured family members, for discretionary spending. Coverage starts on the fourth day you're in the hospital in Canada, for a maximum of 60 days in a calendar year. For an insured child under 31 days of age, coverage is limited to \$50 per day starting on the fourth day in the hospital in Canada, for a maximum seven days of confinement.

The Hospital Cash option is only available at the time of initial application.

You can use the money to cover costs that will make your stay as comfortable as possible, such as a television in your room, or parking, cafeteria or babysitting expenses for your family. The choice is yours.

- **Major Dental Services and Supplies**

Sonata Health coverage includes routine dental services and supplies such as oral examinations, emergency examinations, fluoride treatments, some denture maintenance and oral surgery. These services, however, may not meet all your needs. You can add the Major Dental Services and Supplies option to your Core or Core Plus plan to cover you and all insured family members for additional major dental services.

Benefits are payable at 50 per cent for eligible major dental expenses, up to \$500 per insured per calendar year.

Covered major dental services and supplies include:

- crowns and onlays
- dentures, bridgework and implant retained appliances
- denture-related surgery
- appliance maintenance.

The Major Dental Services and Supplies option is only available at the time of the initial application.

For more information or to add optional coverage, contact your representative or Great-West.

Included services

With any *Sonata Health* plan, you also receive the following:

Best Doctors®

Having the top medical knowledge for any important healthcare decision can make a critical, even lifesaving difference.

Best Doctors provides a voluntary service that allows you (or your eligible dependants) and your treating physician(s) to connect with top medical specialists worldwide to confirm diagnoses and treatment plans, and help you make the right decisions about medical care. Approximately 53,000 specialists in over 450 specialties and subspecialties worldwide make up the *Best Doctors* network.

Most common conditions are covered, so if you've been diagnosed with or suspect a serious illness, call *Best Doctors*. Where applicable, an intake representative will assign a personal Member Advocate (a Registered Nurse) to your case, who will help gather all relevant medical information and provide support and guidance throughout the process. The *Best Doctors* team of world-class experts will perform an exhaustive analysis of your medical information and tests, and will re-test all pathology specimens. *Best Doctors* will provide you with specific diagnosis and treatment options, involving you and your treating physician in a unique collaborative effort that may help improve recovery time and outcomes, extend life expectancy, or reduce invasive procedures.

For more information, visit www.bestdoctorscanada.com.

Great-West Life's Health & Wellness Site

Our website provides current, reliable health information you and your family can use, any time, to:

- explore in-depth information on diseases, conditions, drugs and treatment options
- read regularly updated health and wellness articles
- learn how lifestyle influences health through the interactive Personal Health Risk Assessment and other health tools and quizzes
- create a customized action plan to help make improvements to your lifestyle.

Coverage overview This information is a summary only.

