

**UPPER GRAND DISTRICT SCHOOL BOARD**  
**OUTLINE OF BENEFITS**  
**BILLING DIVISION 7900**  
**EDUCATIONAL ASSISTANTS**

Services shown below will be eligible if they are usual, reasonable and customary, and are medically necessary for the treatment of an illness or injury. Please contact the Green Shield Canada Customer Service Centre at 1-888-711-1119 to determine benefit eligibility and coverage details.

**Co-payment** means the amount that you are required to pay.

**Co-insurance** means the percentage of the eligible amount that you are entitled to receive after satisfaction of the deductible.

### **DRUG**

- A co-payment of \$0.35 applies to each prescription.
- The Ontario Drug Benefit co-pay/deductible for seniors is a benefit.
- In the province of Quebec, legislation states that Green Shield Canada is obligated to follow RAMQ reimbursement guidelines for all residents of Quebec. For those 65 years of age and under, Green Shield Canada is primary payor.

Benefits include **drugs legally requiring a prescription by law, diabetic needles and syringes, some limited access and some over-the-counter drugs.**

Benefits **do not include** medication for the treatment of erectile dysfunction. Serums and vitamins are also ineligible unless injected and medically necessary.

### **HEALTH SERVICES**

- Your overall Health deductible is nil.
- Your co-insurance for Health Services is 100%.

### **EMERGENCY TRANSPORTATION**

- **Ambulance Transportation**, for land or air ambulance to the nearest hospital equipped to provide the required treatment.

### **ACCIDENTAL DENTAL BENEFITS**

**Accidental Dental** benefits for treatment by a dentist must be rendered within 6 months of the accident. A dental accident report form must be submitted immediately following the accident.

### **ACCOMMODATION**

- Ward to Private Room in a public general hospital.
- Room and board in a public chronic/convalescent hospital up to a maximum of \$20 per day.

### **AUDIO**

- **Reimbursement will be made for standard hearing aids, repairs or replacement parts up to a maximum of \$300 once every 4 calendar years.**
- **Batteries are not eligible.**

### **MEDICAL ITEMS**

**Prosthetic Appliances and Durable Medical Equipment** as well as replacements, repairs, fittings and adjustments of such devices. Contact the Customer Service Centre to verify eligibility of a particular benefit.

### **PARAMEDICAL SERVICES**

- **Physiotherapist \$20 per visit up to a maximum of \$300 per 12 month period beginning September 1<sup>st</sup> every year.**
- **Psychologist Benefits \$20 per half hour initial visit, \$20 for subsequent visits up to a maximum of \$300 per 12 month period beginning September 1<sup>st</sup> every year.**
- **Chiropractor \$20 per visit up to a maximum of \$300 per 12 month period beginning September 1<sup>st</sup> of every year. Chiropractor x-rays \$15 maximum per 12 month period beginning September 1<sup>st</sup> every year.**
- **Osteopath \$10 per visit up to a maximum of \$300 per 12 month period beginning September 1<sup>st</sup> of every year. Osteopath x-rays \$15 maximum per 12 month period beginning September 1<sup>st</sup> every year.**
- **Podiatrist/Chiropodist \$15 per visit up to a maximum of \$300 per 12 month period beginning September 1<sup>st</sup> every year. Plus \$100 calendar year maximum for surgery. Podiatry x-rays \$15 maximum per 12 month period beginning September 1<sup>st</sup> every year.**  
**NOTE: For Ontario residents only, Podiatry Services are not eligible until the OHIP annual maximum has been exhausted.**
- **Naturopath, Registered Massage Therapist (medical referral required) \$10 per visit up to a maximum of \$300 per 12 month period beginning September 1<sup>st</sup> every year per paramedical discipline.**
- **Speech Therapist \$25 initial visit, \$15 for subsequent visits up to a maximum of \$300 per 12 month period beginning September 1<sup>st</sup> every year.**
- **Private Duty Nursing Benefits for the services of a Registered Nurse (R.N.) or Registered Nurse's Assistant (R.N.A.) in the home on a full or part shift basis.**

Paramedical services are only eligible when the practitioner rendering the service is licensed by their provincial association and that association is recognized by

Green Shield Canada. Please contact the Green Shield Customer Service Centre to confirm eligibility when in doubt.

## VISION

- Your Vision Benefit carries a maximum of \$250 every 24 months for prescription eye glasses and/or contact lenses or \$250 every 24 months for medically necessary contact lenses provided they are dispensed by an Optometrist, an Optician or an Ophthalmologist.
- Vision benefits do not include eye examinations.

