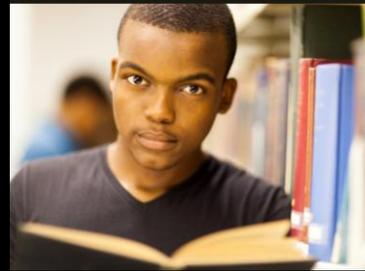


Health & Dental Booklet

September 2014 – August 2015



Holland College Student Union is pleased to sponsor the Health and Dental Benefit Plan (“the HCSU Plan”), outlined in this booklet. All benefits are reimbursed directly from The Campus Trust, unless otherwise noted. This Booklet provides you with a description of the benefits to which you are entitled, an explanation of the rules regarding eligibility and the procedures to follow when submitting a claim. The benefits described here may be revised from time to time or discontinued.

The information contained in this booklet does not create or confer any contractual or other rights. All claims are considered, and paid, in accordance with the rules of the Plan and the insurance contracts. The Campus Trust and/or Insurance Companies have the full authority to resolve all questions related to the provisions of the HCSU Plan. The Campus Trust has the right and opportunity to examine any person whose injury or illness is the basis of a claim, when and as often as it may reasonably require during the pendency and payment period of any such claim.

Your student identification number, name, gender, and date of birth are used by The Campus Trust to determine your eligibility for benefits while you are a member of the HCSU Plan. Without the use of this information you are still covered for benefits, however, your claims may not be adjudicated. Your personal information is used only for this purpose and stored with the utmost attention to security and deployed sparingly to fulfill the requirements of the HCSU Plan and the law. For further information on the use of this information or to revoke the use of this information, contact The Campus Trust.

For Benefit Plan details, reimbursement and claim enquiries contact:

The Campus Trust
1st Floor, Beothuck Building
20 Crosbie Place
St. John’s, NL, A1B 3Y8
Tel: 1 (800) 563-1930 or 709-754-6633

ask.nl@pbas.ca

www.studentbenefits.ca



QR CODE SCAN
for SmartPhone use

For information regarding eligibility and rates contact the Campus Administrator:

Holland College Student Union
140 Weymouth Street
Charlottetown, PEI, C1A 4Z1
Tel: (902) 566-9630
Fax: (902) 566-3764

gdgairns@hollandcollege.com

www.hcsu.ca



QR CODE SCAN
for SmartPhone use

Important Deadlines

To exclude yourself from the plan, you must complete the opt-out form, online at www.studentbenefits.ca by the deadline provide by the Health & Dental Plan Administrator.

Table of Contents

ELIGIBILITY	1
Am I eligible for benefits?	1
Are my Spouse and/or Dependant Children eligible for benefits?	1
How do I add my Spouse and Dependant Children to the plan?	1
When does coverage terminate?	2
Can I opt out of the Health and/or Dental Plan?	2
Is there a reason why I should keep the HCSU Plan, if I am covered elsewhere?	2
When will I receive my refund if I choose to opt out of the HCSU Benefit Plan?	2
HEALTH BENEFITS-AT-A-GLANCE	3
Is there a brief description of the coverage offered by the Health Plan?	3
DENTAL BENEFITS-AT-A-GLANCE	4
Is there a brief description of the coverage offered by the Dental Plan?	4
DESCRIPTION OF HEALTH CARE BENEFITS	5
Is there a complete description of the coverage offered by the Health Plan?	5
Are there limitations to the Health Care Benefit Plan?	10
DESCRIPTION OF DENTAL BENEFITS	11
Is there a complete description of the coverage offered by the Dental Plan?	11
Are there any limitations to the Dental Care Benefit Plan?	13
REGISTER FOR ONLINE SERVICES	14
Benefits Card	14
Claim Submissions	14
Direct Deposit	15
Claim History	15
Benefit Balance	15
SUBMITTING A CLAIM	16
How long do I have to submit a claim?	16
Can I assign my benefits to a provider?	16
Where do I get my Benefits Card?	16
Can claims be submitted using my Benefits Card?	16
How do I submit a claim without a Benefits Card?	17
Will my Benefits Card always work?	17
Can I avoid the "Blackout Period"?	17
What if I have more than one plan?	17

Eligibility

Am I eligible for benefits?

