



TRAVEL

HEALTH INSURANCE

MATTERS!

Essential Information For Albertans
From Alberta Health and Wellness



P.E.I.



SAN FRANCISCO



PARAVION



LONDON

What Every Alberta Traveller Needs to Know

This brochure contains important information about health services covered by the Alberta Health Care Insurance Plan for Albertans who travel outside the province.

Before you leave Alberta, it is important that you understand what services the Alberta Health Care Insurance Plan **does and does not** cover outside Alberta. This information will enable you to make informed decisions about protecting yourself from unexpected health care costs.

Within Alberta, all registered Albertans are entitled to full coverage for medically required hospital and physician services under the Alberta Health Care Insurance Plan. However, when you travel outside Alberta, some health care services are not covered and others have maximum payment limits

Costs for health care services provided outside the province, especially outside Canada, can be much higher than in Alberta. This could result in personal financial hardship if you have not arranged for supplementary travel health insurance to cover the difference. Therefore, Alberta Health and Wellness recommends that you purchase travel insurance, even for short periods of travel (for more information see page 10, *Be Sure to Purchase Travel Health Insurance*).

Alberta Health and Wellness recommends that you always carry your Alberta Personal Health Card, and show it when you obtain health services.

If you are leaving Alberta for more than six months, contact Alberta Health and Wellness to make arrangements for your continued Alberta Health Care Insurance Plan coverage (for more information see page 7, *Extended Absence*).

Travel Within Canada	3-4
Travel Outside Canada	5-6
Extended Absence	7
Exclusions	8-9
Be sure to Purchase Travel Health Insurance	10
How to Submit a Claim	11
Traveller's Checklist	12-13



Travel Within Canada

What happens if I am travelling in another Canadian province or territory and require healthcare services?

Physician Services

If you are travelling in another Canadian province or territory and require physician services, simply show your Alberta Personal Health Card at the time of service. Medically required physician services are billed automatically to the Alberta Health Care Insurance Plan. The exception to this is the province of Quebec, where it is likely you will have to pay for the services you receive. Upon returning to Alberta you may apply to the Alberta Health Care Insurance Plan for reimbursement (see page 11, *How to Submit a Claim*).

If you do not have your Alberta Personal Health Card at the time of service, the physician providing the service may ask for immediate payment. If this happens, you will be required to pay for the services you need and then apply to the Alberta Health Care Insurance Plan for reimbursement (see page 11, *How to Submit a Claim*). Reimbursements will be paid at the same rate the physician(s) receive in their province or territory for the service(s) provided, or the amount billed, whichever is less.

Oral Surgical Services

The Alberta Health Care Insurance Plan pays benefits for insured medically required oral surgical procedures. Examples include cyst removal, joint and jaw surgery and bone grafts. Routine dental care such as cleanings, fillings and the extraction of wisdom teeth are not covered. If you receive an insured oral surgical service while in another province or territory, you may apply to the Alberta Health Care Insurance Plan for reimbursement (see page 11, *How to Submit a Claim*). Benefits are paid at the approved rate of the province or territory where you received the service(s).



Hospital Services

The Alberta Health Care Insurance Plan will pay benefits for health services you receive at a general or auxiliary hospital if you produce your Alberta Personal Health Card at the time of service. The province or territory in which you received the service(s) will bill the Alberta Health Care Insurance Plan its standard ward rate. If you choose a semi-private or private room, you will be responsible for paying the difference in cost.

If you do not produce your Alberta Personal Health Card at the time of service, the hospital may bill you for services provided. If this happens, you can submit a claim to the Alberta Health Care Insurance Plan for reimbursement. Reimbursement for insured services is made according to the approved rates of the province or territory where the service was received (see page 11, *How to Submit a Claim*).

Travel Outside of Canada

Be aware that costs for physician and hospital services are often much higher outside of Canada.

Physician Services

The Alberta Health Care Insurance Plan will pay benefits for out-of-country physician services at the same rate an Alberta physician receives. **You and/or your supplementary travel health insurance provider are responsible for paying the difference between what is charged and what the Alberta Health Care Insurance Plan pays** (see page 10, *Be Sure to Purchase Travel Health Insurance*).

If you are billed directly by a physician for services provided outside Canada, **you must pay for these services**. You can submit a claim to the Alberta Health Care Insurance Plan or, if applicable, to your private insurer for reimbursement (see page 11, *How to Submit a Claim*). Physicians outside Canada **may** submit a bill on your behalf for services you received.

Oral Surgical Services

The Alberta Health Care Insurance Plan pays benefits for insured medically required oral surgical procedures. Examples include cyst removal, joint and jaw surgery and bone grafts. Routine dental care such as cleanings, fillings and extraction of wisdom teeth are not covered. If you receive an insured oral surgical service while outside Canada, you may apply to the Alberta Health Care Insurance Plan for reimbursement (see page 11, *How to Submit a Claim*). These benefits are paid at the same rate an Alberta dental surgeon would receive for similar service(s), or the amount billed, whichever is less.



