

Manitoba Government Employees Travel Health Plan

This is a synopsis of the benefits under the Employee Travel Health Plan. In the event of any difference between the terms of the synopsis and the terms of the Group Agreement the latter will prevail.

If you have any questions regarding the Group Agreement, please contact your Pay & Benefits Administrator or Manitoba Blue Cross.

In determining the basis of payment, Manitoba Blue Cross reserves the right to assess payment on the basis of the approved fee guide for the service in question, or the reasonable and customary charges as deemed appropriate by Manitoba Blue Cross.

Eligibility

Full-time and Part-time Employees

(a) Regular, Term or Departmental employees:

- i. If registration occurs at the time of employment, an employee is eligible for coverage on the first day of the pay period following the date of employment.
- ii. If registration does not occur at the time of employment a waiting period of 6 months from the date application must be served.

The following **family members** are eligible for coverage:

- a) A legal or common-law spouse. To be eligible, a common-law spouse must be registered at the time of employment. Where registration does not occur at the time of employment there shall be a one-year waiting period from the date of registration.

- b) Natural, legally adopted children or step-children under 22 years of age, provided they are unmarried and unemployed.
- c) Children under 25 years of age who are full-time students at an accredited educational institution, college, or university.
- d) The age restriction does not apply to a physically or mentally incapacitated child who had this condition prior to the attainment of age 22.

An employee must register according to their **true family status**, listing all eligible dependents. Once enrolled in the program an employee will not be permitted to opt out while still employed, except in the event of recently obtained duplicate group coverage.

Summary of Benefits

Travel insurance is designed to cover losses arising from unexpected, sudden or unforeseeable circumstances. It is important that you read and understand your benefit booklet before you travel as your coverage may be subject to certain limitations or exclusions.

Your policy may not provide coverage for medical conditions and/or symptoms that existed before your trip. Please review your coverage information carefully to see how it may apply to your trip.

In the event of an accident, injury or sickness, your prior medical history may be reviewed when a claim is made.

Please review the International Travel Assistance section. You may be required to notify the designated assistance company prior to treatment. Your policy may limit benefits should you not contact the assistance company within a specified time period.

Trip Details:

- The coverage duration period is 90 days for any trip that includes travel outside of Canada. To purchase coverage beyond this period contact Manitoba Blue Cross.
- The 90-day coverage duration period does not apply to any trip wholly within Canada.
- All trips must originate and terminate in your province of residence.

Coverage

Benefits are payable to a maximum of \$5,000,000 per person per claim. In the event of a claim, proof of departure date and return dates will be required.

Although your plan does not include a specific pre-existing condition exclusion, please note that your plan does not provide coverage for expenses related to a medical condition for which it was reasonable to expect treatment or hospitalization during your trip.

You are covered for 100% of the expenses listed below:

a) Accidental/Emergency Dental

- Dental care to natural teeth when necessitated by a direct accidental blow to the mouth only and not by an object wittingly or unwittingly placed in the mouth. Treatment must be rendered within 180 days following the date of the accident. The maximum amount payable is \$3,000 per accident.
- Treatment for the emergency relief of dental pain to a maximum of \$300. Services must be rendered outside of your province of residence. A letter from the attending dentist must be presented indicating treatment was necessary to relieve acute dental pain does not present before date of departure.

b) Ambulance Services

- Ambulance service from the place of illness or accident to the nearest hospital capable of providing appropriate treatment.
- Economy air transportation by stretcher to your home city in Canada if you have received treatment at a hospital as an in-patient.

c) Blood and Blood Plasma

Blood and blood plasma if not available free of charge.

d) Board and Lodging

Additional expenses incurred for board and lodging by a relative or friend remaining with you during your hospitalization as an in-patient. To be eligible for coverage, the relative or friend must be travelling with you and be covered by a Blue Cross Travel Health Plan. Only expenses incurred after the termination date of your trip are eligible.

e) Dependent Escort

Additional cost of return economy airfare for an escort to accompany your children (up to 18 years of age) to their province of residence in the event you are air evacuated to Canada for medical reasons.

f) Drugs or Medicines

Drugs or medicines which are prescribed by a physician and dispensed by a licensed pharmacist, excluding vitamins and vitamin preparations, over the counter drugs, or patent and proprietary medicines available without a written prescription from a physician.

g) Emergency Remote Evacuation

Emergency evacuation by a commercial operator licensed to convey passengers from a mountain, body of water or other remote location to the nearest qualified medical facility capable of providing appropriate treatment when a regular ambulance cannot be used to a maximum of \$5,000 per person.