To be eligible for coverage you must be:

- enrolled as a full-time student at Holland College; and
- under the age of 65; and
- covered under a Provincial Health Care Plan or equivalent.

Full-time students are automatically enrolled in the HCSU Health and Dental Benefit Plan when they register for classes. The Health and Dental fee is automatically applied to your account. If you have fulfilled the requirements for eligibility, you will have a twelve (12) month term of coverage commencing on the first day of the month your course begins.

Are my Spouse and/or Dependant Children eligible for benefits?

Yes, your Spouse and Dependant Children can be covered for benefits. In order to be eligible, your dependants must be covered under a Provincial Health Care Plan and you must pay the applicable fee before the deadline. Your spouse and dependant children become eligible when you become eligible.

Spouse - a person, either opposite or same sex, to whom you are legally married or whom you have cohabited with, for at least, one continuous year, and under the age of 65.

Dependant Children – include children either natural, legally adopted, stepchildren or other children that live with you on a full-time basis, who are under the age of 21 and depend on you for support while living in a parent-child relationship.

Children, under the age of 25 who are in full-time attendance at an accredited educational institution or unmarried dependant children over the age of 21 who have been identified as disabled, are also eligible for coverage. Documentation will be required each student year.

Did you know...

The benefit maximums listed in this booklet apply to each dependant individually, unless otherwise noted.

How do I add my Spouse and Dependant Children to the plan?

If you choose to add your eligible spouse and/or dependant children to the HCSU Plan, you must complete the required form, online at www.studentbenefits.ca. You must complete this process by the deadline supplied by the health and dental administrator.

Eligibility

When does coverage terminate?

Coverage, for you and your dependants, will terminate at the end of the 12-month term for which you are covered; unless:

- you cease to be an eligible student;
- you attain the age of 65;
- premium payments by Holland College Student Union cease; or
- your plan is discontinued.

Coverage for your dependants will terminate on the date your dependants no longer meet the definition of an eligible dependant.

Can I opt out of the Health and/or Dental Plan?

In order to opt-out of this plan, you must be enrolled in another health and/or dental plan. Proof of coverage for health is required before you are able to opt-out.

If you choose to exclude yourself from the Plan, you must complete the required form, online at www.studentbenefits.ca before the deadline set out by the Student Union or at an opt-out session that is held in your centre.

Is there a reason why I should keep the HCSU Plan, if I am covered elsewhere?

The HCSU Benefit Plan has been specifically designed around student needs, by Students. By remaining enrolled in both this plan and another plan, you can maximize your total coverage by coordinating the benefits of the two plans.

Students who have more than one group benefit plan can coordinate their benefits under each plan to increase coverage to 100% of the total eligible expense. The payments from each plan are adjusted to limit the reimbursement to the total expense paid.

When will I receive my refund if I choose to opt out of the HCSU Benefit Plan?

If you are already covered under an extended health and dental plan, and you choose to opt-out of this Plan, the HCSU will refund the fee.

When your opt-out request has been approved, it will remain in force for the entire student year unless your alternate extended health and/or dental plan terminates. You have 30 days from the loss of coverage to notify The Campus Trust; in order, to be covered under our plan for the remainder of the student year. You must provide a copy of your Notice of Termination and pay the applicable fees.

Health Benefits-at-a-Glance

Is there a brief description of the coverage offered by the Health Plan?

Our plan offers a brief description of the coverage called Health Benefits-at-a-Glance which is listed below. This has been created as an easy way to assist students to maximize health coverage. This is a basic overview of your health plan; complete descriptions of all benefits including specific limits are listed further in this booklet. It is recommended that you contact The Campus Trust before incurring any major expense.

