

## Prescription Drug Plan

Drugs or medications required due to injury or sickness must be on the recommendation of and with a written prescription from a legally qualified physician. Medavie Blue Cross will reimburse up to 90 per cent (including a \$5 dispensing fee) of the actual cost of eligible medication if prescribed and dispensed during the period your coverage is in force, up to a maximum of \$1,200 per insured, per policy term. Policy term includes any or all of the following semesters 09F, 10W, 10M.

Medications that are excluded include contraceptives, fertility drugs, male pattern baldness remedies, anti-smoking remedies (Nicorette gum, patches or other products), vaccines, acne preparations and any medicines available without a prescription.

Insulin is considered an eligible expense under this drug plan, as are syringes and diabetic test strips and supplies, up to a maximum of \$200 per policy term.

## Accidental Dental Expenses

Should injury to whole or natural teeth occur while insured under this policy, treatment must be received within 180 days from the date of the injury or accident. Benefit payment will be based on reasonable and customary charges, up to a maximum benefit of \$1,000 for any one accident, and will be based on the current published schedule of fees by the Ontario Dental Association. No payment will be made if the injury is the result of an accident caused by any object wittingly or unwittingly placed in the mouth. In order to determine whether an accidental dental claim is eligible, you must have your dental office prepare a pre-determination and forward this to Medavie Blue Cross for review.

## Submitting a Claim for Accidental Dental

Medavie Blue Cross must receive a completed dental claim form, which will be provided to you by your dental office, attached to a Medavie Blue Cross claim submission form (available from your CSSAI offices). We encourage you to contact Medavie Blue Cross at 1-800-355-9133 for assistance at the time of any Accidental Dental claim. Accidental Dental claims must be received within 180 days.

## Ambulance Expenses

When, due to injury or sickness, you require immediate medical attention, Medavie Blue Cross will pay the reasonable and customary charges for licensed ambulance services. The maximum benefit for ground or air ambulance combined is \$1,000 per occurrence.

## Schedule of Benefits During Coverage Term\*

Accidental Medical Expenses -	\$15,000
Accidental Dental Expenses -	\$1,000
Pay Direct Prescription Drug Plan -	\$1,200
Ambulance Expenses -	\$1,000
Permanent Prosthesis -	\$1,000
Critical Care Benefit -	\$2,500
Tutorial Benefit -	\$1,000

\* Coverage term will not exceed one full school year, i.e. semesters 09F/10W/10M.

For the purpose of your benefits, the term "Accident" is defined as an occurrence due to external, violent, sudden, fortuitous cause beyond the control of the member, which must occur while the member is insured.

## Accidental Medical Expenses

When, by reason of injury or accident and within 30 days from the date of the occurrence, and while under the regular care of a legally qualified physician or surgeon, the member requires:

- treatment administered by a legally qualified podiatrist or speech therapist;
- treatment administered by a legally qualified physiotherapist or chiropractor when referred by a physician. Reimbursement is subject to a maximum per treatment of \$15, with a maximum of 20 treatments per injury or accident;
- crutches, splints, trusses, braces (excluding expense of braces or similar devices used for non-therapeutic purposes or for the purpose of participating in sports or other leisure activities);
- rental of a wheelchair or hospital type bed;
- the difference in cost between ward and a semi-private hospital room;
- X-rays;
- private duty nursing when medically necessary on written prescription of your physician

Medavie Blue Cross will reimburse the above expenses up to the reasonable and customary expense if incurred while insured. Claim must be submitted within 52 weeks of the date of the accident.

Reimbursement under this section will not duplicate any payment provided under any other section of this policy. The maximum reimbursement under this section with respect to any one accident will not exceed \$15,000.

## Permanent Prosthesis Benefit

If, as a result of an eligible injury or accident and prescribed by a legally qualified physician, you require a permanent prosthesis, (i.e. artificial limb, eye) Medavie Blue Cross will reimburse the cost of the permanent prosthesis up to a maximum of \$1,000. The prosthesis must be prescribed and purchased within 365 days of the accident and you must have been insured as of the date of the accident.

## Critical Condition Benefit

If you are diagnosed with any of the diseases mentioned below, which first manifests while your coverage is in force, and require confinement in a hospital or the employment of a licensed or graduate nurse during the period your coverage is in force, Medavie Blue Cross will pay the excess medical expense actually incurred for such confinement or nursing charges if submitted within 52 weeks from the date of diagnosis, to a maximum eligible payment of \$2,500.

Diphtheria, Encephalitis, Leukemia, Poliomyelitis, Rabies, Scarlet Fever, Spinal Meningitis, Tetanus, Tularemia, Typhoid.

## Tutorial Benefit

If an accident causes an insured student to be disabled and confined to their home or hospital for a confinement period of 30 consecutive school days, Medavie Blue Cross will pay for the private tutorial services of a qualified teacher, up to a maximum of \$10 per hour, to a maximum of \$1,000. Payment for tutorial services will be eligible from the first day of confinement.

