

# *Extended Medical Benefits Plan*

**1<sup>st</sup>** *choice*

**A benefits  
program for  
managers and  
non-union  
employees**

**Alberta**

PERSONNEL  
ADMINISTRATION OFFICE

# Extended Medical Benefits Plan

The Extended Medical Benefits Plan covers many medical expenses and services not covered, or coverage is limited, under the Alberta Health Care Insurance Plan. You have a choice of Core or Enhanced coverage. The

premiums for the Core coverage are cost-shared 50/50 between you and the Employer. You pay a higher premium if you choose Enhanced coverage. For premium information, refer to your *1st choice Premium Rate Sheet*.

Coverage for prescription drugs is not included in the Extended Medical Benefits Plan. This coverage is available through the Prescription Drug Plan.

## Summary of Benefits

	Core Coverage	Enhanced Coverage
<b>Hospital</b>	Semi-private room.	Private room.
<b>Home Nursing Care</b>	Maximum of \$15,000 in 3 consecutive years.	Maximum of \$30,000 in 3 consecutive years.
<b>Other Medical Services Covered</b>	Up to 100%. Some maximums apply. <i>See descriptions in this brochure</i>	Up to 100%. Some maximums apply. <i>See descriptions in this brochure</i>
<b>Vision Care</b>	Eye Exams — up to \$50 per person every 24 months.	Eye glasses frames, lenses and contact lenses — up to \$350 per person every 24 months.
<b>Emergency Travel Benefits</b>	Not available.	\$2,000,000 per person per incident.
<b>Annual Maximum on all Expenses</b>	\$25,000	No maximum.

**Opt Out — No Coverage:** If you choose, you may opt out of coverage from this plan.

**Benefit Year:** July 1 to June 30.

**Claims Administrator:** All claims are administered by Alberta Blue Cross.

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## Core Coverage

All services and maximums are per insured person.

### Hospital

- semi-private accommodation.
- includes out-of-province in Canada hospital benefits.

### Eye Exams

- up to \$50 per person every 24 months, from the date of the last exam.

### Home Nursing Care

- covers only medically required nursing services of an RN, RNA or LPN after government and agency maximums have been reached.
- up to \$15,000 in a three year period.
- must be on written order of a physician and pre-approved by the Claims Administrator.
- coverage does not apply until all provincial program maximums have been reached.

### Paramedical Practitioners

All paramedical practitioner coverages are combined under one maximum of \$1,000 per person per benefit year.

Acupuncturist, Chiropracist, Chiropractor, Massage Therapist, Physiotherapist, Podiatrist, Speech Pathologist, Occupational Therapist, Sports Therapist

Up to \$50 per visit including one x-ray per service within a combined maximum of \$1,000 for all paramedical services, after any funding under provincial programs is first accessed, exhausted or not available. The \$1,000 maximum can be applied to the cost of surgery. Massage therapy treatment must be prescribed by a physician as medically necessary.

### Psychologist

Up to 80% per visit to a benefit year maximum of \$1,000 for individual or family therapy (not group) provided by a Chartered Psychologist or person holding a Master of Social Work degree.

### Medical Supplies

- disability scooter or wheelchair rental or purchase and repair to a maximum of \$4,000. One wheelchair or disability scooter in a three-year period on physician's written order; must be medically required and pre-approved by the Claims Administrator. Coverage includes lightweight titanium models within the maximum.
- hospital bed rental, or purchase and repair  
Must be on physician's written order; must be medically required and pre-approved by the Claims Administrator.

- splints, trusses, crutches, casts and canes.
- cervical collars.
- walkers, traction kits  
On written order of a physician.
- mastectomy prosthesis  
Up to \$200 every 24 months for a single prosthesis (\$400 for a double prosthesis). Must be on written order of a physician. Coverage also for a mastectomy supporting bra of up to \$50 per bra — \$100 per year.
- oxygen and equipment, rental or purchase  
Up to \$2,500 per year.
- colostomy and ileostomy supplies and urinary catheters  
Covered at 80% to a maximum of \$1,200 per year.
- diabetic supplies including urine and blood testing strips, lancets, penlets, needles, syringes and up to \$150 towards the purchase of a blood testing monitor on the written order of a physician, once every five years.
- surgical stockings  
Maximum of two pairs per year.
- stump socks  
Maximum of six pairs per year.
- medical durable or surgical equipment, and related products or supplies required to support the operation or maintenance of the equipment, on a physician's written order.