Type of Coverage

Core Plan

Dentalcare	
Waiting Period Some exceptions may apply if you had prior coverage.	<ul style="list-style-type: none"> • 3-month no claims waiting period
Deductible	<ul style="list-style-type: none"> • \$25 per person to a max. of \$50 per family per calendar year
Routine – including diagnostic services, preventative services, minor restorative services, endodontic & periodontal service, denture maintenance, oral surgery, adjunctive services, based on policy provisions.	<ul style="list-style-type: none"> • 70% for routine services • \$350 max. per person each calendar year
Major - for dentures, bridgework, crowns, posts, onlays and inlays	<ul style="list-style-type: none"> • No coverage for major services *Optional Major Dental Services and Supplies Benefit available
Dental Accident Treatment	<ul style="list-style-type: none"> • 100%
Prescription Drugs – drugs that by law require a prescription by a doctor or dentist to be dispensed. If you live in Quebec, you are required to have drug coverage through your employer or the Quebec provincial plan, the <i>Régie de l'assurance maladie du Québec</i> (RAMQ)	<ul style="list-style-type: none"> • 70% prescriptions • \$500 max. per person each calendar year • \$5 max. dispensing fee per prescription
Ambulance	<ul style="list-style-type: none"> • Air and ground covered at 100% of reasonable and customary fee
Paramedicals – out of hospital treatment by a licensed and/or qualified: chiropractor, osteopath, physiotherapist, podiatrist; psychologist or social worker; massage therapist; speech therapist, naturopath, and acupuncturist, based on policy provisions.	<ul style="list-style-type: none"> • 100% • \$30 per visit up to \$300 per practitioner per calendar year
In-Home Nursing Benefits & Home Care	<ul style="list-style-type: none"> • 100% to a combined max. of \$2,500 per person each calendar year • Home care included
Medical Supplies – including Diagnostic lab and x-ray services, breathing equipment, orthopedic equipment, prosthetic equipment, mobility aids, diabetic supplies, other medical supplies.	<ul style="list-style-type: none"> • 100% • \$100 max. per year for orthotics
Hearing Aids	<ul style="list-style-type: none"> • 100% up to max. of \$400 every 5 years
Visioncare – eye exams, glasses and contact lenses, laser eye surgery.	<ul style="list-style-type: none"> • 100% to a max. of \$150 per person every 2 years for lenses and frames, contacts or laser eye surgery • 100% to a max. of \$75 every 2 years for eye exams

Included in all plans

Best Doctors®, Great-West Life's Health & Wellness Site

Optional coverage

Accidental Death, Dismemberment and Specific Loss

Provides coverage in units of \$25,000 up to \$250,000

Emergency Travel Medical

Provides 30 consecutive day multi-trip coverage for under age 65, or 15 consecutive day multi-trip coverage for policy owners between the ages of 65 and 74.

Core Plus Plan

Elite Plan

<ul style="list-style-type: none"> • 3-month no claims waiting period 	Option 1: with dental Option 2: without dental <ul style="list-style-type: none"> • 3-month no claims waiting period
<ul style="list-style-type: none"> • \$25 per person to a max. of \$50 per family per calendar year 	<ul style="list-style-type: none"> • \$25 per person to a max. of \$50 per family per calendar year
<ul style="list-style-type: none"> • 80% for routine services • \$750 max. per person each calendar year 	<ul style="list-style-type: none"> • 80% for routine services • \$750 max. per person each calendar year
<ul style="list-style-type: none"> • No coverage for major services *Optional Major Dental Services and Supplies Benefit available	<ul style="list-style-type: none"> • 3-month no claims waiting period • 50% for major services • \$500 max. per person each calendar year
<ul style="list-style-type: none"> • 100% 	<ul style="list-style-type: none"> • 100%
<ul style="list-style-type: none"> • 80% prescriptions • \$10,000 max. per person each calendar year • \$7 max. dispensing fee per prescription 	<ul style="list-style-type: none"> • 90% prescriptions on first \$10,000 per person each calendar year • 100% for the next \$240,000 • \$250,000 max. per person each calendar year • \$7 max. dispensing fee per prescription
<ul style="list-style-type: none"> • Air and ground covered at 100% of reasonable and customary fee 	<ul style="list-style-type: none"> • Air and ground covered at 100% of reasonable and customary fee
<ul style="list-style-type: none"> • 100% • \$40 per visit up to \$400 per practitioner per calendar year 	<ul style="list-style-type: none"> • 100% • \$50 per visit up to \$500 per practitioner per calendar year
<ul style="list-style-type: none"> • 100% to a combined max. of \$5,000 per person each calendar year • Home care included 	<ul style="list-style-type: none"> • 100% to a combined max. of \$7,500 per person each calendar year • Home care included
<ul style="list-style-type: none"> • 100% • \$300 max. per year for orthotics 	<ul style="list-style-type: none"> • 100% • \$300 max. per year for orthotics
<ul style="list-style-type: none"> • 100% to a max. of \$400 per person every 5 years 	<ul style="list-style-type: none"> • 100% to a max. of \$500 per person every 5 years
<ul style="list-style-type: none"> • 100% to a max. of \$200 per person every 2 years for lenses and frames, contacts or laser eye surgery • 100% to a max. of \$75 every 2 years for eye exams 	<ul style="list-style-type: none"> • 100% to a max. of \$250 per person every 2 years for lenses and frames, contacts or laser eye surgery • 100% to a max. of \$75 every 2 years for eye exams