## Co-Ordination of Benefits

Claims will only be processed, if eligible, once any government health plan has been exhausted, which would include your provincial health coverage, or ADP benefits, if the expenses are eligible through these programs.

## Claim Submission for Prescription Drugs

Please note that, on or before October 15<sup>th</sup> (09F), February 15<sup>th</sup> (10W), and June 15<sup>th</sup> (10M), you will be required to pay in full for any medication required, and submit a claim form to Medavie Blue Cross for reimbursement with the prescription information and paid-in-full receipt attached. Until Medavie Blue Cross receives our student data file to update its systems, prescription drugs cannot be processed as "pay direct".

In the event you have a prescription drug claim, please complete a Medavie Blue Cross Claim Submission form (available at any CCSAI office), attach all original claim information and receipt(s) and mail directly to Medavie Blue Cross (address on claim form). We suggest you make a copy for your files. Claim reimbursement cannot be made until updated data has been received by Medavie Blue Cross and you are active on its systems.

After the above noted dates, any prescription drug claim can be submitted directly by your pharmacy. You must present your pharmacist your Centennial Student ID card along with your Student Health Card, which provides the policy number (0030394000) and your Identification number, which is your student number with two zeros added to the end.

Eligibility under the pay direct drug system is determined by the policy number (0030394000) and your student number (plus two zeros added to the end). Your pharmacist may request your full name and address when submitting the prescription so please have full identification with you.

The drug benefit is subject to a maximum of \$1,200 each academic year (which includes any or all of the following semesters in which you may be enrolled – 09F, 10W, and 10M).

## Claim Submission for Claims Other Than Drugs

All reimbursement claims must be submitted by completing a Medavie Blue Cross Claim Submission form (available at any CCSAI office). The claim form and all original receipts must be submitted to Medavie Blue Cross within 30 days of the date of the accident for which you are claiming.

If there is any additional information Medavie Blue Cross requires before processing the claim, Medavie Blue Cross will advise you.

## Adding Dependents

Couple (one dependent only) = \$40 (includes taxes)  
Family (more than one dependent) = \$65 (includes taxes)

\* Dependents are covered as of the date they are registered.

- \* Costs outlined above is on a per-semester basis.
- \* Coverage/details noted in this brochure also apply to dependents.
- \* The deadline to add dependents is 10 business days from the first day of each semester (09F – Sept 21/09, 10W – Jan 22/10, 10M – May 25/10).

Progress/HP/Ashtonbee campus payments may be made by debit, Visa or Master Card. Cash payments can be accepted, but are discouraged. CCC campus accepts cash only. Please note we cannot accept \$50 or \$100 bills. Sorry, NO EXCEPTIONS.

For more information regarding adding a dependent to your coverage, contact your CCSAI office during scheduled office hours.

## Periods of Coverage (Semesters of Coverage)\*

Fall 09      September 8, 2009 – December 18, 2009  
Winter 10    January 11, 2010 – April 30, 2010  
Summer 09   May 12, 2010 – August 20, 2010

\*Coverage dates for most programs; dates may differ for specific programs

Insurance coverage terminates at the end of the semester in which you are registered and premium has been received, or IMMEDIATELY UPON WITHDRAWAL FROM ENROLMENT STATUS. This includes any insured dependents as well.

## Dispensing Fee Cap of \$5

**You are responsible for paying the difference (if any) between the pharmacy dispensing fee and the \$5 cap, which is paid by Medavie Blue Cross. The dispensing fee is the charge the pharmacy adds as the cost of filling your prescription. Dispensing fees can vary widely depending on the pharmacy and it is to your advantage to be an informed shopper and purchase from pharmacies charging a lower dispensing fee.**

**For More Information, visit our website @ [www.ccsai.ca](http://www.ccsai.ca)**

This brochure is designed to outline the benefits provided under your policy and does not create or confer any contractual or other rights. The group Master Contract issued by Medavie Blue Cross will govern all rights with respect to coverage under group policy G-0030394.



# 2009 - 2010

# Student Health Plan

As a student who has paid the mandatory non-refundable \$17.50 Health Plan fee, you are eligible to receive the health care benefits outlined during the semester in which you are enrolled.

Policy Number	0030394000
ID Number	Your Student Number plus 00 at the end
BIN Number	610047
Carrier Code	OB

We suggest you take this brochure each time you visit your pharmacy. Brochures are available in all CCSAI offices or can be downloaded from our [www.ccsai.ca](http://www.ccsai.ca) website.

For claims inquiries, or if you encounter any difficulty at the pharmacy, please contact Medavie Blue Cross directly at **1-800-355-9133**.

Underwritten by:



Arranged by:  
**MORNEAU  
SOBECO**