

When it comes to insuring your health,
we have five plans to protect you.



PLANDIRECT

FOR THE TIME OF YOUR LIFE



ENHANCED HEALTHCARE PROTECTION

 pd.admin.group

THE
Great-West Life
ASSURANCE COMPANY

For the time



PlanDirect is administered by PAdmin Group.

PlanDirect policyowners are insured by
The Great-West Life Assurance Company.

Great-West Life and the key design are trademarks
of The Great-West Life Assurance Company.

of your life...

Province by province, governments are covering fewer and fewer everyday healthcare expenses.

This means that more and more expenses are being paid out of the pockets of people like you. PlanDirect can help fill the gap between provincial plan coverage and what you would be responsible to pay.

Did you know that most provinces:

- offer no coverage for semi-private accommodations in hospital?
- offer minimal coverage for emergency medical services when you're travelling outside of Canada?
- cover few paramedical services such as chiropractors, physiotherapists or naturopaths and then, only a portion of the cost of each visit?
- limit coverage for prescription drugs through high deductibles or income or age restrictions?
- offer little or no coverage for basic dental services or ambulance services?

What this means to you

No one ever expects it, but what if you or your spouse became ill or were injured in an accident? Have you thought about the financial impact it could have? You might have to pay for things like:

- an ambulance
- an upgrade to a semi-private hospital room
- physiotherapy treatment once you're out of the hospital
- medications
- crutches, wheelchairs or any other medical supplies you'll need at home
- in-home nursing care services.

All this can add up to thousands of dollars out of your pocket. Depending on the plan you select, PlanDirect may cover these and other day-to-day expenses like eye examinations, eyeglasses and contact lenses, routine and major dental services, prescription medications and hearing aids.

Take time



Now...

...to take care of your future healthcare needs

PlanDirect is specifically designed for long term use and stability.

It offers quality coverage for people with different needs and lifestyles, through a choice of five plan designs and three optional benefits. With PlanDirect, no medical exam is needed to qualify. People with pre-existing medical conditions may apply for coverage*. And unlike many medical insurance plans, there is no overall lifetime maximum on the payments you can receive. With PlanDirect, you're covered if you move to another province in Canada, as long as you continue to qualify for provincial health insurance. With our plan selection, convenience and value, all you need to do is decide on the plan that's right for you.

** This is not a guarantee that applications for coverage will be accepted. Eligibility for coverage is based on the medical information provided in the Medical and Lifestyle Questionnaire.*



Detailed Coverage Information

Coverage is for reasonable and customary expenses not covered by a government plan:

Healthcare Services and Supplies

Prescription Drugs – Basic, Comprehensive and Premier plans cover:

Drugs that by law require a prescription by a doctor or dentist.

Coverage is not provided for certain prescription drugs such as:

- drugs for the treatment of erectile dysfunction,
- smoking cessation products,
- homeopathic preparations, proprietary or patent medicines, and
- any drug that does not have a drug identification number as defined by the Food and Drugs Act, Canada.

Hospital Care – All plans cover:

The difference in cost between semi-private and standard ward accommodation in hospital if the semi-private accommodation starts while insured under the PlanDirect policy and is for acute, convalescent or palliative care.

Ambulance Service – All plans cover:

Ambulance service including air ambulance, if provided by a licensed ambulance company for transportation to the nearest centre where essential treatment is available.

In-Home Nursing Care – All plans cover:

In-home nursing care provided in a private residence by a graduate registered nurse, licensed practical nurse or registered nursing assistant.

Home Health Aid Care – Premier plan covers:

Home health aid care, if prescribed by a physician, obtained through a licensed home health agency, and provided on a part-time or intermittent basis.

Medical Supplies – All plans cover:

The following supplies, when prescribed by a physician. For supplies available on a rental basis, Great-West covers the rental cost, or at its discretion, the cost of purchase.

