

| Health Benefits | Coverage | |
|------------------------------|----------|---|
| Prescription Drug | 80% | Maximum of \$3,000 per benefit year. Based on the National Formulary with a generic rider. |
| Vision | 100% | Maximum of \$50 for one eye exam, \$150 for glasses and/or contact lenses every 24 months. |
| Paramedical Practitioners | 80% | Maximum of \$20 per visit and an overall plan maximum of \$300 per practitioner per benefit year. Practitioners: Registered Massage Therapist*, Physiotherapist*, Chiropractor, Osteopath, Naturopath, Podiatrist or Chiropodist, Speech Language Pathologist*, Psychologist* or Social Worker* *Physician's prescription required |
| Dental Accident* | 80% | Maximum of \$1,000 per accident. Services must be performed within 12 months of accident. If treatment is scheduled to occur more than 90 days after the impact, a treatment plan must be submitted before the end of the 90-day period. Pre-authorization required |
| Ambulance | 80% | Maximum of \$250 per occurrence. |
| Medical Equipment & Supplies | 80% | Including but not limited to: crutches, wheelchair, hospital-type bed, prosthetics, rigid and semi-rigid braces. Custom-made orthopedic shoes limited to \$150 per foot, per benefit year. Prescription & pre-authorization may be required. Not solely for athletic use. |
| Hearing Aids | 100% | Maximum of \$500 during a 5 year period. Excludes batteries. |
| Blood Glucose Monitors | 100% | Maximum of \$150 during a 5 year period. |
| Other Insurances | - | Tutorial, Tuition Insurance. |

Managed Dental Plan - Your dental benefits are provided under the Managed Dental Care plan through specific dental offices. To receive any benefit from this plan you must use one of the Managed Dental Offices. For a list of managed dental offices, please visit www.mystudentplan.ca.

| Dental Benefits | | |
|--|------|--|
| Please submit an estimate/pre-authorization prior to specialist services and any dental treatment plan exceeding \$500. | | |
| Annual Maximum - \$750 per benefit year | | |
| Services are covered at rates outlined in the 1997 Alberta Dental Association Fee Guide for General Practitioners, plus inflationary adjustments as determined by the Dental Provider. | | |
| Diagnostic & Preventative | 100% | Limited to once per benefit year. Scaling limited to 2 units. |
| Minor Restorative | 80% | Fillings & child space maintainers. |
| | 50% | Denture repairs, relining, rebasing & tissue conditioning. |
| Extractions | 50% | Limited to 2 wisdom teeth per benefit year. |
| Endodontic | 50% | Root canals. |
| Periodontic | 50% | 2 units of scaling and/or root planing per benefit year. |
| Major Restorative | 15% | Crowns, Bridges & Dentures. Limited to once every 5 benefit years. |

Access all benefits coverage details at www.mystudentplan.ca/uofcalgary.

In the event of any discrepancy between the information herein and our contract with the insurer, the terms of the contract will apply. All benefits payable through the student plan are based on reasonable and customary charges.

How to Enrol for Coverage

Fees for the student plan are assessed automatically by the institution at registration. You are also enrolled automatically should you meet the eligibility criteria for the plan. If you are unsure about whether or not you are eligible, please visit or contact the Benefits Plan Office.

New eligible students will be added to the plans during the first 45 days of each semester. Please keep your receipts for eligible expenses incurred during this time period for submission to the insurance carrier upon completion of the enrolment process. Returning eligible students may continue to access the plans without disruption by using their current myBenefits Card or by submitting claims directly to the carrier.

Accessing Coverage

myBenefits Card: Pay-direct claims allow for direct billing of eligible costs between your pharmacy and/or dental office and the insurance company. Pharmacy claims are processed immediately so that students are not out of pocket the full expense at the time of purchase. Dental claims are processed based on the individual dental office's billing practices. These claims are accessed with the myBenefits Card. You can download your myBenefits Card from mystudentplan.ca or pick one up from the Student Benefits Plan Office.

Submit Claims Online: <https://gw1.greatwestlife.com>

Manual Claims: To submit a manual claim, complete an insurance claim form, attach the original receipts and documents, and mail to the insurer. Remember to keep a copy of all original documents for your records. Download claim forms from www.mystudentplan.ca.

Opting Out of Coverage

If you are an eligible student and have comparable health and/or dental coverage you may apply to opt-out of the plan(s). Each student is given one opportunity to opt-out of the health and/or dental plan(s) each year. All opt-out forms must be completed online or through the Student Benefits Plan Office and must be received by the applicable deadline. You will not be able to opt-out of coverage at any other point during the school year.

No exceptions will be made if the deadline is missed. It is the student's responsibility to pay the plan fees, should they miss the applicable opt-out deadline. Approval of your opt-out will result in the plan fee being credited. Once your opt-out has been accepted, it will remain in force as long as you remain an eligible student.

Adding Family Coverage

Each year, you are given one opportunity to purchase family coverage for your spouse and/or dependent(s) by completing an application form through the Student Benefits Plan Office and paying the family coverage fee. All family add-on forms and fees must be received by the specified deadline. Your family can only be covered while you are a student on the plan(s).

Family coverage must be renewed by the student each benefit plan year. For further details regarding family coverage, visit mystudentplan.ca or stop by the Student Benefits Plan Office.

Coordinating Multiple Plans

If you are an eligible student and have comparable coverage you may wish to coordinate your plans. Benefits under the two plans can be coordinated to increase your coverage up to 100% of the actual expense(s) incurred. For example, following payment under this plan you can submit outstanding balances to the other plan for consideration.

Loss of Comparable Coverage

If comparable coverage used to opt-out of the student plan terminates, or coverage provided to cover eligible dependents terminates, students have 30 days from loss of coverage to notify the Student Benefits Plan Office in order to opt in and be covered under the student plan. Confirmation of loss of coverage is required on re-application.

Student Benefits Plan Office

MacEwan Student Centre, Room 352
2500 University Drive NW
403.220.3906
uofcalgaryplan@mystudentplan.ca
Twitter: @uofcalgaryplan

Policy Information

Insurer: Canada Life Assurance Company
Policy No: 330753 | Division No: Leave Blank
Identification No: Your Student ID
Plan Name: University of Calgary Students' Union
Claims Inquiries: 1.800.957.9777

Canada Life Assurance Company
Group Claims Department
P.O. Box 4408, Regina SK S4P 3W7

www.mystudentplan.ca/uofcalgary