



BENEFIT PLAN

UNIVERSITY OF WINDSOR

Classification: International Students
Provincial Replacement Plan

Billing Division: 100

Effective Date: May 1, 2016



HEALTH CARE PLAN

PROVINCIAL REPLACEMENT PLAN (GHIP)

The plan provides coverage for hospital and medical expenses in Canada due to sickness or accident during the policy period. Green Shield Canada (GSC) will pay the reasonable and customary charges for such expenses up to the amount allowed under the Provincial Health Insurance Plan.

SCHEDULE OF ELIGIBLE SERVICES

Medical Services

Green Shield pays up to 100% of the Provincial Health Plan's fixed schedule for the following covered services:

- Physician's services in the home, the physician's office, the hospital or institution
- One annual health examination
- Services of specialists certified by the Royal College of Physicians and Surgeons of Canada
- Diagnosis and treatment of illness and injury
- Treatment of fractures and dislocations
- Surgery
- Administration of anaesthetics
- X-rays for diagnostic and treatment purposes
- Obstetrical care, including prenatal and postnatal care

Hospital - Inpatient Basis (Services included in the ward rate)

- The usual and customary charges: standard ward accommodation and meals (room and board) - (up to 3 times the resident rate)
- Private or semi-private accommodation when necessary and certified in writing by the attending physician
- Necessary nursing services, when provided by the hospital
- Laboratory and diagnostic X-rays procedures
- Drugs prescribed by a physician (except when the hospital visit is solely for the administration of drugs)
- Use of operating and delivery rooms, anesthetic and surgical supplies
- Use of respiratory equipment
- Use of radiotherapy facilities
- Services rendered by any person paid by the hospital
- Use of home renal dialysis and of home hyperalimentation equipment, supplies and medications where available in a hospital and prescribed by a staff physician of that hospital
- Occupational therapy, speech therapy and physiotherapy in approved Canadian hospitals when prescribed by a physician as a medically necessary course of treatment

Hospital - Outpatient Basis

- Laboratory, radiological and other diagnostic procedures
- Use of radiotherapy, occupational or speech therapy, and physiotherapy facilities where available
- Use of diet counselling services when prescribed by a physician
- Use of operating room and anesthetic facilities
- Necessary nursing service
- Meals required during a treatment program
- Drugs, biological and related preparations prescribed and administered in the hospital

Other Practitioners (i.e., Optometrists, Chiropractor, etc.)

Coverage depends on province of residence and age of patient. Eligibility and allowed amount based on various Provincial fee schedules.

Ambulance - Medically Necessary

- Land ambulance (user fees may apply depending on province of occurrence)
- Use of air ambulance when medically necessary. Failure to obtain prior approval from GSC may result in non-payment

Dental

In hospital, dental procedures are covered if they are performed in an operating room by a dental surgeon appointed to the dental staff of the hospital.

Payment will be limited to the amounts outlined in the Provincial Schedule of Benefits.

Diagnostic, X-rays and Lab Services

- Services specifically and expressly authorized by a physician who has clinically assessed the patient, and which are performed in a laboratory licensed under the Public Health Act or a public health laboratory approved as a related health facility
- X-rays for diagnostic and treatment purposes requested by a physician

Out of Canada Health Coverage - While Travelling

Payment will be as outlined by the Provincial plan for:

- Emergency in-patient hospital treatment
- For all emergency out-patient services on any one day
- Emergency physician services up to a maximum of the fees listed in the Provincial Fee Guide

Repatriation

Up to \$10,000 will be paid for necessary and reasonable expenses in connection with the repatriation to the country of domicile, of a patient that is incapacitated and is expected to be totally disabled or is deceased.

Limitations and Exclusions

1. The limitations and exclusions are as outlined by the applicable Provincial plan.
2. The maximum amount payable is \$1,000,000 per person per year.
3. Persons over the age of 65 years are not covered.

IMPORTANT

This plan will not pay for expenses which are covered for any compulsory or voluntary Federal or Provincial health or hospital services act or acts, Workers' Compensation Act, or other laws or legislation existent in any province whether you are in fact enrolled or not in the Provincial health or hospital services plan.

HOW TO CLAIM

For Eligible Services submit to GSC Canada Travel Assistance (Allianz Global Assistance) a completed Claim Form for Government Health Insurance Replacement Coverage.

In some cases, arrangements can be made to reimburse the provider of service directly.

All claims must be submitted to GSC Travel Assistance (Allianz Global Assistance) within 12 months from the date the Eligible Service was incurred.

Allianz Global Assistance
4273 King St. East
Kitchener, Ont. N2P 2E9
1.800.363.1835

OUR COMMITMENT TO PRIVACY

The GSC Privacy Code balances the privacy rights of our group and benefit plan members and their dependents, and our employees, with the legitimate information requirements to provide customer service.

To read our privacy policies and procedures, please visit us at greenshield.ca.