Coverage	Limitations
Accidental Dental	\$1,000 per injury
AD&D	See Schedule of Losses
Ambulance	No Maximum
Durable Medical Equipment *	\$3,000 per student year
Eye Exam	\$50 every 24 months
Eye Wear	\$100 every 24 months
Foot Care *	Covered at 50% up to \$200 per student year
Health Practitioners	See maximums below
Acupuncturist	\$40 per visit, \$500 per student year
Chiropractor	\$40 per visit, \$500 per student year
Massage Therapist *	\$40 per visit, \$500 per student year
Naturopath	\$40 per visit, \$500 per student year
Physiotherapist *	\$40 per visit, \$500 per student year
Podiatrist/ Chiropodist	\$40 per visit, \$500 per student year
Psychologist/Registered Social Worker	\$500 per student year
Speech Therapist *	\$40 per visit, \$500 per student year
Prescription Drugs	Covered at 80% up to \$3,000 per student year
Student Assistance Program	24 hours a day, 7 days a week. 877-234-5327.
Travel Benefit	\$5,000,000 per lifetime
Tutorial Benefit	\$15/hour, \$1,000 maximum per disability

* Referral Required

Dental Benefits-at-a-Glance

Is there a brief description of the coverage offered by the Dental Plan?

Our plan offers a brief description of the coverage called Dental Benefits-at-a-Glance and is listed below. This has been created as an easy way to assist students to maximize dental coverage. This is a basic overview of your dental plan; complete descriptions of all benefits including specific limits are listed further in this booklet. It is recommended that you submit a pre-determination from your dentist, and submit to The Campus Trust before incurring any major expense.

Benefit Maximum per Student Year - \$1,000

Treatment Type	Description	
Diagnostic & Preventative	100%	Exams/X-Rays Cavity Prevention (Scaling, Polishing) Space Maintainers
Restorative	80%	Fillings
Endodontic	10%	Root Canals Pulpotomy
Periodontic	10%	Root Planing Management of Oral Disease Desensitization
Minor Oral Surgery	50%	Extractions - Erupted teeth Residual root removal
Major Oral Surgery	50%	Extractions – Surgical
	10%	Fractures/Surgical excision/Incision
Anesthesia	80%	General/Deep Inhalation/Intravenous
Payments will be based on the Prince Edward Island Dental Association Suggested Fee Guide for Dental Services provided by General Practitioners in effect at the time of treatment.		

Limitations exist within each treatment type. No amount will be reimbursed for crowns, bridges, dentures, bite plates, major restorative, or orthodontic services. For a complete list of Dental Procedure Codes eligible under your Plan, please visit our website www.studentbenefits.ca to see the Dental Benefits-at-a-Glance.

Description of Health Care Benefits

Is there a complete description of the coverage offered by the Health Plan?

This section of the booklet contains information pertaining to the health portion of your benefit plan. Your benefits come into effect after any Provincial Health Care annual maximums have been exhausted.

Covered charges are reasonable and customary expenses needed for medical care, services or supplies, as described below, and received while the person is eligible, for either an illness or injury that is non-occupational or related to pregnancy. No amount will be payable for taxes and/or shipping and handling charges/fees for any covered service/product(s).

Accidental Dental - \$1,000 per injury

Charges for dental services by a licensed dentist for the repair of sound natural teeth (healthy, non-diseased and not heavily restored) are covered when required for a non-occupational accidental injury, external to the mouth, which occurs while the person is covered. No amount will be payable for injury caused by an object placed in or on the mouth, self-inflicted or to existing dentures, crowns, or bridgework.

Benefits shall be paid in accordance with the Prince Edward Island Dental Fee Guide for General Practitioners, in effect at the time of treatment. Treatment must commence within 90 days following the date of the accident, and the care or services must be completed within one year from such date. No amount shall be payable for charges incurred after the termination date, or after the person's coverage terminates.

