






Jan. to Dec. 2015

	 OTIP RAEO.	 OTIP RAEO.	 OTIP RAEO.	 OTIP RAEO.	 THE RETIRED TEACHERS OF ONTARIO LES ENSEIGNANTES ET ENSEIGNANTS RETRAITÉS DE L'ONTARIO
Benefits Comparison 2015	RTIP Gold Elite	RTIP Plus	RTIP Gold	RTIP Basic	RTO/ERO Group Insurance Plan
Plan Administrator	OTIP (Ontario Teachers Insurance Plan)				
Age Restriction	Automatic conversion to any other RTIP plan at age 65.	No age restriction.	No age restriction.	No age restriction.	No age restriction.
Member Fee	RTIP – None.	RTIP – None.	RTIP – None.	RTIP – None.	\$1.25 / \$1,000 of annual pension.
Extended Health Care					
Reimbursement	80%, unless noted otherwise.	80%, unless noted otherwise.	80%, unless noted otherwise.	80%, unless noted otherwise.	80%, unless noted otherwise.
Prescription Drugs	Unlimited (after \$4,500 in eligible expenses) Includes \$500 for sexual dysfunction.	\$3,000 per person/year. Includes \$750 for sexual dysfunction.	Option of \$1,500 or \$750 per person/year. Both options include \$750 for sexual dysfunction.	\$750 per person/year. Includes \$750 for sexual dysfunction.	\$3,100 per person/year. Sexual dysfunction included in prescription drug maximum
Deductible	\$4,000 in eligible expenses per person/year.	None.	None.	\$100 single \$200 couple/family.	None.
Dispensing Fee	Not covered.	Not covered.	Not covered.	Not covered.	Not covered.
Reimbursement	80% reimbursement of ingredient costs for the first \$500 in eligible claims.	85% of ingredient costs.	80% of ingredient costs.	80% of ingredient costs.	85% of ingredient costs. Mandatory generic substitution. Reimbursement for drugs.
<p>← Reimbursement up to equivalent generic drug when available. Reimbursement for brand name drugs → if generic is not available or physician indicates "no substitution".</p> <p>Express Scripts Canada Pharmacy home delivery program. You are reimbursed up to 100% for your generic maintenance prescription drug expenses (or 90% of brand name) and you can receive up to a 90-day supply for one low \$9 dispensing fee.</p>					
Diabetic Supplies	Separate maximum of \$1,000 per person/year.	Separate maximum of \$1,000 per person/year.	Separate maximum of \$1,000 per person/year.	Separate maximum of \$750 per person/year.	Included in prescription drug maximum.
Vision	\$250 per person/two years for purchase and repair of prescription lenses and frames, prescription sunglasses, contact lenses or laser eye surgery.	\$375 per person/two years for purchase and repair of prescription lenses and frames, prescription sunglasses, contact lenses or laser eye surgery.	\$250 per person/two years for purchase and repair of prescription lenses and frames, prescription sunglasses, contact lenses or laser eye surgery.	Not covered.	\$375 per person/two years for eyeglasses, prescription sunglasses, contact lenses or laser eye surgery.
Vision Tests	100% reimbursement.	80% reimbursement.	100% reimbursement.	\$125 per person/two years.	80% reimbursement.

Benefits Comparison 2015	RTIP Gold Elite	RTIP Plus	RTIP Gold	RTIP Basic	RTO/ERO Group Insurance Plan
Paramedical Services	\$1,250 per person/year (all practitioners combined). Same coverage as other RTIP plans →→→ 100% reimbursement of eligible charges for chiropractor and physiotherapist services for 12 consecutive months, once the \$1,250 paramedical services maximum has been reached. Documentation of a 24-hour hospital stay will be required for claims to be reimbursed under this benefit.	\$1,250 per person/year (all practitioners combined). Coverage for the services of any of the following licensed, certified or registered practitioners (payable only after your provincial health insurance plan maximum has been reached, if applicable): <ul style="list-style-type: none"> ● Acupuncture performed by a Chiropractor, Physiotherapist, Naturopath or Acupuncturist ● Chiropracist ● Chiropractor ● Nutritional Counselling provided by a Dietician, Homeopath or Naturopath ● Osteopath ● Physiotherapist ● Podiatrist ● Psychologist ● Reflexology performed by a Reflexologist ● Registered Family Therapist ● Registered Massage Therapist* ● Shiatsu Therapist* ● Registered Social Worker ● Speech Pathologist *Requires written authorization by an attending physician.	\$1,250 per person/year (all practitioners combined).	\$750 per person/year (all practitioners combined).	\$1,100 per person/year (all practitioners combined). Covers from first visit. <ul style="list-style-type: none"> ● Acupuncturist ● Chiropracist ● Chiropractor ● Dietician ● Herbalist ● Homeopath ● Naturopath ● Nutritionist ● Osteopath ● Physiotherapist ● Podiatrist ● Registered Clinical Psychologist ● Registered Massage Therapist ● Shiatsu Therapist ● Speech Therapist Physician authorization not required.
Travel	95 days per trip.				
Maximum	\$2 million per person/trip. 100% reimbursement.				
Trip	\$6,000 per person/trip.				
Cancellation / Interruption	\$150 per day to a maximum of \$1,500.				
Additional Expenses	\$5,000 per person for repatriation or burial.				
Repatriation of Remains/ Burial at Place of Death	\$5,000 per person for repatriation or burial.				
Return of Children	Co-ordinate and pay for the return home, including grandchildren.				
Vehicle Return	\$2,000 per trip.				
Supplemental Travel	Optional.				
Travel	Access to a competitive top-up travel insurance program, with per-day rates, for trips over 95 days. Not administered by OTP.				
Custom-Made Orthopaedic Shoes/Boots	80% reimbursement of eligible charges to a maximum of 2 pairs per year.	80% reimbursement of eligible charges to a maximum of 2 pairs per year.	80% reimbursement of eligible charges to a maximum of 2 pairs per year.	80% reimbursement of eligible charges to a maximum of 2 pairs per year.	80% reimbursement.
Custom-Made Orthotics	80% reimbursement of eligible charges up to a maximum of \$500 in any 2 years.	80% reimbursement of eligible charges up to a maximum of \$500 in any 2 years.	80% reimbursement of eligible charges up to a maximum of \$500 in any 2 years.	80% reimbursement of eligible charges up to a maximum of \$450 in any 2 years.	\$500 per person/two years combined.

