

University of Windsor

Benefit Plan: Provincial Plan Replacement

Classification: International Students

Billing Division Classification

100 International Students
200 Visiting Researchers
300 Exchange Students

Effective Date: January 1, 2020

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BENEFIT PLAN: PROVINCIAL PLAN REPLACEMENT

This plan provides coverage for hospital and medical expenses described in this booklet and received in Canada when required due to sickness or accident that occurs while this coverage is in force, as long as you continue to satisfy the Eligiblity Requirements stated below. The coverage is provided by your Plan Sponsor, the University of Windsor, through the contract between your Plan Sponsor and Green Shield Canada (GSC).

The benefits under this plan are eligible only when medically necessary for the treatment of an illness or injury. Reimbursement is limited to reasonable and customary charges for such eligible expenses up to the amount allowed under the Provincial Health Insurance Plan.

There is no coverage for expenses you incur for services, drugs, or treatment that are not eligible under the Provincial Health Insurance Plan.

DEFINITIONS

Benefit year means the 12 consecutive months commencing on September 1st and ending on August 31st of each year.

Dependent means

- a) your spouse under age 65. Spouse means the person to whom you are legally married or, if not legally married, the person with whom you have lived in a common-law relationship for more than 1 continuous year. Cessation of cohabitation with a common-law spouse will result in termination of the common-law spouse's coverage under this plan. Only one spouse will be considered at any time as being covered under the group contract;
- b) your unmarried child under age 21;
- c) your unmarried child under age 25, if enrolled and in full-time attendance at an accredited college, university or educational institute; and
- d) your unmarried child (regardless of age) who became totally disabled while eligible under b) or c) above, and has been continuously so disabled since that time and is considered a dependent.

Your child (your or your spouse's natural, legally adopted, or stepchildren) must reside with you in a parent-child relationship or be dependent upon you (or both) and not regularly employed.

This plan does not cover children who attend school outside of the province or country.

Misrepresentation means failure to report medical test results or submission of false medical test reports to Immigration, Refugees and Citizenship Canada in order to obtain medical clearance.

Plan Sponsor means the University of Windsor.

Reasonable and customary means in the opinion of GSC, the usual charge of the provider for the service or supply, in the absence of insurance, but not more than the prevailing charge in the area for a like service or supply.

Student means a person who satisfies the requirements of one of the following student designations during the current semester:

Full-time undergraduate student means a person who is either:

- a) enrolled in and attending at least 4 courses during the current semester; or
- b) a student who has been validly registered with Student Accessibility Services and is enrolled in and attending at least 3 courses.

<u>Full-time graduate student</u> means a person who has been designated as full-time by the Faculty of Graduate Studies, and is enrolled and attending course(s) as required.

<u>Part-time student</u> means a person who is enrolled in and attending at least one course, but fewer than 4 courses during the current semester, with the exception of students registered with Student Accessibility Services and who are enrolled in and attending 3 courses.

ELIGIBLITY

Eligibility Requirements For You

To be covered under this plan, you must:

- a) be residing in Canada;
- b) be under age 65; and
- c) satisfy all the requirements of either a full-time or part-time student as set out below:

A full-time undergraduate or graduate student must:

- i. have a valid study permit or temporary resident visa issued by Immigration, Refugees and Citizenship Canada;
- ii. be registered in a degree program at the University of Windsor; and
- iii. be actively working toward an undergraduate, graduate or post-graduate degree.

A part-time* student must:

- i. have been previously enrolled as a full-time student;
- ii. have a valid study permit or temporary resident visa issued by Immigration, Refugees and Citizenship Canada;
- iii. be registered in a degree program at the University of Windsor; and
- iv. be actively working toward an undergraduate, graduate or post-graduate degree.
- * You may be enrolled as a part-time student for a maximum of 6 semesters. Upon completion of your 6th semester as a part-time student, you must return to full-time student status in order to retain coverage under this plan.

Eligibility Requirements For Your Dependents

To be covered under this plan, each of your dependents must:

- a) be residing with you in Canada;
- b) be under age 65: and
- c) continue to satisfy the definition of a dependent.