Hospital Services



The Alberta Health Care Insurance Plan has pre-set maximum, all-inclusive rates for hospital services provided outside of Canada. The maximum rate paid for hospital inpatient care is \$100 (CDN) per day, or the amount billed, whichever is less. The Alberta Health

Care Insurance Plan will pay for one outpatient visit per day at a maximum benefit of \$50 (CDN) per day, or the amount billed, whichever is less. To be eligible for payment, hospital services must be medically necessary and provided in a general or auxiliary hospital. The Alberta Health Care Insurance Plan does not cover hospital costs related to the day of your discharge.

If you are billed directly by the hospital, you must pay for the service(s). You can submit a claim to the Alberta Health Care Insurance Plan or, if applicable, to your private insurer for reimbursement (see page 11, *How to Submit a Claim*).

Extended Absence

If you leave Alberta to go to another province or territory and plan to return within 12 months, or leave for another country and plan to return within six months, you must retain your Alberta Health Care Insurance Plan coverage.

If you are leaving Alberta for a longer period, you may apply for the following extensions of coverage:

- four years (48 months) if the absence is due to work, business or missionary service.
- two years (24 months) if the absence is due to travel, personal visits or an educational leave (sabbatical).
- the time period you are a full-time student at an accredited educational institute.

If you are normally in Alberta for 183 days (six months) during the year, you remain eligible for Alberta Health Care Insurance Plan coverage. If you are in Alberta for a shorter period of time, but retain your ties to Alberta (e.g. permanent residence) you may contact Alberta Health and Wellness to determine if you remain eligible for coverage. Contact numbers are listed on the back of this brochure.





Be Aware of Exclusions!

Some services obtained outside Alberta are **not** covered by the Alberta Health Care Insurance Plan. It is extremely important that Albertans who travel outside the province are aware of these exclusions. Services not covered include:

- cosmetic surgery
- experimental procedures
- research program procedures
- transportation costs including ambulance, air ambulance, and returning injured or deceased persons to Alberta
- medical advice by telephone (Contact us for exceptions)
- medical-legal services
- anesthetic charges for services not covered by the Alberta Health Care Insurance Plan
- hospital charges not covered by the Alberta Health Care Insurance Plan, e.g. private room
- routine eye exams for Alberta residents 19 to 64 years of age
- routine dental care, dentures and eyeglasses (other than for Alberta Widows' Pension recipients and their dependants, who have limited coverage)
- hearing aids, medical and surgical appliances/supplies (other than for Alberta Aids to Daily Living recipients, who have some coverage through Seniors and Community Supports)
- clinical psychologist services
- prescription drugs
- third-party medical services, e.g. for employment, insurance or sports purposes; and for driver's licenses for individuals under the age of 74.5 years
- immunization (some exceptions apply in-province; contact your regional health authority for details)
- service(s) provided by an acupuncturist, licensed massage therapist, midwife, homeopath, social worker, or nutritionist
- physical therapy services (unless provided as an outpatient service in a hospital)
- treatment of drug and alcohol abuse, eating disorders, and other addictive behaviours, unless prior approval is obtained

- chiropractic, podiatry and optometric services obtained outside of Alberta

Within Canada, provincial and territorial health insurance coverage can vary. Some health care services received outside Alberta are not covered by the hospital and medical services agreements between provinces and territories. Examples of some of these exclusions include:

- periodic routine health examinations
- in-vitro fertilization and artificial insemination
- surgery to reverse sterilization
- treatment of port-wine stains except on the face or neck
- acupuncture, acupressure, transcutaneous electro-nerve stimulation (TENS), moxibustion, biofeedback, and hypnotherapy

If you obtain a service that is not covered in the hospital and medical services agreement between Alberta and the province or territory where you obtained the service, you will be asked to pay for the service at the time it is provided. When you return to Alberta, you can inquire as to whether or not the service you received is payable in Alberta. If it is, you can apply for reimbursement. Any payments will be made in Canadian funds, according to Alberta rates or the amount billed, whichever is less.

From time to time there are changes to the Alberta Health Care Insurance Plan coverage. Contact Alberta Health and Wellness (see back cover) if you have questions about whether a health care service is covered by the Alberta Health Care Insurance Plan. To reduce the risk of unexpected health care costs **make inquiries before you receive a service.**





Be Sure to Purchase Supplementary Travel Health Insurance

Alberta Health and Wellness strongly recommends that you purchase supplementary travel health insurance **whenever** you leave the country, **for both short and long trips**.

Supplementary travel health insurance can be purchased through most travel agencies, at some banks, and from private insurance companies.