When submitting a claim for Accidental Dental, you are required to submit a letter detailing when and how the accident happened. The attending dentist must confirm that the treatment is the result of an accident. It is recommended that the dentist submit a predetermination outlining the course of treatment and the resulting cost.

Eligible Accidental Dental claims must first be submitted to the Health Care Plan. Once this benefit is exhausted, remaining expenses can then be considered under the Dental Care Plan.

Accidental Death and Dismemberment (AD&D) – AD&D Booklet on Website

(This benefit underwritten by ACE INA under Policy Number 30727025.)

This coverage applies to the student only. The amount of the benefit is limited to the percentage shown in the Schedule of Losses. To see complete details of coverage, or to download your copy of the Accidental Death and Dismemberment Policy, please visit www.studentbenefits.ca. Please ensure that you visit the website to designate your beneficiary.

Description of Health Care Benefits

Ambulance – No Maximum

Charges for licensed ambulance service are covered, including air or rail, in excess of the amount payable under the covered person's Provincial Health Care Plan.

The coverage includes the transport of the covered person from the place of debilitation to the nearest hospital where treatment is available, or from the first hospital to another for specialized treatment not available at the first hospital, or to a convalescent/rehabilitation hospital.

Durable Medical Equipment - \$3,000 per student year (Referral Required)

Charges are covered for the rental or purchase of durable medical equipment based on the nature and severity of the covered person's medical needs. Before incurring any major expenses, it is recommended you submit details to The Campus Trust to determine to what extent benefits are payable. Covered items include, but are not limited to:

- wheelchairs (repairs, \$250 per lifetime);
- respiratory equipment, including oxygen (\$1,500 per student year);
- contact lenses/glasses following cataract surgery (1 pair per lifetime);
- canes, crutches, walkers, casts, splints catheters;
- compression stockings (2 pairs per student year);
- blood glucose monitor (\$500 per student year);
- insulin pumps (\$500 per lifetime);
- Intra-Uterine Devices with no medicinal content, (1 per student year);
- aero chamber (1 per student year);
- custom-made rigid or semi-rigid braces (not for athletic use) for back, neck, arm or leg (\$1,000 per lifetime, per condition);
- non-dental prostheses such as artificial limbs and eyes; including replacement if required because of a change in physical condition.

Excluded are items required for athletic use, personal comfort, convenience, exercise, safety, self-help or environmental control items, or items which may also be used for non-medical reasons, such as, but not limited to: heating pads or light therapy devices, communication aids, air conditioners or cleaners, and whirlpool baths or saunas.

Before incurring any major expenses you should submit details to The Campus Trust to determine to what extent benefits are payable. In any event, a letter will be required from a licensed doctor (M.D.) describing the nature of the disability, the type of equipment, medical need and estimated duration of any required durable medical equipment.

Description of Health Care Benefits

Eye Exam – \$50 every 24 months

One eye examination, by an ophthalmologist or optometrist, registered and legally practicing within the scope of his or her license is covered. No amount will be paid for contact lens fitting fee.

Eyewear - \$100 every 24 months

Lenses and frames or contact lenses, when prescribed by an ophthalmologist or optometrist, are covered. Laser eye surgery; in lieu of lenses and frames, will also be covered, up to the Benefit Maximum. No amount will be paid for non-prescription glasses, such as safety or sunglasses, anti-reflective coatings or for tints.

Foot Care - 50% up to \$200 per student year (Referral Required)

Charges for custom-made orthopedic shoes (including repairs), arch supports, molds and orthotics, which have been specially designed and molded for the covered person, are covered when required to correct a diagnosed physical impairment and recommended by a licensed doctor (M.D.).

Health Practitioners - \$40 per visit up to \$500 per student year

Services provided by the following Health Practitioners, are covered when providers are registered and legally practicing within the scope of his/her license:

- Acupuncturist (referral required)
- Chiropractor
- Massage Therapist (referral required)
- Naturopath (consultation only)
- Physiotherapist (referral required)
- Podiatrist/Chiropodist
- Psychologist/Registered Social Worker (no session maximum)
- Speech Therapist (referral required)

If an X-Ray is recommended by any of the above Health Practitioners, an additional \$25 is covered towards this expense. No amount will be paid for any visit for which any amount is payable under the covered person's Provincial Health Care Plan, unless permitted by law.