h) Hospital In-patient Allowance

An allowance of \$40 per day for each day you are hospitalized as an in-patient.
Maximum coverage \$1,000.

i) Hospital Services

- Hospital in-patient and out-patient services and supplies.
- Medical and surgical services by a legally qualified physician. Charges for services rendered in connection with general examinations, chronic or on-going care, or for check-up or cosmetic purposes are not eligible expenses.

j) Medical Evacuation

- Subject to the discretion of Blue Cross, medical evacuation to a hospital in the patient's province of residence if the evacuation is not harmful to the patient's health. Prior approval must be obtained from Blue Cross.
- Additional cost, if any, of the most direct return (economy) air travel from the place where you were hospitalized as an in-patient to your home city in Canada, including the cost of return economy air travel for a graduate professional nurse where nursing care is required during the flight home. This benefit must be supported by a letter from the attending physician as medically necessary. This coverage also applies to your family (spouse and dependent children) or one travelling companion who is covered by a Blue Cross Travel Health Plan and is travelling with you at the time of illness or accident.

k) Paramedical

- Physiotherapy when provided in a hospital.
- Chiropractic and/or a podiatrist services. A letter from the attending physician must be presented indicating treatment was for acute rather than chronic care.

l) Private Duty Nursing

Private duty nursing care during or immediately following hospitalization as an in-patient. The services must have been recommended by the attending physician and the nurse must not be a relative of the patient.

m) Repatriation Benefit

In the event of loss of life, up to \$7,500 towards the cost of transporting the deceased to their home city in Canada (including cost of preparation and standard transportation container), or up to \$5,000 for cremation or burial at place of death.

n) Replacement of Eyeglasses or Contact Lenses

Repair or replacement of prescription eyeglasses or contact lens or lenses due to accident or injury to a maximum of \$100 provided that the injury was treated by a physician or dentist.

o) Return of Pet/Vet Charges

- Cost of returning your pet to your home city in Canada to a maximum of \$500 per pet, in the event you are confined in hospital for at least three days outside of your province of residence.
- Coverage for emergency veterinary care due to unexpected injury of your pet to a maximum of \$200 per pet.

p) Return of Vehicle

Charges of up to \$4,000 towards the cost of the return of your private or rental vehicle used for the trip, to your place of residence, or nearest rental agency, in the event you are unable to drive the vehicle.

q) Transportation to Bedside/Identify Deceased

- Transportation to your bedside for your spouse or any one family member to be with you while confined in hospital as an in-patient for at least three days outside

of your province of residence. This benefit must be supported by the written verification of the attending physician that your medical condition was serious enough to require the visit. Transportation will also be allowed for a family member travelling to identify the deceased prior to release of the body, if required by law. Coverage includes round-trip economy airfare on a commercial flight via the most direct cost-effective route from Canada to the place where illness or accident occurred.

- Commercial accommodations and meals for a person travelling to your bedside or travelling to identify a deceased family member to a combined maximum of \$200 per day to a maximum of \$2,500.

Exclusions and Limitations

The following are not eligible:

1. Retired employees (including all dependents).
2. Students in full-time attendance at a learning institution outside of Canada.
3. Any person travelling against medical advice.
4. Any medical condition relating to childbirth and/or delivery, in the event that any portion of travel outside your province of residence falls after the 31st week of gestation.
5. A medical condition for which it was reasonable to expect treatment or hospitalization during the trip.
6. Any treatment or surgery which is not for emergency treatment.
7. Any person travelling for the purpose of securing or with the intent of receiving medical or hospital services whether or not such trip is taken on the advice of a physician.
8. Any treatment or surgery which is not required for the immediate relief of acute pain or suffering, or which reasonably could have been delayed (on medical evidence) until the patient returned to their province of residence.

9. Any medical condition that occurs or recurs after Blue Cross or the international travel assistance provider recommends returning home to Canada following emergency treatment and you choose not to return.
10. Any medical condition resulting from non-compliance with any prescribed medical therapy or medical treatment or failure to carry out a physician's or health care practitioner's instruction.
11. Expenses incurred beyond the 90-day coverage duration period for trips that include travel outside Canada.

General Exclusions may apply.

General Exclusion

Manitoba Blue Cross will not pay for the following:

1. Any services or supplies received unless the person is covered by the government health plan in their home province.
2. Services and supplies the person is entitled to without charge by law or for which a charge is made only because the person has coverage under a plan.
3. Services or supplies not listed as covered expenses.
4. Services related to the treatment of Temporo-Mandibular Joint dysfunction.
5. Services and supplies for cosmetic purposes.
6. Charges for completing claim forms or missed appointments.
7. Services covered or provided through Workers' Compensation legislation, any government agency or a liable third party.
8. Charges for services provided prior to the effective date of coverage.

