



## SSQ Privilege comparison table • 1-866-777-0711

### The advantages of being insured with us:


- You'll appreciate the quality of our products and the simplicity of our claiming process.
- You'll have direct access to our Customer Service department, where real people with proper training are on hand to answer your questions.
- You won't be subject to any medical questionnaires or examinations if you apply within 90 days of the termination of your group health insurance coverage.
- You pay your premiums monthly, which makes budget planning easier.

**Because your health is important, enrol today!**

## Choose the best flex plan for your needs!

Coverage category	% Reimbursement	Basic	Classic	Enhanced
Hospitalization	100%	Semi-private room – Max. 90 days		Private room Max. 90 days
Trip cancellation	100%	Max. \$5,000/trip		
	Covers trip cancellation and interruption expenses resulting from a sudden and unexpected illness, an accident, death, or a disaster.			
Travel with assistance	100%	30 days – Max. \$5M/trip	180 days – Max. \$5M/trip	
	Covers expenses resulting from a sudden and unexpected illness that arises when you are travelling outside your province of residence.			
Prescription drugs	65%	Not covered		\$1,000 Drugs not in the Quebec's Public Prescription Drug Insurance Plan

Coverage category/Type of care	Basic 70%	Classic 75%	Enhanced 80%
<b>Psychological care</b>			
Career counsellor, psychoanalyst, psychologist, psychiatrist, social worker	\$60/consultation Max. reimbursement \$500	\$65/consultation Max. reimbursement \$500	\$70/consultation Max. reimbursement \$500
<b>Health professionals</b>			
Acupuncturist	\$35/treatment Max. 10 treatments	\$40/treatment Max. 10 treatments	\$45/treatment Max. 10 treatments
Audiologist, occupational therapist, speech therapist	\$65/treatment		\$70/treatment
Podiatrist	\$30/treatment	\$35/treatment	\$40/treatment
Max. 20 treatments for this specialty group			
Chiropractor (X-rays)	\$40/X-ray – Max. 2 X-rays		
Chiropractor	\$30/treatment	\$35/treatment	\$40/treatment
Osteopath	\$45/treatment	\$50/treatment	\$55/treatment
Physiotherapist, physical rehabilitation therapist	\$40/treatment	\$45/treatment	\$50/treatment
Max. 20 treatments for this specialty group			
Dietitian	\$25/consultation Max. 10 consultations	\$35/consultation Max. 10 consultations	\$40/consultation Max. 20 consultations
Kinesitherapist, massage therapist, orthotherapist	Not covered		\$35/treatment Max. 20 treatments
<b>Orthopaedic devices and shoes</b>			
Orthopaedic devices	\$525/pair – Max. reimbursement \$1,000		
Orthopaedic shoes	\$200/pair Max. 3 pairs	\$750/pair Max. 3 pairs	\$1,000/pair Max. 3 pairs
<b>Transportation by ambulance</b>			
Ambulance and ambulance transportation by plane or train	Max. reimbursement \$1,000		
<b>Home care</b>			
Nursing care	\$60/day		
Home assistance services	\$60/day		
Transportation expenses	\$30/day		
Childcare expenses	\$25/day		

Coverage category/Type of care	Basic	Classic	Enhanced
	70%	75%	80%
<b>Other care</b>			
Blood glucose monitor	\$100/60 months	\$100/36 months	
Breast prostheses, surgical brassiere	\$200 lifetime maximum		
Convalescent home	\$60/day – Max. 30 days		Semi-private room Max. 120 days
Cosmetic surgery required following an accident	Not covered	Max. reimbursement \$5,000/accident	
Dental treatment required following accidental damage to natural teeth	Not covered	Max. reimbursement \$2,000/accident	
Detoxification	Not covered	\$80/day – \$2,500 lifetime maximum	
External prostheses and artificial limbs	\$5,000 lifetime maximum		
Graduated compression stockings	Max. 3 pairs		
Hearing aid	\$750/48 months		
Intraocular lens implants	\$1,000 lifetime maximum		
Ostomy supplies	Max. reimbursement \$1,000		
Sclerosing injections	\$20/treatment – Max. reimbursement \$150		\$20/treatment
Therapeutic devices, transcutaneous electrical nerve stimulators, insulin pump and accessories	Max. reimbursement \$1,000		
Travel expenses within the province of residence	Max. reimbursement \$1,000		
Respirator (breathing apparatus), wheelchair, hospital bed	Max. reimbursement \$1,000		
Vaccines	\$200		
Wig following chemotherapy	\$300 lifetime maximum		
<b>Lab tests and imaging techniques</b>			
Lab tests, X-rays, ultrasounds, MRIs, electrocardiograms, CAT scans	Max. reimbursement \$500	Max. reimbursement \$1,200	Max. reimbursement \$1,500
<b>Vision care</b>			
Eye examinations, eyeglasses, contact lenses, laser vision correction	Not covered	 <b>Optional</b> Eye exam \$50/24 months Other expenses \$200/24 months	\$400/24 months

**Notes:** All amounts listed are eligible amounts and apply **per insured, per calendar year, unless otherwise stated.** SSQ Insurance reimburses at the stated percentage for the first \$3,000 of annual eligible expenses per insurance policy. Thereafter, SSQ Insurance reimburses the excess at 90%, up to the other maximums provided for various expenses.



## Optional coverage

Coverage	Type of care	% Reimbursement
Dental care <sup>1</sup>	<b>Basic care</b> (periodic examination and cleaning every 9 months)	75%
	<b>Routine care</b> (minor restorative services, endodontics, periodontics, etc.)	75%
	<b>Major restorations</b> (removable dentures and fixed bridges every 60 months)	50%
		\$50 deductible • \$1,000 <sup>2</sup>

**Notes:** All amounts listed are eligible amounts and apply **per insured, per calendar year, unless otherwise stated.**

<sup>1</sup> Option available only for Classic and Enhanced coverage upon implementation of the SSQ Privilege health insurance policy. You must maintain this option for a minimum period of 24 months. Evidence of insurability may be required if you did not have dental care coverage under your previous group insurance plan.

<sup>2</sup> Maximum reimbursement per calendar year is reduced by half (\$500) for the first year when you take out insurance between July 1 and December 31.



**Talk to a financial security advisor today  
at 1-866-777-0711.**

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In this document, SSQ Insurance refers to SSQ, Life Insurance Company Inc.