

ACCIDENT BENEFITS COVERAGE

TYPE OF ACCIDENT BENEFIT	SEPTEMBER 1, 2010 NON-CATASTROPHIC IMPAIRMENT	SEPTEMBER 1, 2010 CATASTROPHIC IMPAIRMENT	JUNE 1, 2016 NON-CATASTROPHIC IMPAIRMENT	JUNE 1, 2016 CATASTROPHIC IMPAIRMENT
Income Replacement Benefits	<ul style="list-style-type: none"> 70% of gross income up to a maximum of \$400 per week paid biweekly paid as long as you suffer a substantial inability for 2 years after 2 years test changes reduced at age 65 	<ul style="list-style-type: none"> 70% of gross income up to a maximum of \$400 per week paid biweekly paid as long as you suffer a substantial inability for 2 years after 2 years test changes >reduced at age 65 	NO CHANGE	NO CHANGE
Non-Earner Benefits	<ul style="list-style-type: none"> \$185 per week after 26 weeks paid biweekly must suffer a complete inability to carry on a normal life \$320 per week after 2 years if enrolled in education at the time or in the past year reduced at age 65 	<ul style="list-style-type: none"> \$185 per week after 26 weeks paid biweekly must suffer a complete inability to carry on a normal life \$320 per week after 2 years if enrolled in education at the time or in the past year reduced at age 65 	<ul style="list-style-type: none"> \$185 per week after 4 weeks payable for a maximum of 2 years must be 18 years or older to receive the benefit 	<ul style="list-style-type: none"> \$185 per week after 4 weeks payable for a maximum of 2 Years must be 18 years or older to receive the benefit
Caregiver Benefits	<ul style="list-style-type: none"> no coverage unless optional benefits purchased 	<ul style="list-style-type: none"> \$250 per week for the first person in need of care & \$50 per week for each additional paid as long as you suffer a substantial inability for 2 years after 2 years test changes 	NO CHANGE	NO CHANGE
Medical and Rehabilitation Benefits	<ul style="list-style-type: none"> maximum of \$50,000 or 10 years payment of reasonable and necessary expenses optional benefits: \$100,000 for 10 years/ \$1 million for life 	<ul style="list-style-type: none"> maximum of \$1 million for life payment of reasonable and necessary expenses 	<ul style="list-style-type: none"> maximum of \$65,000 for combined medical and rehabilitation benefits and incurred attendant care benefits or 5 years unless under 18 years old 	<ul style="list-style-type: none"> maximum of \$1million for life for combined medical and rehabilitation benefits and incurred attendant care benefits optional benefits available for an additional \$1 million
Attendant Care Benefits	<ul style="list-style-type: none"> maximum of \$3000 per month up to a limit of \$36,000 or 2 years must be incurred optional benefits available for \$72,000 	<ul style="list-style-type: none"> maximum of \$6000 per month up to a limit of \$1 million for life must be incurred 	<ul style="list-style-type: none"> optional benefits available for \$130,000 for 5 years or \$1 million for life 	
Case Manager Services	<ul style="list-style-type: none"> no coverage 	<ul style="list-style-type: none"> coverage is included under the medical and rehabilitation limits 	<ul style="list-style-type: none"> no coverage 	<ul style="list-style-type: none"> coverage is under the combined medical and rehabilitation and attendant care limits

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Lost Educational Expenses	<ul style="list-style-type: none"> • maximum of \$15,000 • applies to students who have incurred expenses pre-MVA • student must be enrolled in educational program and unable to continue due to impairment 	<ul style="list-style-type: none"> • maximum of \$15,000 • applies to students who have incurred expenses pre-MVA • student must be enrolled in educational program and unable to continue due to impairment 	NO CHANGE	NO CHANGE
Housekeeping & Home Maintenance Expenses	<ul style="list-style-type: none"> • no coverage unless optional benefits purchased 	<ul style="list-style-type: none"> • maximum of \$100 per week for life • must be incurred 	NO CHANGE	NO CHANGE
Expenses of Visitors	<ul style="list-style-type: none"> • payment of reasonable and necessary expenses incurred by immediate family members when visiting during treatment/recovery • no monetary limit • must be incurred within 2 years 	<ul style="list-style-type: none"> • payment of reasonable and necessary expenses incurred by immediate family members when visiting during treatment/recovery • no monetary limit • coverage is for life 	NO CHANGE	NO CHANGE
Damage to Clothing, Glasses etc.	<ul style="list-style-type: none"> • payment of lost or damaged clothing worn at the time of loss • includes dentures, prescription eyewear, hearing aids, prostheses & other medical or dental devices • no monetary limit 	<ul style="list-style-type: none"> • payment of lost or damaged clothing worn at the time of loss • includes dentures, prescription eyewear, hearing aids, prostheses & other medical or dental devices • no monetary limit 	NO CHANGE	NO CHANGE
Cost of Examinations	<ul style="list-style-type: none"> • payment of \$2000 maximum for any assessment, examination or report • deducted from med-rehab limits 	<ul style="list-style-type: none"> • payment of \$2000 maximum for any assessment, examination or report • deducted from med-rehab limits 	NO CHANGE	NO CHANGE
Death Benefits	<ul style="list-style-type: none"> • payment of \$25,000 to spouse & \$10,000 to each dependant 	<ul style="list-style-type: none"> • payment of \$25,000 to spouse & \$10,000 to each dependant 	NO CHANGE	NO CHANGE
Funeral Benefits	<ul style="list-style-type: none"> • payment of up to \$6000 maximum 	<ul style="list-style-type: none"> • payment of up to \$6000 maximum 	NO CHANGE	NO CHANGE