

**COMPARISON OF RTO/ERO GROUP BENEFITS PROGRAM WITH
TORONTO DISTRICT SCHOOL BOARD PROGRAM ~ Retired Teachers, Principals, Vice-Principals ~ DRAFT 2010**

Coverage Comparison	Retired Teachers of Ontario Benefits effective 01 January 2010 to 31 December 2010	Toronto District School Board to end-of-contract, 2012*
SEMI-PRIVATE HOSPITAL	95% reimbursement with unlimited maximum . Convalescent Care \$75 per day for up to 30 days following a 24 hour hospital stay, includes 3 days of home care following non-elective day surgery to a maximum of \$75/day.	100% of semi-private room rate. Palliative Care: 45 days per person. Lifetime maximum. Chronic Care: \$3 per day up to 120 days per 12 consecutive months. Convalescent or rehabilitation: Maximum of six weeks per period of disability following at least three days confinement in an acute care facility.
EXTENDED HEALTH CARE	80% reimbursement for all expenses excluding drugs 85% reimbursement for the ingredient cost of prescription drugs. No overall annual limit. Emergency medical - 100% reimbursement for Out-of-Province/Canada. Deductible: None. Maximum: \$2,400 per year per person.	Deductible: \$25/single, \$50/family. 100% reimbursement for all expenses.
Prescription Drugs	Deductible: None. Maximum: \$2,400 per year per person. Treatment of erectile dysfunction – 85% to a combined annual maximum of \$350 per person, payable under the annual prescription drug benefit.	Covered at 100%. Generic Substitution. No Viagra.
Vision Care (eyeglasses / contact lenses)	\$300 maximum per person every two years - incl. laser eye surgery. Eye exams once every 2 yrs/\$75. New lenses due to eye surgery - \$300 lifetime maximum.	\$300 maximum/person – Sep. 2007; \$400 maximum/person - Sep. 2010; Every two years.
Hearing Aids	\$1,000 per person every three years for purchase/repair of hearing aids.	\$400 lifetime maximum.
Registered Nurse	\$1,500 per person in any two consecutive calendar years.	Covered.
Paramedical Services (physiotherapist, chiropractor, osteopath, podiatrist, etc.)	\$700 per person per year maximum for all listed services combined: acupuncturist, chiropodist, chiropractor, dietician, herbalist, homeopath, naturopath, nutritionist, osteopath, physiotherapist, podiatrist, psychologist, registered massage therapist, speech and shiatsu therapist	Speech therapist - \$200 maximum per person per 12 months. Physiotherapist maximum of \$20 per person per visit. Masseur \$7 per treatment up to 12 treatments per person per 12 months. Chiropractor, Osteopath and Podiatrist are not covered.

Modified by Bill Menagh for RTO/ERO Toronto Districts (rtoerotorontodistricts.org), January, 2010. Benefit coverage under the Retired Teachers of Ontario reflects enhancements effective January, 2010/rates effective February, 2010. RTO/ERO benefits and premiums will be reviewed and may change effective January, 2010/February, 2010 respectively. *TDSB coverage determined by contract to August 2012; premiums are effective September, 2009 with premium increases anticipated during the life of the contract. This document will be updated as new information becomes available. **While every attempt has been made to ensure the accuracy of the information provided, this document is not binding.** If you have any questions about your TDSB coverage, please contact the TDSB Benefits Department (416.397.3216).

Coverage Comparison	Retired Teachers of Ontario	Toronto District School Board
Appliances – including repairs. (prosthetics, orthopaedic shoes, support stockings, wheelchairs, crutches, etc.)	Covered at 80% reimbursement. Surgical Support Stockings to \$300 max/year; incontinence supplies to \$400. Orthotics to \$500 in any two consecutive years.	Covered. Orthotics limited to two pairs every two calendar years to a maximum of \$950.
Out-of-Canada Emergency Medical Travel Coverage (up to 62 days per trip included with Extended Health Care).	Up to 62 days per trip included with Extended Health Care. Up to \$1,000,000 per person per trip. Coverage provided for pre-existing conditions (some restrictions) Medical and financial assistance through World Access Canada. Includes trip cancellation coverage for up to \$6,000 per person for pre-paid, non-refundable portion of your trip expenses.	Covered – No maximum. Subject to reasonable and customary charges. See plan for details.
SUPPLEMENTAL PLAN: OUTSIDE PROVINCE/CANADA EMERGENCY MEDICAL (Available to Extended Health Care participants only)	Up to \$1,000,000 per person per lifetime. Coverage available for trips greater than 62 days, i.e. coverage begins on the 63rd day of travel. Coverage in 15-day units up to 182 days or 212 days (depending on province of residence) coverage is available. See Supplemental Plan rates below.	Covered as above.
DENTAL CARE	2010 ODA Fee Schedule	Four years behind current ODA Fee Schedule in September of 2009; Three years behind in 2010 and 2011.
Basic Dental	85% reimbursement. Unlimited maximum. 9-month recall - cleanings, fillings. - denture repairs. - incl. dental service by independent accredited hygienist	100% reimbursement. 9-month recall. \$5,000 maximum combined with minor restorative per calendar year.
Endodontic and Periodontic	80% reimbursement. \$850 per year maximum. Includes 8 units of scaling. - endodontics (root canal). - periodontics (bones and tissues).	100% reimbursement. \$5,000 maximum combined with basic dental per calendar year.
Major Restorative	50% reimbursement. - crowns, posts (includes crowns, bridges on implants), onlays & inlays): \$700 per year combined maximum. - bridges & partial dentures: \$700 per year maximum.	80% reimbursement. \$10,000 combined maximum for basic and minor and major restorative per calendar year.
Orthodontics	Not covered.	50% reimbursement. \$1,000 per person per calendar year up to a lifetime maximum of \$2,000. In Sep.2010 coverage is \$1,250 and \$2,500 respectively.

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Coverage Comparison		Retired Teachers of Ontario			Toronto District School Board	
Monthly Rates		Premiums effective Feb. 1, 2010 to Jan. 31, 2010*			September, 2009 Premiums for New Retirees	
		Single	Couple	Family	Single	Family
Semi-Private Hospital		\$ 17.07	\$ 34.11	\$ 40.09	\$ 9.58	\$ 17.14
Extended Health Care		\$ 72.87	\$145.74	\$174.90	\$180.61	\$304.74
Dental Care		\$ 52.98	\$104.48	\$130.28	\$ 96.77	\$190.94
Optional Supplemental Plan (Note: These 2009 rates are subject to change for 2010)					See Plan for Details regarding Out-of-Canada Coverage	See Plan for details regarding Out-of-Canada Coverage
<u>Coverage</u>	<u>Total Days Covered</u>					
5 extra days	67	\$ 68	\$ 137	\$ 150		
15 extra days	77	\$ 204	\$ 407	\$ 449		
30 extra days	92	\$ 408	\$ 817	\$ 898		
45 extra days	107	\$ 550	\$1,100	\$1,210		
60 extra days	122	\$ 720	\$1,441	\$1,583		
75 extra days	137	\$ 844	\$1,688	\$1,857		
90 extra days	152	\$ 974	\$1,949	\$2,143		
105 extra days	167	\$1,120	\$2,241	\$2,463		
120 extra days	182	\$1,267	\$2,535	\$2,788		
135 extra days	197	\$1,420	\$2,839	\$3,123		
150 extra days	212	\$1,575	\$3,150	\$3,465		

***Retail Sales Tax (PST) is added to Group Plans**

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