Commencement of your benefit period is based on the initial date you receive vision benefits. This service date is the actual **pick-up date** of the eyewear.

**As a Green Shield subscriber,** you have access to our national preferred provider vision network arrangement with “The Bay Optical” and “Zellers Vision Centre” stores.

All Green Shield subscribers are eligible to receive a discount of 33% off the regular prices available at “The Bay Optical” and “Zellers Vision Centres”. This offer applies to all extra coatings and upgrades. (Excludes disposable contact lenses).

Features of this great value-added service include

- i. offer applies to any Green Shield subscriber, regardless of whether you have Green Shield vision benefits or not
- ii. direct billing to Green Shield by the provider; the subscriber just pays any portion not covered
- iii. trustworthy retail chains with convenient locations
- iv. discount offer applies to everything such as coatings, upgrades and accessories
- v. hundreds of the latest frame styles to choose from plus latest lens and coating technology
- vi. Professional opticians to assist in selecting products
- vii offer applies to non-disposable contact lenses

To find a Bay Optical store near you, call the toll free store locator at 1-866-BAY-EYES. Or visit our web site at [www.greenshield.ca](http://www.greenshield.ca)

## CLAIMING INFORMATION

1. Present your Green Shield Identification Card as proof of being a Green Shield subscriber.
2. The vision provider will apply the appropriate discount(s) to your claim and submit the claim directly to Green Shield for payment. You pay your vision provider any balance not covered under your vision benefit.
3. If no vision benefits exist, you pay your provider the full balance owing after the applicable discounts have been applied.

## DENTAL

- Your deductible is nil.
- Your lifetime maximum for Orthodontic benefits is \$1,000.
- Stated maximums are based on paid claims.
- Your co-insurance which is applied to the eligible allowed amount is 100% for Basic services, 100% for Comprehensive basic services, 50% for Major services and 50% for Orthodontic services.
- Basic services cover: recalls twice every 12 months, other exams and full mouth X-rays every 3 years.
- Comprehensive basic services cover denture relines once every 3 years.
- Major services cover standard dentures, crowns and bridges once every 5 years.
- Applicable lab, drug and other expenses are eligible to a maximum of 40% (50% cap on dentures) of the allowable professional fee. Any applicable co-payment is then applied.
- Your eligible claims are reimbursed at the level stated above and in accordance with the current Ontario Dental Association Fee Guide with 1 year lag time for General Practitioners. In provinces with more than one fee guide, Green Shield will reimburse according to the least expensive standard fee (or fee range).

## BASIC SERVICES

- **Recalls** include exams, bitewing X-rays, preventive cleanings and fluoride treatments.
- **Complete, general or comprehensive** oral exams, full mouth X-rays and panoramic X-rays.
- **Basic restorations**, fillings and inlays.
- **Extractions and surgical services.** General anaesthetics and intravenous sedation only when done in conjunction with eligible extraction(s) and/or oral surgery. Sleep dentistry is not eligible.

## COMPREHENSIVE BASIC SERVICES

- **Endodontic** treatment including **standard** root canal therapy, excluding retreatments.
- **Periodontal** treatment including scaling and/or root planing.
- **Standard denture services** including relining and rebasing of dentures, plus denture adjustments after 3 months from installation.

## MAJOR SERVICES

- **Standard dentures**, complete, immediate and partial.
- **Standard crown restorations** or onlays on natural teeth.
- **Repair** or recementing of crowns, onlays and bridgework on natural teeth.
- **Standard bridges**, including pontics, abutment retainers/crowns on natural teeth based on the date of the tooth/teeth extractions.

## ORTHODONTIC SERVICES

- Orthodontic treatment to straighten teeth and correct the bite.

- **Subject to a usual and customary monthly cap as established by Green Shield.**

## TRAVEL BENEFITS

- **Travel Benefits – coverage is unlimited per trip following the date of departure from your province of residence.**
- **Your maximum is \$1,000,000 per calendar year for Emergency Services; and \$50,000 per calendar year for Referral Services.**
- **Hospital and medical services are eligible only if your provincial government health plan provides payment toward the cost of the services received.**

**Green Shield must be contacted by phone within 48 hours of commencement of treatment.** Green Shield, through consultation with the Assistance Medical Team, reserves the right to repatriate the patient for treatment upon medical verification of the tolerance for travel. Carry your Green Shield identification card with you when travelling.