Description of Health Care Benefits

Prescription Drugs - 80% up to \$3,000 per student year

Coverage is limited to the cost of the lowest priced equivalent item in the applicable generic category that can be legally used to fill your prescription. Our plan covers up to a 34-day supply of therapeutic (acute) drugs and up to a 100-day supply for maintenance drugs unless prior approval is obtained from The Campus Trust.

Our Plan covers a list of prescription drugs, professionally compiled to address the needs of students. The "Student Managed Drug Formulary" is designed to help reduce the cost of the Plan while maintaining comprehensive quality care and benefits.

Did you know...

Your Pay-Direct Drug Card can be printed on www.studentbenefits.ca which allows your Pharmacist to submit your claims electronically.

Eligible drugs including those within the following general categories:

- eligible drugs which by law require a prescription for purchase
- compound mixtures where one of the ingredients is an eligible item.

It should be noted that drugs are only considered eligible if they were prescribed by a licensed doctor (M.D.) or licensed dentist or another professional, authorized by provincial legislation to prescribe drugs, and dispensed by a registered pharmacist or licensed doctor (M.D.).

The plan is limited to one intra-uterine device (IUD) that contains medicinal content per student year. IUD's that do not contain medicinal content may be eligible for coverage under the Durable Medical Equipment benefit.

The only drugs not legally requiring a prescription which will be reimbursed if accompanied by an official prescription receipt from the pharmacist are:

- insulin;
- diabetic supplies:
 - insulin syringes and needles;
 - diagnostic reagents for the diagnosis and monitoring of diabetes;
 - lancets;

Description of Health Care Benefits

Prescription Drugs - 80% up to \$3,000 per student year (cont'd)

Specifically excluded from coverage, whether legally requiring a prescription or not, are:

- vaccines/serums;
- all smoking cessation products;
- fertility drugs;
- prescription mouthwashes;
- hair loss and hair growth agents;
- vitamins (other than injectible);
- dietary foods / supplements;
- household products such as, but not limited to, soap and toothpaste;
- oral drugs for the treatment of erectile dysfunction.

For your convenience, you may choose to have your maintenance or long-term medication prescriptions filled by mail at a reduced cost. Maintenance

medications control chronic conditions such as high blood pressure, cholesterol, birth control and depression. They are prescribed by your physician for extended periods of time. If you have a prescription for an acute care need such as antibiotics, it is advisable to have it filled locally.

Eligible Drug Search

You may search for a particular drug online at www.studentbenefits.ca by selecting your student organization, and clicking on the Eligible Drug Search icon. You must enter the Drug Identification Number (DIN) or Drug Name; in order to verify if the drug is eligible.

For details about how to save money by setting up mail order refills through *Pharmex*, contact the claims payment office or visit www.studentbenefits.ca.

Student Assistance Program

Need financial or legal advice, or simply need to talk? With Aspiria's SAP services, you can access a wide range of professional services anytime and anywhere, for free, for 12 months of the year. SAP services include in-person, telephone or online assistance for issues such as:

- Academic issues
- Adjustment to post-secondary school setting
- Anxiety
- Bullying
- Career development
- Crisis
- Dependent care
- Depression
- Discrimination
- Drugs, alcohol, gaming, smoking
- Financial
- Grief & bereavement
- Harassment
- Home & family Stress
- Legal
- Medical health & resource referral
- Nutrition
- Personal
- School stress
- Sexual
- Trauma
- Violence



Description of Health Care Benefits

Travel Benefits - \$5,000,000 per lifetime

(This benefit underwritten by SelectCare Worldwide Policy Number 208661)

As part of the Health Plan, you and your eligible dependants are covered hospital, physician, and other services for emergency treatment of an injury or illness while traveling outside of the province of Prince Edward Island (including international travel). It covers reasonable and customary charges, which are in excess of the provincial health-care allowance.