If you are purchasing supplementary travel health insurance, be sure to ask if it covers health services for pre-existing conditions such as heart disease or pregnancy. **If an insurer refuses to cover your pre-existing condition(s), you risk having to pay for expensive health care services that exceed the Alberta Health Care Insurance Plan basic out-of-country benefit rates.** If this is the case, you may want to find a different insurer or reconsider your travel plans.

Alberta Health and Wellness has entered into contracts with some supplementary travel health insurance providers. If an out-of-country claim is made, these insurers are allowed to directly pay their portion of the claim and the Alberta Health Care Insurance Plan portion. **However, this does not mean supplementary travel health insurers with contracts will cover all health care costs. Be sure to ask what health care services will and will not be covered.**

There is an advantage to choosing an insurer who has a contract with Alberta Health and Wellness. Companies that have a contract provide faster and more convenient claims service. Most large insurance companies have a contract with Alberta Health and Wellness.

Before you purchase supplementary travel health insurance for out-of-country travel, ask if the insurer has a contract with Alberta Health and Wellness. You can then make an informed decision about your best options.

How to Submit a Claim

If you received insured medical and hospital services outside Canada, complete an **Out-of-Country Health Services Claim Form (AHC0934)** and submit it to our office.

If you received and paid for practitioner services within Canada, complete an **Out-of-Province Claim for Physician/Practitioner Services (AHC0693)** claim form and submit it to our office. For hospital services, submit an original receipt. Be sure to include your personal health number.

The claim forms are available on our website at www.health.gov.ab.ca or from an Alberta Health and Wellness office (see back cover).

Follow the instructions for completing the form and ensure that you:

- Fill out all sections that apply to your claim.
- Attach clear copies of bills and receipts on official letterhead or statements.
- Provide separate bills for physician/practitioner services and hospital services, and ensure they include an itemized list of services received.
- Include an English translation of bills and receipts that are in other languages.

Claims for services received outside Alberta must be submitted to the Alberta Health Care Insurance Plan within 365 days of the date of service. They can be sent in by fax or mail (see back cover).

Once your claim is processed, you will be sent a Statement of Account, which you can submit to your secondary insurer, if applicable, to cover any remaining costs. Your claim(s) should be processed within six to eight weeks of being received by Alberta Health and Wellness. However, during times of increased travel, claim volumes can increase and processing may take ten to 12 weeks.



Traveller's Checklist

Before You Leave

- Take your Alberta Personal Health Card with you.
- Familiarize yourself with health services covered by the Alberta Health Care Insurance Plan outside Alberta.
- Contact Alberta Health and Wellness if you are leaving Alberta for more than six months.
- Know that you retain your Alberta Health Care Insurance Plan coverage if you leave Alberta for another province or territory and plan to return within 12 months, or if you leave for another country and plan to return within six months.
- Make arrangements with Alberta Health and Wellness to ensure continuous coverage while you are away, whether your absence is long or short.



- Contact Alberta Health and Wellness prior to leaving the province to receive treatment for drug and alcohol abuse, eating disorders and other behavioral disorders. Prior approval must be obtained before receiving special physician and/or hospital services that are not available in Canada.
- Purchase supplementary health insurance.** For out-of-country travel, ask if the insurer has a contract with Alberta Health and Wellness (most large insurance companies do). Companies that have a contract provide faster and more convenient claims service, so you may want to choose one of these insurers.

While You're Away

- Carry your Alberta Personal Health Card at all times.
- Present your Alberta Personal Health Card before you receive a health service.
- Carry your supplementary travel health insurance documentation at all times.
- Keep all receipts and documents (or good quality copies) to submit with your claim if you receive health services while you are away from Alberta. Ensure physician service charges and hospital service charges are listed on separate bills.

When you return

- Notify Alberta Health and Wellness of your return if you have been away for an extended absence.
- Submit a claim to Alberta Health and Wellness if you incurred out-of-pocket medical expenses (see page 11, *How to Submit a Claim*).

Contact Us

Please quote your Alberta personal health number when making an inquiry by one of the following methods:

Mail:

Alberta Health and Wellness
P.O. Box 1360, Station Main
Edmonton, AB T5J 2N3

Website:

www.health.gov.ab.ca

Fax:

(780) 422-1958 in Edmonton

Phone:

(780) 427-1432 in Edmonton
Toll-free in Alberta:
310-0000, then dial (780) 427-1432

Deaf and hearing impaired callers with a TTD/TTY should call (780) 427-9999 in the Edmonton area or 1-800-232-7215 (toll-free) from elsewhere in the province.

In person:

8:15 a.m. to 4:30 p.m. Monday to Friday

Main floor offices at:

10025 Jasper Avenue NW, Edmonton
or
727 7 Avenue SW, Calgary

E-mail:

AHCIPMAIL@health.gov.ab.ca

For your protection, please do not transmit your Alberta personal health number or other personal information by e-mail.

**Purchasing Travel Health Insurance
Makes Sense**