- **Hospital services and accommodation** up to a standard ward rate in a public general hospital.
- **Medical/surgical services**
- **Land ambulance** to the nearest qualified medical facility.
- **Emergency Air ambulance** to your province of residence (including a medical attendant when necessary).
- **Services of a Registered Private Nurse** up to a maximum of \$5,000.00
- **Diagnostic laboratory tests and x-rays.**
- **Drugs, serums and injectibles** which require a prescription by law.
- **Medical appliances** including casts, crutches, canes, slings, splints and/or the temporary rental of a wheelchair.
- **Treatment by a dentist** due to a direct accidental blow to the mouth up to a maximum of \$2,000.00 for treatments within 90 days of the accident.
- **Coming Home:**
  - For one way economy airfare, plus a stretcher, to return you to your province of residence.
  - For a medical attendant who is not your relative to accompany you home.
  - **For returning your vehicle**, up to a maximum of \$1,000.00.
- **Meals and accommodation** up to \$1,500.00 (\$150.00 per day for 10 days) for commercial accommodation and meals when the trip is delayed or interrupted due to an illness or accident to a travelling companion.
- **Transportation to the bedside** for one round trip economy airfare, for one spouse, parent, child, brother or sister, up to \$150.00 per day for five days to:
  - be with a covered person confined in hospital for more than 7 days
  - identify deceased prior to release of the body.
- **Return of Vehicle** if your private vehicle is stolen or rendered inoperable due to an accident, and for one way economy airfare home.

- **Return of deceased** up to a maximum of \$5,000.00 for preparation (including cremation) and homeward transportation of a deceased covered person.

## GREEN SHIELD CANADA TRAVEL ASSISTANCE SERVICE

Available 24 hours per day, 7 days per week through Green Shield's international medical service organization. Some services include:

- Verification of insurance coverage for entry and admissions into hospitals and other medical care providers
- Arrangement of emergency medical transportation and evacuation
- Knowledgeable legal referral assistance
- Assistance in replacing lost or stolen travel documents
- Emergency and payment assistance for major health expenses over \$200.00 Canadian.

## HOW GREEN SHIELD CANADA'S TRAVEL ASSISTANCE SERVICE WORKS

As soon as you have a medical emergency:

1. The patient must contact Green Shield within 48 hours of commencement of treatment by dialling **1-800-936-6226** within Canada or USA or call **collect 0 519-742-3556**. Failure to call within 48 hours or refusal to be repatriated may result in benefits not being covered beyond 48 hours.
2. Quote your group number and patient number, found on your Green Shield Identification Card, and explain your medical emergency. You must also be able to provide your Provincial Health Insurance Plan number.
3. Our physicians will follow your progress to ensure that you are receiving the best available medical treatment. These physicians also keep in constant communication with your family physician and your family, depending on the severity of your condition.

### Please Note:

- As we are not able to guarantee assistance services in areas of political or civil unrest, please contact Green Shield for pre-travel or claims inquiries.
- Referral services are only eligible if the required medical treatment is not readily available in your province of residence.
  - \*You must receive pre-authorization from your provincial government health plan and Green Shield **prior to the commencement of any referral treatment**. Your Provincial Government Health Plan may cover this referral benefit entirely. You must provide Green Shield with a letter from your attending physician stating the reason for the referral, and a letter from your provincial government health plan outlining their liability. Failure to comply in obtaining pre-authorization may result in non-payment.

#### **Travel benefits do not include:**

1. Treatment or service required for ongoing care, rest cures, health spas, elective surgery, check-ups or travel for health purposes, even if the trip is on the recommendation of a physician.
2. Hospital and medical care for childbirth occurring within 8 weeks of the expected delivery date from the date of departure, or deliberate termination of pregnancy.

## **GENERAL INFORMATION**

### **OUR COMMITMENT TO PRIVACY**

The Green Shield Canada Privacy Code balances the privacy rights of our group and benefit plan participants, and our employees, with the legitimate information requirements to provide customer service and to meet our human resource requirements. It consists of the following key principles:

#### **1. We ask for your personal information for the following purposes:**

- To establish your identification
- To provide you and/or your dependants with the applicable benefit coverage
- To protect you and us from error and fraud
- To provide ongoing services

#### **2. Consent**

When you enrolled in your group benefit plan as a plan participant, your personal information was obtained and used only with your consent. We obtained your consent before we:

- Provided benefit coverage
- Offered you other Green Shield Canada services
- Obtained, used or disclosed to other persons, information about you unless we were obliged to do so by law or to protect our interests
- Used your personal information in any way we did not tell you about previously

Your consent can be either express or implied. Express consent can be verbal or written.