Diagnostic Lab and X-ray Services: performed in the insured's home province or territory

Breathing Equipment: Oxygen and the equipment needed for its administration; intermittent positive pressure breathing machines, continuous positive airway pressure machines; apnea monitors for respiratory dysrhythmias; mist tents and nebulizers; chest percussors, drainage boards, sputum stands and tracheostoma tubes

Orthopedic Equipment: Custom-made foot orthotics and custom-fitted orthopedic shoes (limited to a maximum for each insured person, per calendar year, of \$100 for Value, Basic, Advantage and Comprehensive Plans and \$500 for the Premier Plan), braces, casts, splints, cervical collars, external electrospinal stimulators for the correction of scoliosis, non-union bone stimulators and prone standers

Prosthetic Equipment: External breast prostheses (once per insured person per calendar year), surgical brassieres (two per insured person per calendar year), artificial eyes, standard artificial limbs, cleft palate obturators, and internal breast prostheses to the amount payable for external breast prostheses

Mobility Aids: Wheelchairs and power scooters when necessary to permit independent participation in daily living, and repairs and rechargeable batteries for covered wheelchairs (limited to \$1,500 per insured person per lifetime)

Diabetic Equipment: Blood-glucose monitoring machines (limited to one per insured person every 4 years), and Novolin Pens, or similar insulin injection devices using a needle; test strips; insulin infusion sets; and blood letting devices, including platforms and lancets (limited to \$250 per insured person per calendar year)

Other Medical Supplies: Canes, walkers, crutches, parapodiums, hospital beds, bed rails, trapeze bars, head halters and traction apparatus, colostomy and ileostomy supplies, catheters and catheterization supplies, food substitutes that must be administered through tube feed process and the tube feeding pumps and pump sets, transcutaneous nerve stimulators for the control of chronic pain (limited to \$700 per insured person per lifetime), custom-made pressure supports for lymphedema, custom-made compression hose (limited to 4 pairs per insured person per calendar year), extremity pumps for lymphedema or severe postphlebotic syndrome (limited to \$1,500 per insured person per lifetime), custom-made burn garments, elevated toilets seats, shower chairs, bathtub rails and standard commodes, wigs for cancer patients undergoing chemotherapy (limited to \$500 per insured person per lifetime), surgically implanted intraocular lenses, and eyeglasses or contact lenses following eye surgery (limited to one pair following eye surgery)

Paramedical Services – Value, Advantage, Comprehensive and Premier plans cover:

Out of hospital treatment, after provincial benefits have been paid, to a maximum of:

\$25 per visit and \$250 per insured person per calendar year (for the Premier plan, \$25 per visit and \$315 for each insured person per calendar year) for each of the following practitioners

- **licensed chiropractor** for muscle and bone disorders;
- **licensed osteopath**;
- **licensed physiotherapist** for movement disorders (for the Premier plan, \$25 per visit and \$375 for each insured person per calendar year)
- **licensed podiatrist** for foot disorders; and
- **licensed naturopath**.

\$80 per visit and \$320 per insured person per calendar year for

registered psychologist or **social worker**;

\$45 per visit and \$270 per insured person per calendar year for **qualified speech therapist** for speech impairments (for the Premier plan, \$45 per visit and \$315 per insured person per calendar year);

Premier plan only, \$25 per visit and \$315 per insured person per calendar year for a **qualified massage therapist**.

Hearing Aids – Value, Advantage, Comprehensive and Premier plans cover: Hearing aids, including batteries, tubing and ear molds provided at the time the hearing aid is purchased.

Visioncare – Advantage, Comprehensive and Premier plans cover: Eye exams when performed by a licensed ophthalmologist or optometrist, glasses and contact lenses required to correct vision when provided by a licensed ophthalmologist, optometrist or optician, and laser eye surgery when performed by a licensed ophthalmologist.

Dental Accident Treatment – All plans cover: Treatment from accidental injury to sound, natural teeth. The accident must occur while the insured is under the PlanDirect policy. Treatment must begin within 60 days after the injury and be performed by a dentist, oral surgeon or denturist.

Dentalcare Services and Supplies

Coverage is provided for reasonable and customary expenses based on the current fee guide in effect in your home province or territory on the date the expense is incurred.

Routine Dental Services and Supplies – Advantage, Comprehensive and Premier plans cover:

Basic Level 1

- **Diagnostic Services:** One complete oral examination per insured person every 3 years; oral pathology, periodontal, surgical, prosthodontic and endodontic examinations; one limited oral and periodontal examination per insured person every 9 months; specific and emergency examinations; one complete series of intra-oral radiographs per insured person every 3 years; intra-oral radiographs to a maximum of 15 films and one panoramic radiograph per insured person every 3 years when not provided in the same year as a complete series; sialography; extra-oral radiographs other than panoramic and sialography; radiopaque dyes used to demonstrate lesions; interpretation of radiographs or models from another source; microbiological, histological, cytological, and pulp vitality tests and laboratory services
- **Preventative Services:** Prophylaxis and topical application of fluoride per insured person every 9 months; pit and fissure sealants on bicuspids and permanent molars once per insured person every 5 years; space maintainers and maintenance of space maintainers; appliances for the control of harmful habits; finishing restorations; interproximal diskings and recontouring of teeth
- **Minor Restorative Services:** Caries, trauma and pain control; amalgam and tooth-coloured posts for fillings; retentive pins and prefabricated posts for fillings and prefabricated crowns for primary teeth
- **Denture Maintenance:** One denture reline, rebase and resilient liner in relined or rebased dentures per insured person every 3 years
- **Oral Surgery:** Removal of teeth, surgical exposure of teeth, minor alveoplasty for remodeling and recontouring oral tissues, for remodeling and recontouring oral tissues gingivoplasty and stomatoplasty, surgical incisions, surgical excision of tumors, cysts, and granulomas, treatment of fractures, including related bone grafts to the jaw, treatment of maxillofacial deformities, including related bone grafts to the jaw and cheiloplasty and palatal obturators
- **Adjunctive Services:** Minor remedies for relief of dental pain, therapeutic injections and anesthesia required in relation to covered services

Basic Level 2

- **Endodontic Services:** Procedures described in the endodontic section of the Canadian Dental Association Uniform System of Coding and List of Services. Root canal therapy on permanent teeth is limited to one course of treatment per tooth.

- **Periodontal Services:** Procedures described in the periodontal section of the Canadian Dental Association Uniform System of Coding and List of Services. Both scaling and root planing are limited to a combined maximum of six 15-minute time units per insured person per calendar year. Both occlusal adjustment and equilibration are limited to a combined maximum of six 15-minute time units per insured person per calendar year.

Major Dental Services and Supplies – Premier Plan only covers:

- **Crowns and Onlays:** Metal, plastic, porcelain and ceramic crowns, onlays, posts, cores, pins and copings related to covered crowns. Coverage for crowns on molars is limited to the cost of metal crowns.
- **Dentures:** Dentures, including overdentures, are covered when required to replace one or more teeth extracted while the PlanDirect policy is in force.
- **Denture-related Surgery:** The following denture-related surgical services for remodeling and recontouring oral tissues are covered: remodeling, excisions, removal, reduction or augmentation of the alveolar bone, remodeling of the flooring of the mouth, vestibuloplasty, reconstruction of the alveolar ridge, extensions of mucous folds and related surgical grafts.
- **Appliance Maintenance:** One denture remake per insured person every 3 years and one denture adjustment per insured person per year, denture repairs and additions, tissue conditioning and resetting of denture teeth.

General Limitations and Exceptions

No benefits will be paid under a PlanDirect plan for the following:

- expenses for drugs (Value and Advantage plans)
- services and supplies associated with the diagnosis or treatment of infertility or contraception (Value and Advantage plans)
- services and supplies associated with the diagnosis or treatment of infertility or contraception, except oral contraceptives (Basic, Comprehensive and Premier plans)
- dental care services and supplies associated with congenital defects or developmental malformations in people 19 years of age or over, temporomandibular joint disorders, vertical dimension correction, myofascial pain or orthodontic treatment (Advantage, Comprehensive and Premier plans)
- expenses that private insurers are not permitted to cover by law
- services and supplies that the insured is entitled to without charge by law, or for which a charge is made only because the insured has insurance coverage

- services and supplies that do not represent reasonable medical treatment or reasonable dental treatment
- services and supplies associated with treatment performed for cosmetic purposes only
- services or supplies associated with items covered under the PlanDirect policy, unless specifically listed as a covered healthcare or dentalcare service or supply
- services or supplies received outside Canada, except as provided by the Emergency Travel Medical Rider, if in force
- services or supplies received out-of-province in Canada unless:
 - the insured is covered by the government plan providing Medicare coverage in the insured's home province or territory; and
 - Great-West would have paid benefits for the same services or supplies if they had been received in the insured's home province
- expenses arising from war, declared or undeclared, insurrection, acts of terrorism, voluntary participation in a riot or civil unrest
- expenses arising from committing or attempting to commit an assault, battery or criminal offense, whether or not the insured was charged with a criminal offense
- expenses incurred as a result of or a loss resulting from or associated with a self-inflicted injury or attempted suicide, while sane or insane

Benefits payable under PlanDirect, for healthcare and dentalcare services and supplies eligible under any government plan are limited to any deductible and co-insurance amounts the insured is required to pay under the government plan. A government plan means a plan that provides drug, health, dental or vision coverage and is legislated, funded, or administered by a government.

