



MCEC

4489 King St., E., Kitchener ON, N2P 2G2
 Telephone: 519-650-3806 / 800-206-9350
 Fax: 519-650-3947 Website: www.mcec.ca

**Employee Assistance Plan (EAP)
 Supplementary Health & Dental Plan**

	ONTARIO			QUEBEC			NEW BRUNSWICK		
	Blue Cross Jan 1, 2007 \$	Manulife Sep 1, 2009 \$	NEW RATES Effective Sep 1, 2010 \$	Blue Cross Jan 1, 2007 \$	Manulife Sep 1, 2009 \$	NEW RATES Effective Sep 1, 2010 \$	Blue Cross Jan 1, 2007 \$	Manulife Sep 1, 2009 \$	NEW RATES Effective Sep 1, 2010 \$
Extended Health									
Single (S)	62.44	59.24	63.26	63.01	59.79	63.85	57.81	54.85	58.57
Couple (C)*	151.06	120.54	127.72	152.46	121.65	128.91	139.87	111.61	118.26
Family (F)	151.06	160.03	170.63	152.46	161.52	172.21	139.87	148.18	157.99
Dental									
Single (S)	35.42	35.29	38.56	35.76	35.62	38.92	32.80	32.68	35.70
Couple (C)*	92.83	70.68	77.21	93.69	71.33	77.93	85.95	65.44	71.49
Family (F)	92.83	103.01	112.53	93.69	103.96	113.57	85.95	95.38	104.19
TOTAL									
Single (S)	97.86	94.53	101.82	98.77	95.41	102.77	90.61	87.53	94.27
Couple (C)*	243.89	191.22	204.93	246.15	192.98	206.84	225.82	177.05	189.75
Family (F)	243.89	263.04	283.16	246.15	265.48	285.78	225.82	243.56	262.18
EAP – per employee	n/a	n/a	4.14	n/a	n/a	4.18	n/a	n/a	3.85

*Blue Cross did not have the 'couple' option; the 'family' premium was charged for those who fit this category.

August 10, 2010