## **Ambulance**

- ambulance services to or from hospital.
- air and/or rail transportation if ground ambulance is not available or if it is in the patient's best interest.

## **Auxiliary Hospital Care**

- up to \$1,000 per person per year for auxiliary care in a hospital.

## **Accidental Dental Coverage**

- repair, extraction and/or replacement of natural teeth due to an accidental injury.
- maximum of \$2,000 per person per accident.

## **Prosthetics (artificial limbs and eyes)**

- includes purchase, repair or replacement of a prosthesis.
- must be a rigid support of metal or plastic manufactured according to the written order of a physician.
- does not include myoelectric controlled prostheses.

## **Wigs and Hairpieces**

- if required as a result of a medical need, to a maximum of \$400 per person in a lifetime.

## Permanent Braces

- 70% coverage for custom fitted braces once in a 24 month period.
- must be on written order of a physician.
- must incorporate rigid support and be custom fitted (not necessarily custom made).
- repairs included.

## Enhanced Coverage

All services under Core coverage are covered under the Enhanced coverage and in addition, Enhanced coverage includes:

### Home Nursing Care

- covers only medically required nursing services of an RN, RNA or LPN after government or agency maximums have been reached.
- additional \$15,000, *for a total of \$30,000*, in a three year period.
- must be on the written order of a physician and pre-authorized by the Claims Administrator.

### Disability Scooter or Wheelchair

- rental or purchase and repair to a maximum of \$ 8,000
- 1 unit every 3 years on the written order of a physician and pre-approved by the Claims Administrator.

## Hospital

- private accommodation.
- includes out-of-province in Canada hospital benefits.

## Vision Care

- \$350 every 24 months from last date of purchase for eye glasses — lenses and frames, contact lenses, including prescription sunglasses.

## Hearing Aids

- \$1000 every four years.
- must be prescribed by a physician or audiologist.

## Orthopaedic Shoes

- up to \$250 per person per year for custom shoes or adjustments to stock item footwear (cost of stock item footwear is excluded).
- must be prescribed by a physician.

## Foot Orthotics

- up to \$200 per person per year if prescribed by a physician, podiatrist or chiroprapist.

## Emergency Out-of-Country and Out-of-Province Coverage

- provides for travel assistance service that:
  - assists in locating physician and medical facility,
  - monitors medical treatment and informs family,
  - arranges transportation of a family member to location of patient,

- confirms coverage and co-ordinates payment to the hospital or physician,
- arranges transportation home for patient;
- covers reasonable and customary charges for emergency services, in excess of the amount paid by the Alberta Health Care Insurance plan including:
  - the cost of accommodation in a public general active treatment hospital,
  - outpatient services provided by a general active treatment hospital,
  - physicians and surgeons’ charges,
  - nursing services ordered by the attending physician,
  - drugs, laboratory tests and x-rays prescribed by a physician;
- limit of \$2,000,000 per incident;
- special coverage identification card issued to you and your covered spouse or benefit partner.
- a comprehensive description of the emergency travel benefits and coverage terms is located at the end of this booklet. Refer to “Emergency Travel Plan.”
- the plan covers your out-of-province hospital and medical costs including:
  - accommodation in out-of-province public, general, active treatment hospitals (no daily limit);
  - charges by out-of-province physicians and surgeons; and
  - out-of-province outpatient charges.

Payment is for costs in excess of the allowance provided by your Alberta Health Care plan. Payment limits are governed by the cost schedule in the jurisdiction in which treatment is provided.

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## Claim Procedures

### Hospital Benefits

In Alberta, present your Alberta Blue Cross Identification Card at the hospital. Alberta Blue Cross will be billed directly.

### Other Medical Expenses

Complete an ‘Alberta Blue Cross Health Services Claim Form’ to be reimbursed for covered expenses. Forms are available from Alberta Blue Cross, their website at [www.ab.bluecross.ca](http://www.ab.bluecross.ca) and most pharmacists. Mail your claim form, with original receipts, directly to Alberta Blue Cross. Your reimbursement cheque will be mailed to your home address.

You must submit your claim within 12 months of the date the service was provided in order to be reimbursed under this plan.

### Emergency Travel Expenses

Provide the special out-of-country or out-of-province coverage identification card for verification of coverage.

Most or all covered expenses are paid directly from the plan to the service providers. For any remaining emergency travel expenses, submit an ‘Outside Canada Claim Form’ (where applicable), with original receipts to Alberta Blue Cross.