Consent can be implied or inferred from certain actions. For our existing group and benefit plan participants, we will continue to use and disclose your personal information previously collected in accordance with our current privacy code, unless you inform us otherwise and will infer that consent has been obtained by your continued use.

#### **3. Withdrawal of Consent**

You can withdraw your consent any time after you've given it to us, provided there are no legal or regulatory requirements to prevent this.

If you don't consent to certain uses of personal information, or if you withdraw your consent, we will no longer be able to administer your benefit coverage. If so, we will explain the situation to you to help you with your decision.

For further information on our privacy policies and procedures, please refer to the Green Shield Canada web site at [www.greenshield.ca](http://www.greenshield.ca)

### **LIMITED BENEFIT CLAUSE**

Green Shield will determine the amount of benefits payable, giving consideration to limited procedures, services, or courses of treatment. The attending physician/dentist and the patient have the option of which procedure to use, although payment for the procedure may be based on the "limited treatment" principle. The Limited Benefit Clause is a financial limitation and not intended as a comment regarding any treatment recommended or performed by a physician/dentist.

### **PREDETERMINATION**

If the cost of any proposed treatment is expected to exceed \$300.00, submit to Green Shield a detailed treatment plan from your provider **before your treatment begins**. If a description of the procedures to be performed and an estimate of the charges **are not submitted in advance**, Green Shield reserves the right to make a determination of benefits payable, taking into account alternate procedures, services or course of treatment, based on accepted standards of medical/dental practice.

### **GENERAL OVERALL EXCLUSIONS**

Eligible Services do not include and reimbursement will not be made when we are aware of or have been apprised of:

1. Services or supplies received as a result of disease, illness or injury due to any of:
  - intentionally self-inflicted injury while sane or insane
  - an act of war, declared or undeclared
  - participation in a riot or civil commotion
  - committing a criminal offence
2. Failure to keep a scheduled appointment with a licensed medical/dental practitioner.
3. Services or supplies which are cosmetic in nature.
4. The completion of any claim forms and/or insurance reports.
5. Services or supplies which do not meet accepted standards of medical/dental/ophthalmic practice, including charges for services or supplies which are experimental in nature.
6. Services or supplies normally paid through any provincial government health plan, Workplace Safety & Insurance Board, the Assistive Devices Program or

any other Government Agency, or which would have been payable under such a plan had proper application for coverage been made, or had proper and timely claims submission been made.

7. Services or supplies from any governmental agency which are obtained without cost by compliance with laws or regulations enacted by a federal, provincial, municipal or other governmental body.
8. Services or supplies which are not recommended or approved by the attending physician/dentist.
9. Services or supplies that you are not obligated to pay for or for which no charge would be made in the absence of benefit coverage.
10. Services or supplies which are legally prohibited by the government from coverage.
11. The replacement of lost, missing or stolen items, or items which are damaged due to negligence.
12. Any eligible service that relates to treatment of injuries arising out of a motor vehicle accident.

#### **CO-ORDINATION OF BENEFITS (COB)**

Where you or your dependents have coverage with more than one carrier, claims shall be co-ordinated so that reimbursement from all coverages shall not exceed 100% of the actual claim. Ask for our COB brochure for information on how your family can receive this service.

#### **SUBSCRIBER ONLINE SERVICES**

For plan members/subscribers (ID card number ends with -00), this site will answer those questions most often asked and give online access to the following:

- Direct Deposit\* of claims reimbursements to personal bank account;
- EOB (Explanation of Benefits) information;
- Instant access to personal claims information;
- Claims payment history;
- And much more!

All you have to do is register online using your unique Green Shield Canada ID number and provide your e-mail address. Once registered, a password will be mailed to the address Green Shield Canada has on file for you. Register now at [www.greenshield.ca](http://www.greenshield.ca) and see what the new website can do for you!

(\*Please note that once arrangements have been made for Direct Deposit, claims payments will be deposited directly into the bank account you have chosen. Statements will no longer be mailed to you but will be available for online viewing.)

#### **SUBROGATION**

Green Shield retains the right to subrogation if benefits have or should have been paid or provided by a third party. In cases of third party liability, you must advise your lawyer of these rights.

#### **GROUP CONVERSION PACKAGE**

Any employee who will be terminating employment where there is an active Green Shield group benefits program in force and who will lose their group benefits may enroll in the Green Shield Group Conversion Program.

Dependent children who are no longer eligible for benefits under their parents Green Shield group benefits program may also enroll in the Green Shield Group Conversion Program.

Call (416) 601-0429 in the Toronto area or toll-free at 1 800 667-0429 for an information package. You must apply within 60 days of termination of your benefits from your Green Shield group program.