You're covered for up to 90 days per trip, for an unlimited number of trips taken during the time you're covered. The maximum coverage is \$5,000,000 per incident. Students and their dependants are not covered for out-of-province or out-of-country emergency services once they reach age 65.

When travel is required to complete a Course of Study, coverage can be extended to 365 days, following confirmation from your academic supervisor. Please contact The Campus Trust to obtain a 365-day Medical Assistance Travel Card. For complete details of coverage and/or to obtain a 90-day Medical Assistance Travel Card; visit www.studentbenefits.ca.

Tutorial Expenses - \$15 per hour up to \$1,000 per disability

(This benefit underwritten by ACE INA under Policy Number 102526)

This coverage applies to the student only. If you become disabled while covered and are confined at home or in a hospital for a minimum of 15 consecutive school days, you are eligible for the private tutorial services by a qualified teacher, up to the Benefit Maximum. The teacher must be approved, in advance, by the Students' Union. Disabilities due to the same or related cause will be treated as one disability. If the disability is the result of an accident, confinement must occur no later than 100 days after the accident. Disabled means that you cannot, because of illness or injury, engage in most of the normal activities a person of the same age or sex.

Are there limitations to the Health Care Benefit Plan?

No amount will be paid for care, services or supplies:

- if the payment is prohibited by law;
- if the benefit is covered under any governmental plan or law;
- where no charge would have occurred in the absence of this coverage; or
- for dental work, excluding Accidental Dental.

No amount will be paid for any charge incurred as a result of:

- war, whether declared or not;
- insurrection, rebellion or participation in a riot or civil commotion;
- purposely self-inflicted injury; or
- the covered person's commission of, or attempt to commit, an assault or a criminal offence.

Description of Dental Benefits

Is there a complete description of the coverage offered by the Dental Plan?

This section of the booklet contains information pertaining to the dental portion of your benefits plan. Eligible dental expenses are covered when they are incurred while the person is insured and service is provided by a licensed dentist, dental hygienist, anesthetist or specialist. The term “dentist” in this provision intends to include all of the above. If treatment is given by a specialist, the amount paid will be limited to the amount stated for that treatment in the Prince Edward Island Dental Association Suggested Fee Guide for Dental Services provided by General Practitioners as described below.

Diagnostic and Preventive - 100%

Procedures used to treat or help prevent basic dental problems. Some of the procedures are examinations and x-rays.

Examinations

- Initial or Complete Examinations (1 exam per student year)
- Recall Examinations (1 every 6 months)
- Specific Examinations
- Emergency Examinations

X-rays

- Full Mouth Series X-rays (1 time in a 3 year period for dependants age 12 or older)
- Periapical X-rays (total of 16 films in a 3 year period)
- Bitewing X-rays (total of 4 films in a student year)
- Panoramic X-rays (1 time in a 3 year period)

Cavity Prevention

- Polishing or Cleaning Teeth (2 units per student year)
- Recall Scaling (8 units per student year)
- Fluoride (1 time in a student year for dependants age 16 or younger)
- Oral Hygiene Instruction (covered 1 time only)
- Pit and Fissure Sealants (1 time in a 3 year period for dependants age 16 or younger)

Space Maintainers (1 per space in a student year)

Description of Dental Benefits

Restorative – 80%

These procedures may include local anesthesia, removal of decay, pulp protection and bite adjustment.

Fillings

- Sedative, Silver and White Fillings
- Retentive Pins

Endodontic and Periodontic – 10%

Procedures may include root canals, root planning and management of oral disease.

Endodontic

- Pulpotomy
- Root Canal (1 time per tooth)

Periodontic

- Oral Disease
- Desensitization
- Gingival Curettage
- Gingivectomy
- Flap Surgery
- Tissue Graft
- Root Planing

Oral Surgery

Procedures may include local anesthesia, appropriate x-rays, surgery and follow-up care.