## Co-ordination of Benefits

If your spouse or benefit partner is enrolled in a health care plan providing similar coverage, you can co-ordinate your claims so you could receive payment of up to 100% of eligible expenses from both plans.

After you are reimbursed from this plan, you can submit a claim to your spouse's or benefit partner's plan to be reimbursed for any remaining expenses. You and your spouse or benefit partner should submit claims under your own benefit plans first. If your spouse or benefit partner works for the Government of Alberta and is covered under this benefit plan, or the plan for bargaining unit employees, your claim will be co-ordinated by Alberta Blue Cross provided all the necessary information has been submitted.

## Changing Your Benefit Coverage

Extended Medical Benefits Plan	Anytime	Choice Time	Life Event Gain a Spouse or Benefit Partner or First Child	Life Event Lose a Spouse or Benefit Partner or Dependent Child's Loss of Coverage	Lose Coverage Under Spouse's or Benefit Partner's Plan or Change in Child's Eligibility
Coverage Level	No change allowed.	- increase one or two levels - decrease one level	- increase one or two levels	- increase one or two levels	- increase one or two levels
Choose Single or Family	Yes	Yes	Yes	Yes	Yes
When to Change		Between specified dates	Within 31 days of event occurring	Within 31 days of event occurring	Within 31 days

If your dependent children are covered under both your and your spouse's or benefit partner's plans, the claims should be submitted first to the plan of the parent with the birthday earliest in the calendar year, then to the other parent's plan.

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## Considerations in Choosing Extended Medical Benefits Coverage

- Think about your present and anticipated need of such things as eye exams, eyeglasses, paramedical practitioners (e.g. chiropractor, physiotherapist, etc.) — both for yourself and your family.
- Do you have coverage through your spouse's or benefit partner's employer?
- Do you have a need for those items available in the Enhanced coverage?
- How comfortable are you that Alberta Health Care and your personal resources would provide adequate coverage for unanticipated medical expenses?
- Are you better off paying a higher premium for two or more years for the Enhanced coverage or paying out-of-pocket for the expenses if incurred?
- If you want the Enhanced for the emergency travel coverage, is it cheaper to buy this coverage on your own? Will you always remember to buy it whenever you travel outside Canada?

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## Emergency Travel Plan

An emergency is described as a sudden unexpected occurrence of an unforeseen accident or illness requiring immediate medical attention.

### Benefits

Alberta Blue Cross will pay the reasonable and customary charges, for emergency services only, in excess of the amount paid by the provincial government health plan for:

- The cost of hospital accommodation in a public general active treatment hospital.
- Out-patient services provided by a public general active treatment hospital.
- Incidental expenses up to \$100 per hospital stay will be paid to the inpatient.
- Physicians' and surgeons' charges.
- Physiotherapist, chiropractor, chiropodist or podiatrist up to \$300 per specialty (including x-rays).
- Nursing services provided by a qualified, private registered nurse during the following hospitalization when ordered by the attending physician.
- Drugs, serums and injectables prescribed by a physician.
- The cost of blood, blood plasma or specialized treatments using radium and radioisotopes.



- The charge for laboratory tests and x-rays prescribed by the attending physician.
- The cost of splints, casts, crutches, canes, slings, trusses, walkers and/or the temporary rental of a wheelchair.
- Treatment to natural teeth as a result of a direct accidental external blow to the participant's mouth up to \$2,000 per accident. The participant must see a physician or dentist immediately following the accident and treatment must be completed within 182 days. An accident report is required from the physician or dentist.
- Relief of dental pain, excluding root canals, up to \$200 per trip when rendered at least 200 kilometres outside the participant's province of residence.
- Ambulance charges to the nearest qualified medical facility.
- Medical evacuation.
- One round trip economy airfare for a family member or friend to visit the participant while confined to a hospital for at least 3 days provided the attending physician verifies in writing that the situation is serious enough to require the visit, or to identify the deceased prior to the release of the body.
- Return of the deceased, includes preparation and transportation but not the cost of the coffin, reimbursed up to \$7,000. The cost of cremation or burial at the place of death reimbursed up to \$2,500.
- Return of vehicle to the participant's place of residence or to the nearest appropriate rental agency up to \$1,000 when the participant is unable to operate the vehicle due to unexpected illness or injury and when the travelling companion is also unable to do so.
- If the participant's vehicle is inoperable due to an accident, the cost of one way economy airfares will be provided to the participants to their province of residence.
- Meals and accommodation will be reimbursed up to \$150 per day to a maximum of \$1,500 for the extra costs incurred by the participant remaining with a travelling companion when return home is delayed due to illness or injury.
- Extra costs for commercial accommodation or meals up to \$150 per day to a maximum of \$1,500 incurred by a family member or friend visiting with a participant confined in hospital or to identify the deceased. This must be verified by the attending licensed physician that the situation is serious enough to have required the visit and be supported with receipts from commercial organizations.