Coverage Start and End Dates and Coverage Periods

If you have satisfied the Eligibility Requirements and your Plan Sponsor has enrolled you for coverage under this plan, your coverage will start on the 1st day of the month in which the semester you're enrolled in begins and will end on August 31st of that school year, unless otherwise stipulated in the Termination section. Your coverage will be in place for the coverage periods below, as long as you continue to satisfy the Eligibility Requirements.

Semester Starts	Coverage Starts	Coverage Ends	Coverage Period
September	September 1st	August 31st	12 months of coverage
January	January 1st	August 31st	8 months of coverage
May	May 1st	August 31st	4 months of coverage

If you arrive in Canada prior to the beginning of your semester, you will be permitted to purchase one additional month of coverage for the month immediately preceding the month in which your semester starts;

Coverage for your eligible dependents who reside with in you in Canada will begin on the same date as your coverage as long as they satisfy all the Eligibility Requirements For Dependents and the definition of a Dependent. Coverage for your eligible dependents will not become effective until they have arrived in Canada and are residing with you. Under no circumstances will coverage for your Dependents begin before your coverage begins and you have been enrolled in the plan.

CONTINUTION OF COVERAGE DURING A LEAVE OF ABSENCE

Your coverage may be continued during a leave of absence from your studies at the University of Windsor if:

- a) you applied to and received approval from the University of Windsor for a non-medical leave of absence at least one month prior to the date you intend to take your leave. Non-medical leaves of absence will not exceed a period of 4 months during any one acedemic year; or
- b) you are unable to attend classes for medical reasons. Preapproval from the University is waived for such leaves. Medical leaves of absence will not exceed a period of 4 months during any 12-month period.

If you do not resume your studies at the end of your approved leave of absence, your coverage will terminate.

EXTENSION OF COVERAGE

If you have completed all your courses, have written all your final examinations, and have graduated, the University of Windsor will extend your coverage to the end of the second month following the date you write your final exam.

TERMINATION

For You

This coverage terminates upon the earliest of the following dates occurs:

- a) the end of the month in which you cease to satisfy any of the Eligibility Requirements;
- b) the expiration of the period described in Continuation of Coverage During a Leave of Absence;
- c) the expiration of the period described in the Extension of Coverage;
- d) the end of the month in which you have completed all the courses required in order to graduate from your program, unless you are enrolled for the following semester as either:
 - i. a full time graduate student; or
 - ii. a full time undergraduate student who is pursuing another degree;
- e) the date evidence of misrepresentation is received;
- f) the date you are approved for coverage under the Ontario Health Insurance Plan;
- g) the date you attain age 65;
- h) the date this plan terminates; or
- i) the date the Plan Sponsor ceases to make payment to GSC for this coverage.

For Your Dependents

The coverage for your dependents terminates upon the earliest of the following dates occurs:

- a) the date your coverage terminates;
- b) the end of the month in which your dependent ceases to satisfy any of the Eligibility Requirements;
- c) the end of the month in which your dependent ceases to satisfy the defintion of a Dependent;
- d) the date evidence of misrepresentation is received;
- e) the date this plan terminates; or
- f) the date the Plan Sponsor ceases to make payment to GSC for this coverage.

There is no Survivor Continuation of Coverage under this plan.

ELIGIBLE SERVICES

Medical Services

GSC 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

- a) The limitations and exclusions are as outlined by the Provincial plan.
- b) The maximum amount payable is \$1,000,000 per person per Benefit Year.
- c) Persons age 65 and over 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 P.O. Box 277 Waterloo, ON N2J 4A4 1.800.363.1835

FRAUD

GSC reserves the right to request supplementary claims information. Failure to respond to such requests may result in the denial of the claim.

The intentional omission, misrepresentation, or falsification of information relating to any claim constitutes fraud. Submission of a fraudulent claim is a criminal offence and will be reported to the applicable law enforcement and/or regulatory agencies and your plan sponsor. This could result in termination of your coverage under this benefit plan.