



THE BENEFITS INFOLINE

Communication from your Employee Benefits Committee

This is the second Issue of *THE BENEFITS INFOLINE* published by your Employee Benefits Committee. We hope you will find this a useful communication tool and welcome suggestions for Benefit topics that you would like to see included in future editions.

With the Holidays approaching, many people have questions regarding the **Out-of-Province and Out-of-Country coverage available** through the benefit plan. This publication is a Question and Answer document that will attempt to answer many of the common questions.

HOW AM I COVERED WHILE TRAVELING OUTSIDE MY PROVINCE OF RESIDENCE?

If you are traveling outside your province of residence for business, vacation or educational reasons, you and your eligible dependents are covered by both your Provincial Health Care Plan (OHIP) and Great-West Life (GWL) for **unforeseen medical emergencies**, which may arise.

Note: It is important to contact OHIP and GWL if you have a child attending college/university outside Ontario or in the United States.

WHAT IS A MEDICAL EMERGENCY?

A medical emergency is considered to be one that arises as a result of:

- A sudden or unexpected injury, or
- A new medical condition which was not identified or being treated prior to your departure from Canada or
- A previously identified medical condition which was stable and controlled for a three month period prior to your departure from Canada. In such cases you may be required to provide medical documentation showing there were no complications such as hospitalizations, medication changes, new or ongoing symptoms or doctors visits for that condition during the three-month period prior to your departure date.

WHAT IS COVERED BY OHIP WHILE TRAVELING INSIDE CANADA?

Most of your Ontario Health coverage benefits can be used across Canada and are covered as if the expenses were incurred in your home province. In Canada, most hospitals will bill OHIP directly and will not require you to pay for services up front regardless of what province or territory you are in. Doctors who do not have an OHIP billing number may not be prepared to wait for reimbursement from OHIP and may request payment from you. In this case, you would need to contact OHIP to obtain reimbursement for your expenses.

WHAT IS COVERED BY OHIP WHILE TRAVELING OUTSIDE CANADA?

While you are traveling outside Canada, OHIP covers only emergency health services. Emergency care from medical practitioners is reimbursed up to the level that would be paid in Ontario. Hospital accommodation and services, however, are reimbursed at levels significantly lower than would be paid in Ontario. The remainder of the expenses can be submitted to Great-West Life for assessment.

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Most hospitals and physicians in the United States now accept assignments when they are able to validate your coverage through your insurance carrier but it is up to the Doctor or Hospital to determine if the patient has to pay up front or if they will bill Great-West Life directly. If the provider/hospital accepts your assignment, you will not be required to pay your bill at the time of treatment.

OHIP has a third-party agreement with Great-West; we may submit your out-of-country medical expenses to your provincial healthcare plan on your behalf. To do so, the provincial healthcare plans require specific authorization forms be completed, in full, by the person who incurred the medical expense. These are available to you by visiting www.greatwestlife.com or by calling our Out-of-Country Claims Department at 1-800-957-9777.

WHAT IS COVERED BY GREAT-WEST LIFE WHILE TRAVELING *INSIDE* CANADA?

Out-of-Province claims are treated as if they were incurred inside Ontario.

WHAT IS COVERED BY GREAT-WEST LIFE WHILE TRAVELING *OUTSIDE* CANADA?

The maximum reimbursement is \$500,000 lifetime for non-retired employees. Retired employees have their Out-of-Province coverage limited by the lifetime maximum for all covered Extended Health expenses of \$15,000 except for COPE which is \$10,000. **It is strongly recommended that retired employees purchase additional medical coverage while traveling outside Canada.**

WHAT IS THE MAXIMUM TRIP DURATION?

There is no trip duration for non-retired employees. For retirees, the coverage is limited to the first 3 months of any absence. **You must notify and get approval from OHIP in order to have coverage extended for long trips and for students attending school outside Ontario. Coverage with GWL is based on your having OHIP coverage.**

WHAT ARE THE COVERED EMERGENCY MEDICAL EXPENSES?

In the event of an emergency medical situation, the following expenses are covered in excess of the OHIP allowance on a reasonable and customary basis for the area in which they are incurred:

- treatment by a physician
- diagnostic x-ray and laboratory services
- hospital accommodation in standard or semi-private ward (assuming semi-private coverage) of intensive care unit
- medical supplies provided during a covered hospital confinement
- paramedical services provided during a covered hospital confinement
- hospital outpatient services and supplies
- drugs

WHAT IS EMERGENCY CARE?

Emergency care is medical treatment you receive immediately following a medical emergency directly relating to that emergency. Once the initial phase of the treatment is past, any additional medical treatment related to continued management of the medical condition or reoccurrence of the condition is not covered.



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Example: If you are in an accident and break your leg, the initial treatment of the broken leg would be covered but follow-up visits to ensure everything is healing properly would not be covered.