Minor - 50%

- Extractions, Erupted Teeth
- Residual Root Removal

Description of Dental Benefits

Major - 10%

- Extractions , Surgical (Covered at 50%)
- Alveoloplasty, Gingivoplasty, Stomatoplasty, Vestibuloplasty
- Surgical Excision
- Surgical Incision
- Fractures
- Frenectomy
- Post Surgical Care

Anesthesia – 80%

- General Anesthesia
- Deep Sedation
- Inhalation Technique
- Intravenous Sedation

Are there any limitations to the Dental Care Benefit Plan?

No amount will be reimbursed for the following expenses:

- crowns, bridges, dentures, major restorative, orthodontic services;
- dental charges that could be claimed under Workers' Compensation;
- dental charges not included in the current provincial Fee Guide;
- cosmetic procedures, experimental treatment or testing;
- charges for appointments that are not kept;
- charges for the completion of claim forms;
- treatment to correct temporomandibular joint dysfunction (Jaw);
- endodontic treatment that started before the effective date of coverage
- dental appliances;
- any orthognathic surgery (remodeling or reconstruction of your jaw);
- procedures or supplies used in vertical dimension corrections (changing the height of the teeth) or to correct attrition problems (worn down teeth);
- implanting fabricated teeth or any major surgery resulting from implanting fabricated teeth.

Register for Online Services

There are many services available on www.studentbenefits.ca, that will make your Benefits Plan easier than ever to access. You must register as a new member to take advantage of the following new features of the site.

Benefits Card

Pay-Direct Card

Your personalized Benefits Card can be printed under the Download Centre. The card should be presented to your pharmacist (along with your prescription) and/or dental office, in order to access the Pay-direct system. Your claim is processed immediately without the need for you to mail in a claim form.

Travel Card

Your registered account also gives you access to print your 90-Day Travel Card from the Download Centre.

Claim Submissions

Online Claim Submission is an easy way for you to submit your Health or Dental claim online. Once you have registered as a Member on the website, you will be able to access the New Claim form, under the Claim Centre. Online claim submission is a quick and practical way to submit your claims for reimbursement. Simply complete the required fields and attach scanned copies of your receipts, or alternatively, use your smart phone to upload pictures of your receipts. By submitting your claim electronically, you avoid waiting for your claim to reach us by mail.



The Online Claim Submission system will help ensure that we have all the information required for processing your claim. The system will let you know if you are required to submit a referral, and will explain to you aspects of claim submission, such as coordinating benefits with another plan.

When submitting claims online, you are required to retain your original receipt(s) for 12 months, as The Campus Trust may request the original receipt(s) at any time.

Register for Online Services

Direct Deposit

If you currently receive your cheques by mail, you can now take advantage of direct deposit for your claim reimbursements. Once you have registered as a member on studentbenefits.ca, you just complete the required form, found on the Home page. Your direct deposit payments will begin the week after you submit your request.

To make the direct deposit registration process simple, have a blank cheque or direct deposit form from your bank on hand when you register. These documents include all the information we require to set up direct deposit. Your payments can be deposited into a chequing or savings account. If you have another kind of account, please call your financial institution to find out what accounts you can use for direct deposit.

You can change or cancel your direct deposit at any time by updating your information on the Home page of the website. It can take up to two weeks to process your request, so please remember this when changing or deleting your bank account information.

Before the payment has been deposited into your account, you will receive an Explanation of Benefits (EOB) by email. With normal bank clearing procedures, your payment should be deposited within two or three business days.

Prescription Drug claims can only be reimbursed by cheque.

Claim History

Your claim history is now available on the website, and updated daily by our new **Claims Tracker**, so that you will always have the most up-to-date information regarding your submitted claims.

You have the option to print the Explanation of Benefits (EOB) for any claim that you have submitted. This highlights claim information, and payments made by your Plan. Having this information easily accessible will make it easier for you to submit the information to any alternative insurance you may have, or provide you the information you may require for your income tax.