## Travel Assistance

In the event of a medical emergency, contact must be made with the travel assistance service. For contact information, refer to the back of your Alberta Blue Cross card. They will provide:

- Medical Assistance
  - Assist in locating an appropriate physician, clinic or hospital.
  - Confirm coverage and co-ordinate payment to the hospital or physician.
  - Supervise the medical treatment and keep the family informed.
  - Arrange the transportation of a family member to the patient's bedside or to identify the deceased.
  - Arrange for transportation home of the patient, if medically necessary.
- General Assistance
  - Provide emergency response in most major languages.
  - Assist in contacting the participant's family, business partner or family physician.
  - Co-ordinate the safe return home of dependent children, if the adult is hospitalized.
  - Arrange the transmission of urgent messages to family members or business partners.
  - Provide referral to legal counsel in the event of a serious accident.
  - Co-ordinate claims processing and negotiate health care provider discounts.
  - Provide pre-departure information concerning visas and vaccinations.

## Limitations

1. The total amount payable for all benefits listed will not exceed \$2,000,000 in Canadian funds per participant per incident.
2. Benefits are payable for expenses incurred only during the period the contract is in force.
3. Benefits are payable only for expenses incurred outside Alberta boundaries. Benefits become effective at the time of crossing the Alberta border or if travelling by airplane, at the time the airplane takes off. The benefits cease on the return home at the Alberta border or when the airplane lands.
4. Alberta Blue Cross may not accept liability for hospitalization and related services if the travel assistance service is not contacted within 24 hours of admission. Failure to contact the travel assistance service may result in the payment of medical expenses being denied or delayed.
5. Alberta Blue Cross, in consultation with the attending physician, reserves the right to transfer the participant to another hospital or return the participant to their province of residence. Refusal to comply with the transfer request will absolve Alberta Blue Cross of any further liability.
6. Neither Alberta Blue Cross nor the approved travel provider shall be responsible for the availability, quality or results of any medical treatment or transportation or the failure of the applicant to obtain medical treatment.

## Exclusions

Benefits are not covered if:

1. Travel is booked or commenced contrary to medical advice.
2. A participant travels to another country primarily for hospitalization or services rendered in connection with:
  - to seek medical advice or treatment intentionally or incidentally, even if the trip is on the medical recommendation of a physician; or
  - general health examination for “check-up” purposes; or
  - rehabilitation or on-going care in connection with drugs, alcohol or any other substance abuse; or
  - in the nature of a rest cure or travel for health; or
  - for cosmetic purposes.
3. Expenses are incurred when the participant could have been returned to the province of residence without endangering their life or health, even if the treatment available in their province of residence could be of lesser quality or if the participant must go on a waiting list for that treatment.
4. Hospital accommodation or treatment is received in a hospital other than a general active treatment hospital.
5. Expenses incurred due to:
  - mental or nervous disorders unless Participant is hospitalized; or
  - suicide, attempted suicide or self-inflicted injury, whether sane or insane; or
  - abuse of medication, toxic substances, alcohol or non-prescription drugs; or
  - driving a motorized vehicle while impaired by drugs, toxic substances or an alcohol level of more than 80 milligrams in 100 millilitres of blood; or
  - commission of or attempt to commit, directly or indirectly, a criminal act under legislation in the area of commission of the offense; or
  - participation in an insurrection, war or act of war (declared or not), or the hostile action of the armed forces of any country, service in the armed forces, hijacking or terrorism, or participation in any riot, public confrontation, civil commotion, or any other act of aggression.

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## For Further Information

Contact Alberta Blue Cross if you have questions on a claim, or the benefits and services covered under this plan (have your plan identification card handy when you call). Your Group Number is 5.

Calgary	(403) 234-9666
Edmonton	(780) 498-8000
Fort McMurray	(780) 790-3390
Grande Prairie	(780) 532-3505
Lethbridge	(403) 328-1785
Medicine Hat	(403) 529-5553
Red Deer	(403) 343-7009

A toll-free line is available for people living outside these major areas:  
1-800-661-6995.

(07/05)

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