Hospital Accommodation

Provides coverage for the difference between a hospital ward and private or semi-private room rate, 100% to \$175 per day for a maximum of 60 days per calendar year

Hospital Cash

Pays you cash while you're confined to a hospital

*Major Dental Services and Supplies

Available with the Core and Core Plus plans – 3-month no claims waiting period and 50% coverage up to \$500 per person, per calendar year

Eligibility

You're eligible to apply for coverage under a *Sonata Health* plan if you're covered by the provincial health plan in your province of residence.

If you have a spouse, he or she also must be covered by the provincial health plan.

If you have children, they must be covered by the provincial health plan and be either under the age of 21, or under the age of 25 if they're full-time students, to be eligible for coverage.

Medical underwriting

Great-West reviews information required on the medical and lifestyle questionnaire, which forms part of the application for underwriting purposes. Based on your or a family member's medical history, we may modify the coverage we offer. We may offer you our Core plan which is our guaranteed acceptance plan, or exclude medical conditions.

If your or a family member's medical history results in modifications to the coverage, you will be notified so you can agree to the changes prior to a policy being issued. If you decide not to proceed with coverage, your initial premium will be returned and your application cancelled.



Choosing your plan

Sonata Health allows you to choose the level of coverage most appropriate for you and your family. When choosing your *Sonata Health* plan, you should consider not only the types of services and expenses that are covered, but also the reimbursement levels and maximums each plan offers.

Reimbursement level

The reimbursement level is the percentage of a covered expense that a plan will pay. There are differences in the levels of reimbursement provided by each *Sonata Health* plan.

The reimbursement levels also vary for different types of expenses within a plan.

Maximums

The maximum is the total dollar amount the plan will pay for a certain type of benefit within a certain time period. As with reimbursement levels, the maximums also vary for different types of expenses within each plan.

Provincial coverage

You should also compare *Sonata Health* plans with coverage provided by your provincial plan. See the Resources tab on www.myinsuranceplan.ca for more information.

Waiting period

A **three-month waiting period** applies to Dentalcare Services. This means **no benefits** are payable for Dentalcare Services expenses incurred during the period starting on the Policy Effective Date and ending on the last day of the third month following the Policy Effective Date.

However, if you had prior dentalcare coverage, and apply within 60 days of losing your coverage, the three-month waiting period will be waived for routine services only. The waiting period will still apply to major dental. If you had no prior coverage, the waiting period will apply for all dentalcare services.

Cost

Your premium rate for *Sonata Health* depends on:

- the province or territory you live in;
- the plan design;
- any options added;
- whether you choose coverage for just yourself, yourself and your spouse, or your whole family; and
- your health and the health of your family.

If you choose to add the Accidental Death, Dismemberment and Specific Loss option, your rate also depends on the number of \$25,000 units you choose.

Premium payments couldn't be easier. Your premium is split into 12 monthly payments, which are automatically deducted from the bank account of your choice, or Visa or MasterCard. You may also choose to pay your premiums annually.

Please see the Rates booklet at www.myinsuranceplan.ca to determine your cost.

Notice to Quebec residents

If you live in Quebec, you are required to have drug coverage through your employer or the Quebec provincial plan, the Régie de l'assurance maladie du Québec (RAMQ). When covered for drugs under RAMQ, you will still have to pay a monthly deductible plus a co-insurance charge out of your own pocket, subject to a calendar year maximum. The calendar year out-of-pocket maximum applicable to Quebec residents for in-province expenses for drugs listed in the Liste de médicaments published by RAMQ is automatically updated to the maximum established by law, and is subject to change from time to time.

