# YOUR FRIENDS AND NEIGHBORS ARE ENROLLING IN THE COMMUNITY HEALTH PLAN FOR ACTON THROUGH THE SERVICES OF P.S.I. - HAVE YOU?



Your Community Health Plan for Acton is being enthusiastically received, and rightly so, because it offers so many advantages. If you haven't already subscribed, you owe it to yourself and your family to give it your thoughtful consideration now.

## THIS IS WHAT IT OFFERS YOU!

#### NO RED TAPE

- No exclusion for chronic or pre-existing conditions No medical examination
- No medical statement of condition of health No age limit for adults

#### THIS IS A SERVICE PLAN

Just present your identification card to any participating MEDICAL PRACTITIONER who will then send his account directly to Physicians' Services Incorporated for eligible services set forth in your agreement.

# YOUR AGREEMENT DOES

- 1. Dependent fathers, mothers, brothers, sisters, uncles,
- 2. Drugs, vaccines, appliances, biological sera or extracts, hospitalization, dentistry, nursing, ambulance service or
- 3. Laboratory tests performed other than in a physician's office; physical therapy and similar treatments; and all services for conditions not detrimental to health.

#### YOUR CHOICE of DOCTOR

You have free choice of any duly qualified participating physician. If you wish to be attended by a non-participating physician it can be arranged and the Corporation will pay the same amount as that payable to a participating physician for the same service. Where the annual income of a subscriber without dependents is less than \$7,000.00, or that of a subscriber with dependents is less than \$10,-000.00, the subscriber should not receive an account for. the personal eligible services of a participating general phy-

#### YOUR BENEFITS

The personal services of a registered medical doctor IN OFFICE, HOME OR HOSPITAL with the following features (a) Plan pays right from the first call. (b) Eligible dependents are entitled to the same benefits

- (c) No limit to number of calls for essential medical care
- during any period of time. Diagnosis of disease, injury or condition,
- Medical care for illness by your participating physician.
- Surgical operations (any cutting procedure), Services of anaesthetists,
- 6 Confinements (childbirth), and pre and post-natal care. 7. Treatment of fractures and dislocations including unlimited diagnostic x-ray services in connection therewith 8. X-ray-up to \$50.00 per person in any 12 month period
- O Deep v-ray therapy when authorized by P.S.I.
- 10. Cystoscopic and bronchoscopic examinations, II. Innoculations and vaccinations,
- 12. Retractions i.e. testing for eve glasses,

13. Treatment of burns and lacerations.

### **EXCEPTIONS**

- 1. Illness or accident provided for by the Workmen's Compensation Board or other Government agency (including illness or conditions resulting from service in the armed forces) or care or treatment provided under the Hospital Services Commission's Act.
- 2. Tuberculosis, mental illness, alcoholism, epilepsy, drug addiction, when patient is confined to special Institutions for treatment, or ought so to be.
- Any service or examination for insurance, school, camp, association, visa, employment (including safety glasses and group innoculations) or similar purposes.

### WAITING PERIODS

- Confinements Services for any condition due to pregnancy including pre-natal and post-natal care, except ectopic pregnancy, shall not be available until both husband and wife shall be enrolled for at least 8 full consecutive months, prior there to on the same agreement.
- 2. Eye tests require enrolment for 12 full consecutive months prior thereto, and subsequent tests only available after 24 month interval.
- 3. Tonsillectomy, herniotomy, reparative surgery to female perineum and cervix, requires enrolment for at least 6 full consecutive months prior thereto.

#### OTHER IMPORTANT **FEATURES**

- Protection for newborn children is immediate provided notification is received by P.S.I. within 15 days of
- Newly acquired spouse may be included for benefits between "group openings" by notification to P.S.I. within 30 days of marriage.
- You may now obtain the benefits of the plan it you are resident of an approved community. If you are a permanent boarder-or non-home owner-you still may
- If you leave your community you may continue your coverage for vourself and dependents by notifying PSI of your change of address immediately.

#### MONTHLY RATES

(Payable Quarterly) Subscriber \$ 3.00 Subscriber and One Dependent (spouse or child) Subscriber and More Than One Dependent -\$10.00 i.e. the Family

## COMMUNITY HEALTH PLAN HEADQUARTERS FOR ACTON 75 Mill Street, Next to Lovell's Meat Market

OUR OFFICE IS OPEN DAILY FROM 9 A.M.

#### OTHER ADVANTAGES

There are no claim forms to fill out; just show your PSI Identification Card to your participating doctor. There is no limit to the number of essential calls for any one illness, for any one day.

## AND REMEMBER

There is no age limit; no medical examination is required. You are covered for chronic and pre-existing conditions.

## No Other Medical Coverage Plan Offers This Kind of Protection

Although never offered to a community group before 1961, PSI already has over 1,450,000 subscribers in Ontario.

# Mail or Bring in This Coupon

Don't delay. If you do not join before June 23, 1962, you cannot subscribe, even if you wish and are eligible until we open the group for further entries.

I wish	to sign fo	or the Group	Benefits availa	able through
the Commun	nity Health	h Plan for Ac	ton through th	e services T
Physicians S				
I am Single	( )	Married (	)	20
I have	children	under 19 ye	ars of age.	
The plan w	II become	effective July	y 15, 1962.	
Name				······································
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