Specific Limitations and Exceptions

The above are the general limitations and exceptions that apply to PlanDirect. PlanDirect also contains specific limitations and exceptions that apply to specific coverage. For example, coverage is not provided for air-fluidized beds or for special wheelchair features primarily for participation in sports.

These are examples only and further specific limitations and exceptions apply. Please read your policy carefully when you receive it, as it contains important definitions, limitations and exceptions.



The Value Plan

Covers your essential healthcare needs, excluding prescription drugs.

Overall Annual Maximum: \$15,000/person/calendar year

Semi-Private Hospital Accommodation: 100% reimbursement to a maximum of \$175 a day up to 90 days each calendar year

Ambulance Service: 100%

In-Home Nursing Care: 90% up to \$3,500 every 36 months

Medical Supplies: 90% up to maximums in your policy*

Dental Accident Treatment: 90%

Paramedical Services: 90% up to maximums in your policy*

Hearing Aids: 90% up to \$500 every 5 years

* Refer to pages 4 – 6.



The Basic Plan

Covers your basic healthcare needs, plus prescription drugs.

Overall Annual Maximum: \$15,000/person/calendar year

Semi-Private Hospital Accommodation: 100% reimbursement to a maximum of \$175 a day up to 90 days each calendar year

Prescription Drugs: 90% to a maximum of \$1,000 in each calendar year

Ambulance Service: 100%

In-Home Nursing Care: 90% up to \$3,500 every 36 months

Medical Supplies: 90% up to maximums in your policy*

Dental Accident: 90%

** Refer to pages 4 – 6.*



The Advantage Plan

Offers extended healthcare, including dental coverage, excluding prescription drugs.

Overall Annual Maximum: \$20,000/person/calendar year

Semi-Private Hospital Accommodation: 100% reimbursement to a maximum of \$175 a day up to 90 days each calendar year

Ambulance Service: 100%

In-Home Nursing Care: 100% up to \$3,500 every 36 months

Medical Supplies: 100% up to maximums in your policy*

Dental Accident: 100%

Paramedical Services: 100% up to maximums in your policy*

Visioncare: 100% up to \$100 every 24 months

Hearing Aids: 100% up to \$500 every 5 years

Dental – Basic Levels 1 & 2: 80% up to \$1,000 each calendar year**

* Refer to pages 4 – 6.

** Refer to page 6 for Dentalcare.



The Comprehensive Plan

Offers a wide range of benefits, including dental coverage – our most popular plan.

Overall Annual Maximum: \$25,000/person/calendar year

Semi-Private Hospital Accommodation: 100% reimbursement to a maximum of \$175 a day up to 90 days each calendar year

Prescription Drugs: 100% to a maximum of \$1,000 a calendar year

Ambulance Service: 100%

In-Home Nursing Care: 100% up to \$3,500 every 36 months

Medical Supplies: 100% up to maximums in your policy*

Dental Accident: 100%

Paramedical Services: 100% up to maximums in your policy*

Visioncare: 100% up to \$100 every 24 months

Hearing Aids: 100% up to \$500 every 5 years

Dental – Basic Levels 1 & 2: 80% up to \$1,000 each calendar year **

* Refer to pages 4 – 6.

** Refer to page 6 for Dentalcare.



The Premier Plan

Offers higher coverage levels, and Major Dental coverage

Overall Annual Maximum: \$25,000/person/calendar year

Semi-Private Hospital Accommodation: 100% reimbursement to a maximum of \$200 a day

Prescription Drugs: 85% to a maximum of \$1,200 each calendar year, plus a Pay-Direct Drug Card

Note: The Pay-Direct Drug Card may not be available in Quebec.

Ambulance Service: 100%

In-Home Nursing Care and Home Health Aid Care: 85% up to \$1,500 every 12 months

Medical Supplies: 85% up to maximums in your policy*

Dental Accident: 85%

Paramedical Services: 85% up to maximums in your policy*

Visioncare: 85% up to \$200 every 24 months

Hearing Aids: 85% up to \$500 every 5 years

Dental – Basic Level 1: 85% Routine examinations, cleaning and fluoride every 9 months**

Dental – Basic Level 2: 50%**

Major Restorative Dental: 50% up to \$750 each calendar year**

No maximum benefit amount applies to Dental Basic Levels 1 and 2.