Benefits Comparison 2015	RTIP Gold Elite	RTIP Plus	RTIP Gold	RTIP Basic	RTO/ERO Group Insurance Plan
Home Care	Coverage is the same as the other RTIP plans for home care, private duty nursing, medical aids, equipment & supplies; however, Gold Elite offers additional combined coverage for home care, private duty nursing, medical aids, equipment & supplies.	Automatically included as part of your health care plan.			Included with the purchase of Semi-Private Hospital. 80% reimbursement to a maximum of \$75 per person/day to a maximum of 30 days following a 24-hour hospitalization or a maximum of 3 days following day surgery. Also covers a maximum of 30 days per year in a long-term care facility following a 24-hour hospitalization.
Private Duty Nursing	Once paid claims exceed \$7,500, you are reimbursed at 100% to a combined maximum of \$25,000 per person/year, to a lifetime maximum of \$100,000.	\$2,000 per person/year.	\$2,000 per person/year.	\$2,000 per person/year.	\$2,000 per person/two years.
Medical Aids, Equipment & Supplies		80% reimbursement of eligible charges.			80% reimbursement of eligible charges.
Hearing Aids	\$1,000 per person/three years.	\$1,000 per person/three years.	\$1,000 per person/three years.	Not covered.	\$1,000 per person/three years.
Incontinence Supplies	100% reimbursement.	100% reimbursement.	100% reimbursement.		\$500 per person/year.
Support Stockings	\$750 per person/year.	\$750 per person/year.	\$750 per person/year.	\$200 per person/year.	\$400 per person/year.
Post-surgical Items	\$950 per person/year.	\$950 per person/year.	\$950 per person/year.	\$750 per person/year.	\$200 per person/two years.
Accidental Dental		\$200 per person/year.			Covered.
Ambulance		Covered.	Covered.		Covered.
Diagnostic Procedures		Covered.	Covered.		Covered.
Additional Programs	CAREpath – The Cancer Assistance Program Edvantage – Edvantage Rewards Program offers access to savings, contests and special events. Express Scripts Canada Pharmacy – Home Delivery program (reimbursement increases to 100% for generic prescription drugs).				Educational Program - \$200 per person/year.
Semi-Private Hospital	Optional.	Included.	Optional.	Included.	Optional.
Hospital Room	Option of unlimited semi-private coverage, OR \$100/day for semi-private or private room.	Unlimited semi-private per person/day maximum.	Option of unlimited semi-private coverage, OR \$100/day for semi-private or private room.	\$100 per person/day for semi-private or private room.	Unlimited per person/day maximum. 95% reimbursement.
Hospital Cash					Optional benefit.

\$10 per day to a maximum of \$100 per stay when a semi-private room is not available.

Benefits Comparison 2015	RTIP Gold Elite	RTIP Plus	RTIP Gold	RTIP Basic	RTO/ERO Group Insurance Plan
Dental Care	Optional. Current year.				Optional. Current year.
Fee Guide	Current year.				Current year.
Basic & Preventive	Unlimited per person/year. 80% reimbursement.				Unlimited per person/year. 85% reimbursement.
Endodontic & Periodontic	\$750 per person/year. 80% reimbursement.				\$850 per person/year. 80% reimbursement.
Major Restorative	\$700 per person/year for crowns, bridges, implants and partial dentures combined. 50% reimbursement.				\$800 per person/year for crowns, plus \$800 per person/year for fixed bridges and partial dentures. 50% reimbursement.

Rates Comparison 2015	RTIP Gold Elite			RTIP Plus			RTIP Gold			RTIP Basic			RTO/ERO Group Insurance Plan		
Health Care Plan	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
\$3,000 Drug Maximum				\$102.27	\$200.73	\$240.02									
\$3,100 Drug Maximum															
Unlimited Drug Maximum	\$95.06	\$179.37	\$205.36												
\$1,500 Drug Maximum							\$65.82	\$124.31	\$151.47						
\$750 Drug Maximum							\$51.60	\$97.30	\$117.30						
\$750 Drug Maximum										\$46.76	\$87.13	\$106.72			

Semi-Private Hospital	Single			Couple			Family								
\$100 Daily Maximum															
Under age 65	\$12.89	\$23.40	\$29.09				\$12.89	\$23.40	\$29.09						
65 and Over	-	-	-				\$24.43	\$45.33	\$56.79						
Unlimited Daily Maximum	\$21.06	\$40.32	\$51.00	Included in health care plan.			\$21.06	\$40.32	\$51.00						
Under age 65	-	-	-				\$40.88	\$77.91	\$98.50						
65 and Over															
Dental Care	Single			Couple			Family								
All Ages	\$61.59			\$120.92			\$147.56								

Note: This document highlights selected benefits. For a complete list of benefits and available plans, please visit the websites below. For the purpose of this comparison, a year means calendar year.
 RTO/ERO's rates include 8% sales tax applicable to Ontario residents.

RTIP/RAER: www.rtip.com

RTO/ERO: www.ero-rto.org/our-health-plans