If you choose a plan that includes drug coverage, *Sonata Health* tops up your RAMQ coverage by paying 70 to 100 per cent, depending on the plan, of your out-of-pocket expenses (including the RAMQ monthly deductible and co-insurance) for drugs covered by RAMQ. It also pays 70 to 100 per cent of some drugs not covered by RAMQ but covered by *Sonata Health*, subject to the per-prescription dispensing fee and calendar year maximums.

To receive benefits under RAMQ after you cease to be employed or no longer have access to a group plan, you must immediately register with the Régie by calling or visiting one of their offices. For more information about RAMQ coverage, visit www.ramq.gouv.qc.ca/en.

Renewing your coverage

Each *Sonata Health* policy is for a term of one year, provided premiums are paid when due, beginning on the Policy Effective Date. Great-West will automatically renew your policy on your policy's annual renewal date.

Making a claim

We'll send you a supply of claim forms with your policy information. Claim forms are also available on www.myinsuranceplan.ca. When you need to make a claim, simply complete a claim form and send it, along with your original receipts, to Great-West.

We'll send you your claim cheque together with a complete explanation of your benefits. Or, you can have your *Sonata Health* claims payments automatically deposited to your financial institution account with direct deposit from Great-West. With direct deposit, there is no delay receiving your cheques due to mail disruptions, no chance your cheques will be lost or stolen, and no need to deposit your cheques in person.

You can choose direct deposit when you apply for *Sonata Health*, or at a later date, free of charge.

Most prescription drug claims are settled right in the pharmacy with your Assure Card™. You pay only the fees not covered by *Sonata Health*.

Great-West is linked electronically with many dentists across Canada. If your dentist has such a link with Great-West, your claim can be settled right in the dentist's office. You only pay expenses not covered by *Sonata Health*.

At your service

While we've tried to make *Sonata Health* easy to understand and even easier to use, you can count on the expert help of your financial security advisor or consultant, as well as the backing of a network of product specialists available to chat live online at www.myinsuranceplan.ca as you build a plan that fits your coverage needs.

With your commitment to quality healthcare protection for you and your family, along with the guidance of your advisor or consultant, you'll be able to maximize the value of your plan. For example, if you own a business or part of a business, your *Sonata Health* premiums may be tax-deductible. Ask your advisor or consultant for more information about this, and about making the most of your *Sonata Health* plan.

Additional information

Important notice

This brochure has been designed to provide a brief description of some of the features available with a *Sonata Health* policy. It is not a contract. Actual terms and conditions are set out in the policy issued by Great-West upon application approval. The policy contains important definitions and information concerning terms, conditions, limitations, exceptions and exclusions. Please read carefully upon receipt.

10-day right to examine your policy

If, after receiving it, you are not satisfied with your *Sonata Health* policy, you may cancel it without penalty within 10 days after you received it (or where permitted by law within 60 days after its effective date if you did not yet receive the policy).

If you add optional coverage to your existing *Sonata Health* policy, the 10-day right to examine will apply to the new coverage.

Learn more about Sonata Health

For more information about *Sonata Health*, including complete coverage details:

- contact your financial security advisor or consultant
- visit www.myinsuranceplan.ca.

About Great-West

All *Sonata Health* clients are insured by The Great-West Life Assurance Company.

Great-West has been helping Canadians achieve financial security for 125 years. We are a leading provider of financial security products in Canada, offering a wide range of insurance, retirement savings and income plans for individuals, families, businesses and organizations.

For more information about Great-West, visit www.greatwestlife.com.

Great-West Life

200-211 Consumers Road
Willowdale, ON M2J 4G8

Phone (Toronto area): 416-490-0072

Toll-free anywhere in Canada: 1-800-565-4066

Fax: 416-490-6640

Email: sonata@gwl.ca

Website: www.myinsuranceplan.ca





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ASSURANCE  COMPANY



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