* Refer to pages 4 – 6.

** Refer to page 6 for Dentalcare.

Other Features – All PlanDirect plans include:

Preferred Vision Service (PVS) – discounts on prescription eyewear at participating outlets

WS NurseLine® – offers immediate telephone access to qualified nurses for health information and assessment. Nurses can assist with any non-urgent physical symptoms and provide general health management information.

WS HomeCare Access® – offers quick-response referral to services that address emergency and non-emergency childcare, eldercare, nursing and homemaking needs. While HomeCare's referral service is free, it does not cover the fees for those professional and support services.

WS NutritionMatters™ – offers professional nutrition counselling by registered dietitians to address your nutritional questions and concerns. You meet with a registered dietitian for a one-hour consultation to review your eating habits, discuss personal goals and establish a nutritional plan to accommodate your lifestyle.

WS NurseLine®, WS HomeCare Access®, and WS NutritionMatters™ are offered by PAdmin Group through Warren Shepell Consultants. These services do not form part of the PlanDirect policy and are not underwritten by The Great-West Life Assurance Company.

Who is eligible to join

You're eligible to apply for coverage under a PlanDirect plan if you are:

- A Canadian resident covered by provincial Medicare
- Between ages 50 and 70 if you have not had any supplementary health insurance coverage in the past 60 days
- Between ages 50 and 75 if you have had supplementary health insurance coverage in the past 60 days

Please note: The Premier Plan is only available if you had similar coverage within the last 60 days, including major restorative dental care benefits.

If you have a spouse, he or she must be married to, or living common law with, you in order to qualify for coverage.

If you have children, they must be either under the age of 21, or under the age of 25 if they're a full-time student, to be eligible for coverage.

How much will your premiums be?

Your rates will vary according to a number of different factors. These include: your age (or the age of the oldest person to be insured); the province you live in; which plan you select; whether you want coverage for yourself, or you and your spouse, or your entire family; and whether you've been insured by another plan with similar benefits in the past 60 days.

We've enclosed a rate book with this brochure so you can determine exactly what your monthly premiums will be. You'll see that premiums are divided into Standard Rates, Preferred Rates and Preferred Plus Rates.

- **Standard Rates** are offered if you have not had any other supplementary health coverage in the last 60 days.
- **Preferred Rates** are offered if you are applying for PlanDirect coverage within 60 days of terminating similar coverage.
- **Preferred Plus Rates** may be available if you had similar coverage in the last 60 days AND you and your family qualify based on the information provided in the Medical and Lifestyle Questionnaire section of your application.

Your premiums are paid in advance each month by pre-authorized withdrawal from your bank account.

Each year, we review all rates and, if need be, we adjust them down or up depending on the claims of all of our clients. If a major change takes place in your provincial health plan, we may have to revise your rates. In any case, we'll give you at least 30 days advance notice of any change.

It's easy to apply for coverage

Just fill out the application form included in this package, and mail it to us with:

- a personalized, blank cheque marked "VOID" to establish pre-authorized payments, and
- a cheque for your first two months' premiums.

If you're applying for Preferred or Preferred Plus Rates and your employer is not a Corporate Client of PDAdmin Group, please send a letter from your employer or a copy of your insurance billing, indicating your type of coverage – Health, or Health and Dental – and the expiry date of your policy. If you're applying for the Premier Plan, your previous plan must have provided coverage for major restorative dental treatment.

Your coverage begins on the first day of the month following the date that your application is approved. If you or your spouse, or any dependants are confined to a hospital on the date that coverage would have otherwise started, it will begin on the date of release from the hospital.

Changing coverage

It's important to choose your plan carefully. You may decrease your coverage after you have been insured at the higher level for one year. To move to a higher level of coverage you must again complete the Medical and Lifestyle Questionnaire and qualify for coverage. The Premier Plan (for eligible applicants) and the optional Hospital Cash Benefit are only available when you first purchase your PlanDirect policy.

It's easy to make a claim

When you're enrolled we'll send you a supply of claim forms. When you need to make a claim, simply fill out a claim form and send it, along with your original health and dental receipts, to The Great-West Life Assurance Company at the address shown on the form.

Great-West will mail your claim cheque, together with a complete explanation of your benefits, directly to your home address. If you have a drug card under the Premier Plan, your Pay-Direct Drug Card will pay 85% of your eligible prescription drug expenses on the spot.