We understand that receiving your reimbursement in a timely manner is very important. For that reason, we have added this function as a way to track your claim.

Benefit Balance

The option to view your benefit balances is now available on studentbenefits.ca, under the Claim Centre. Once registered, you will have access to view the remaining balance of any benefit. This option is particularly helpful when you have repeat treatments for a specific benefit type.

Submitting a Claim

How long do I have to submit a claim?

Claims must be submitted within **6 months** of the date of loss. If the Plan terminates, claims must be submitted within 3 months from the termination date. Legal action to recover benefits must begin within 2 years of the date of loss.

Can I assign my benefits to a provider?

Your plan allows you to assign your benefits to a provider. When you assign your benefits, the Explanation of Benefits (EOB) is mailed to the provider only. When a provider is submitting a claim on your behalf, the claim must include an Assignment of Benefits form, found on studentbenefits.ca under the Download Centre, an invoice, and a Doctor's referral (if applicable). You must review and sign the Assignment of Benefits form to ensure accuracy before the claim is submitted, on your behalf, by your service provider.

You are responsible to ensure that you are eligible for coverage on the date of your treatment. No amount will be paid if your coverage is not in effect at the time of treatment.

Remember that all benefits have limits, and not all providers will accept direct billing. You should ask your provider if they will direct bill before starting treatment.

Where do I get my Benefits Card?

Your personalized Benefits Card can be printed from www.studentbenefits.ca under the Download Centre, once you have completed the online registration. The card should be presented to your pharmacist (along with your prescription) and/or dental office, in order to access the Pay-direct system. Your claim is processed immediately without the need for you to mail in a claim form.

Can claims be submitted using my Benefits Card?

You and your eligible dependants can purchase prescription drugs and dental services using Pay-direct.

Remember that all benefits have limits and some pharmacists and dental offices do not submit claims electronically.

In order to make a claim, the card should be presented to your pharmacist or dental office at the time of expense, in order to access the Pay-direct system. Your claim is processed immediately; eliminating the need for you to mail in a paper claim form.

Submitting a Claim

How do I submit a claim without a Benefits Card?

All other benefits are paid on a reimbursement basis. To make a claim you have two options:

1. Mail in a completed claim form (forms available online at www.studentbenefits.ca or from the Campus Administrator) along with receipts to The Campus Trust. For dental claims, a standard dental claim form can be obtained from your dental office. Remember to complete each section of the claim form in full including your Student ID and correct mailing address.
2. Online Claim Submission is an easy and practical way to submit for reimbursement. You must log in to Member Registration in order to access the Online Claim Submission form. For more details, visit www.studentbenefits.ca. You are responsible for retaining original claim receipt(s) for 12 months following the date of your online claim submission(s). The Campus Trust may request the original receipts at anytime within the 12 months following your submission.

Will my Benefits Card always work?

Every student year has a "Blackout Period". This means that Pay-direct access is suspended until the eligibility for the new student year has been determined and uploaded. This usually happens after the opt-out deadline. During this time, any prescription drugs required or dental work performed should be purchased upon receipt and submitted to The Campus Trust for reimbursement.

Can I avoid the "Blackout Period"?

If you require access to your Pay-direct benefits during the Blackout Period, please visit www.studentbenefits.ca and complete the "Activate Benefits" form in full. If you choose this option, you waive the right to opt out of the Plan for that student year.

What if I have more than one plan?

In the case of a claim for you, the student, this plan is the first payer and the dependant coverage available through your other plan is the second payer. In the case of your spouse's claim, our plan is the second payer if they have their own plan.

For dependant children, claims are submitted first to the benefit plan for the parent whose birthday (month and day) occurs earlier in the calendar year, regardless of age.

Following the reimbursement from the first payer, copies of the receipts and the Explanation of Benefits must be submitted to the other plan so that the balance can be considered for payment.