Example: You are rushed to hospital with a suspected heart attack but two days later are released with your condition stable and clearance to travel with no special restrictions. If you continue your vacation/trip and suffer a further attack during that same absence from your home province, treatment relating to the subsequent medical condition will not be covered.

WHAT ABOUT EMERGENCY MEDICAL EXPENSES RELATING TO PREGNANCY?

Expenses relating to delivery and infant care are not covered if:

- you are traveling after the 34th week of pregnancy; or
- medical history indicates a higher than normal risk of an early delivery or complications

IS NON-EMERGENCY MEDICAL CARE COVERED OUTSIDE OF CANADA?

Generally, non-emergency medical care is not covered outside Canada unless it is being done on a referral basis and has been pre-approved by both OHIP and Great-West Life. If you have a chronic medical condition, OHIP may cover certain expenses but only at the level they would reimburse for emergency services. You should check with both OHIP and GWL prior to traveling to determine if any expenses will be covered and, if so, at what level.

WHAT DO I DO IN THE EVENT OF AN OUT-OF-CANADA MEDICAL EMERGENCY?

You are responsible for payment of all your medical expenses outside of Canada. Great-West Life has a special Out-of-Country unit that only deals with these claims. If you are in the United States you can call **1-800-957-9777**, which will automatically connect you to the Out-of-Country unit. If you are anywhere other than the United States, you can call Great-West Life collect at **204-946-1190** and ask for the Out-of-Country Claims Unit. This Claims Unit is open between the hours of 8:00 am and 7:00 p.m. Eastern Standard Time (7:00 a.m. and 6:00 p.m. Central Standard Time) **Have your Policy, Division and ID numbers ready.**

Most hospitals and physicians in the United States now accept assignments when they are able to validate your coverage through your insurance carrier but it is up to the Doctor or Hospital to determine if the patient has to pay up front or if they will bill Great-West Life directly. If the provider/hospital accepts your assignment, you will not be required to pay your bill at the time of treatment.

DO I NEED TO PURCHASE ADDITIONAL TRAVEL INSURANCE?

For Non-Retired Employees:

You are eligible for 100% reimbursement for services and supplies when related to eligible Out-of-Province and Out-of-Country care, as previously defined. You may also be covered under your spouse's group plan. If you think you would require additional insurance over and above what Great-West Life covers then it would be recommended that you purchase additional insurance.

For Retirees:

As emergency medical coverage can be extremely expensive and your coverage is limited, **we strongly recommend you buy additional medical coverage when traveling outside Canada.**



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I HAVE A PRE-EXISTING MEDICAL CONDITION. AM I STILL COVERED?

Your GWL policy does not exclude coverage for the treatment of medical conditions, which existed prior to your departure from Canada. However, if your medical emergency was the result of a pre existing condition, benefits will only be payable if your previously diagnosed medical condition was stable and controlled for a three month period prior to your departure from Canada. In such cases you may be required to provide medical documentation showing there were no complications such as hospitalizations, medication changes, new or ongoing symptoms or doctors visits for that condition during the three-month period prior to your departure date.

HOW DO I SUBMIT A CLAIM?

If you need to file a claim, contact GWL at 1-800-957-9777 and have the required forms sent to you. If the provider sends the bill directly to GWL, GWL will notify you that they have the bill and they need you to forward the appropriate forms.

You are required to complete an Out of Country Expense Statement with the required provincial forms. These are available to you by visiting www.greatwestlife.com or by calling our Out-of-Country Claims Department at 1-800-957-9777.

Completion of these forms will allow us to pay eligible claims and coordinate payment directly with your provincial health plan or with any other insurance carriers.

One of the forms is a "Government Assignment" form. This is a form that you must complete which will allow them to file a claim on your behalf with OHIP. GWL will then receive reimbursement directly from OHIP for their portion of the claim. This eliminates the extra step of your having to file a claim with OHIP, as well as ensures that GWL is able to pay your claim promptly.

All Out-of-Country and Out-of-Province claims must be submitted to OHIP within 12 months of receiving treatment.

The following are the special GWL Out-of-Country Claim forms that will need to be completed by the employee immediately upon your return to Canada:

- Authorization and Release form – which allows GWL to go to OHIP on your behalf and;
- Statement of Claim Out-of-Country Expenses form

Great-West Life will assess the claims and pay both GWL's portion as well as OHIP's portion.



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If you have expenses that you need to claim directly from OHIP and have not assigned reimbursement to GWL, the OHIP claim form can be obtained on line at www.gov.on.ca/health or directly from your local OHIP Office.

Complete the blanks , cut out and take with you when you go on vacation.

Employee ID# _____ Division Number _____

Policy Number 136993

GWL Help phone number **1-800-957-9777**

GWL Out of Province Help # **1-800-957-9777 (US location)**

GWL Out of Province Help # **1-204-946-1190 (any other location)**

HWDSB Human Resources # **1-905-527-5092 x2215 or x2641**