It's easy to get your money back

In fact, it's guaranteed. If for any reason you aren't satisfied after receiving your PlanDirect policy materials, you have 10 days to change your mind. Just contact us and we'll refund your entire payment, with no questions asked.

You can also cancel your coverage at any time. However, you cannot enroll again in the plan unless you are coming back to us from an employer-sponsored plan.

This brochure is intended only as a summary of the coverage provided. The policy contains important definitions, limitations and exceptions. You will receive the policy shortly after you have applied and been approved for coverage. We recommend you read the policy carefully when you receive it.

Notice for residents of Quebec

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 coinsurance charge out of your own pocket, to a maximum each year. The current maximum out-of-pocket charge per year is \$822, as set by RAMQ, and is subject to change.

Depending on the plan you choose, PlanDirect tops up your RAMQ coverage by paying 85% to 100% of your out-of-pocket expenses for drugs covered by RAMQ, plus 85% to 100% of some drugs that are not covered by RAMQ, but are covered by PlanDirect.

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 their Web site at <http://www.ramq.gouv.qc.ca>.

Frequently asked questions about PlanDirect

- Q** The insurance coverage from my employer will end in 3 months. Can I enroll with PlanDirect after that?
- A** Yes, and if you apply within 60 days of when your coverage ends, you will be eligible for our Preferred or Preferred Plus Rates. We suggest that you apply sooner in order to have uninterrupted coverage.
- Q** Does PlanDirect cover me while I'm travelling?
- A** While travelling inside Canada, you will be covered by your PlanDirect policy to the same extent as you would be covered while in your own home province. For travel outside Canada, you must buy extra emergency hospital and medical travel insurance. However, your PlanDirect dental, drug, and paramedical coverage, if applicable, applies outside Canada as well.

Check out our “Emergency Travel Medical Benefits” in the *Optional Coverage* brochure.

- Q** I have a medical condition which has been controlled for years by medication. Can I still get coverage with PlanDirect?
- A** Information provided in the Medical and Lifestyle Questionnaire included with your application is reviewed by Great-West for underwriting purposes. While some applicants are declined based on the medical assessment, many people who join PlanDirect do have some type of medical condition.
- Q** I'm over 65. If I buy a plan that includes drug coverage, will it pay for the cost of prescriptions not covered under my provincial health plan?
- A** Yes. PlanDirect pays for eligible prescription drugs, as well as government plan deductibles and co-payments so you are not out-of-pocket for these expenses.
- Q** Are my premiums tax deductible?
- A** Your health and dental plan premiums are considered a medical expense, and therefore, can be used to calculate your medical expense tax credit when completing your Federal Income Tax return.

Thank you

We appreciate your business very much.

To apply for healthcare insurance, or for more information, please contact your financial security advisor, consultant or PAdmin Group at:

PAdmin Group
211 Consumers Road
Suite 200
Willowdale ON M2J 4G8

Phone (Toronto area): (416) 490-0072
Toll-Free anywhere in Canada: 1-800-565-4066

Fax: (416) 490-6640

E-mail: questions@plandirect.com

About Great-West Life

All PlanDirect clients are insured by The Great-West Life Assurance Company.

Great-West has been helping Canadians achieve financial security for more than a century. As a leading insurer in Canada, Great-West offers a broad portfolio of financial and benefit plan solutions for individuals, families, businesses and organizations. Together with its subsidiary, London Life, Great-West serves the financial security needs of more than nine million Canadians.

When you purchase a product or service from Great-West, you can be confident you are dealing with one of the strongest insurance companies in Canada, based on our ratings for financial strength and claims paying ability*.

*as rated by A.M.Best Company, Dominion Bond Rating Service, Fitch Ratings, Moody's Investors Service and Standard & Poor's Corporation at time of publication.

Access to information

We've made it easier than ever for you to get quick access to the most up-to-date and pertinent information about your PlanDirect coverage through the Internet.

Visit www.gwl.ca/plandirect or www.plandirect.com to find:

- the most up-to-date information on PlanDirect
- current information about what's covered by your provincial health plan
- answers to frequently asked questions and other useful information.

Administration services for PlanDirect are provided by PAdmin Group. This includes handling inquiries, collecting premiums, maintaining policy information and distributing policy and renewal material to policyholders. Founded in 1992, PAdmin Group offers insurance plans to Canadians who are not covered under a benefits plan with an employer.



**Phone 1-800-565-4066
for information**



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