Air Flight and Common Carrier Accident Insurance

This Plan is Underwritten by Blue Cross Life Insurance Company of Canada. The insurer's maximum liability is limited to \$100,000 for any one insured.

Risks Insured

Accidental death or dismemberment while riding, boarding, or alighting from:

1. A certified passenger aircraft.
2. Any land conveyance licensed to transport passengers while travelling immediately prior to or following departure or arrival of your flight.
3. Any other public conveyance licensed to convey passengers.

Coverage is in effect for persons who are passengers on:

- a) any trip departing from any point or points within your province of residence and destined for a location outside of your province of residence; or
- b) any trip destined to arrive at any point or points in your province of residence from a location outside of your province of residence; or
- c) any trip where both the departure point, and the destination are from a location outside of your province of residence.

Principal Sum

The principal sum shall be \$100,000 Canadian for the covered person and dependent spouse, and \$20,000 Canadian for any covered dependent children.

Benefits and Payment for loss of:

- Life - 100% of principal sum
- Two limbs - 100% of principal sum
- Sight of both eyes - 100% of principal sum
- One limb and sight of one eye - 100% of principal sum

- One limb - 50% of principal sum
- Sight of one eye - 50% of principal sum

Beneficiary Designation

Indemnity for loss of life of the insured will be payable to the estate of the insured. All other indemnities will be payable to the insured.

Aggregate Limit of Liability

Aggregate limit of liability is \$5,000,000 per aircraft or common carrier. If the total claims payable exceeds \$5,000,000 Canadian, then the insurer shall pro-rate the payment.

Exclusions

No benefit shall be payable in respect of any loss caused directly or indirectly, wholly or in part by one or more of the following:

1. Insurrection, war, (declared or not) or the hostile action of the armed forces of any country, or any riot or civil commotion.
2. Intentionally self-inflicted injuries, suicide, or attempted suicide, while sane or insane.
3. Committing or attempting to commit a criminal offense.

International Travel Assistance

How do you find good medical care when you are faced with an emergency in a foreign country? You may not speak the language; you may be incapacitated, and you will most likely not know where to get professional care. Through your Group Plan you now have assistance for all of these problems.

Our international travel assistance service offers 24-hour worldwide assistance to travellers in emergency medical situations. Insured travellers, physicians or hospitals should contact the international travel assistance provider immediately in the following medical situations:

- You are hospitalized or about to be hospitalized.
- You need assistance in locating the proper medical care nearest you.
- Insurance verification is required (this may be confirmed by the physician/hospital through our international travel assistance provider directly).
- You are involved in an accident requiring medical treatment.
- You have a medical problem and require translation service.
- Emergency evacuation is deemed medically necessary (arrangements will be made through our international travel assistance provider).
- Any serious medical problem arises.
- Be prepared to give the name of the person covered, the client and certificate number (on the Blue Cross card) and a description of the problem.

International Travel Assistance Toll Free Telephone Numbers

In Canada and United States, call toll free

1.866.601.2583

In all other countries, or if you have any difficulties with the toll-free number, call collect:

0.204.775.2583.

The international travel assistance toll free telephone numbers are located on the back of your identification card for your convenience.

For general inquiries call Manitoba Blue Cross at **204.775.0151** or toll free (within Manitoba only) **1.800.USE.BLUE (1.800.873.2583)**, Outside Manitoba, but within Canada call **1.888.596.1032**

Contact our international travel assistance service immediately for benefits verification and procedures. Neither Manitoba Blue Cross nor the international travel assistance provider shall be responsible for the availability, quality or results of any medical treatment or the failure of the covered person to obtain medical treatment.

Termination of Coverage

Travel Health coverage ceases on the day in which employment with the Government of Manitoba is terminated.

Coverage can be maintained during periods of approved leaves by prepayment of premiums. An employee who elects to prepay Extended Health Benefits must also prepay Ambulance, Hospital, Semi-Private premiums and Travel Plan premiums if applicable.

There is a two-year limit on pre-payment of Extended Health Benefits, Ambulance, Hospital, Semi-Private and Travel Plan premiums unless the employee is on Long Term Disability in which case there is no limit.

Survivor Coverage

In the event of death of the employee, the spouse and dependents shall continue to be eligible for the defined Plan benefits, without payment of subscriptions, until the earliest of:

- a) date of termination of the Group Agreement
- b) the end of twenty-four (24) months following the date of the employee's death
- c) effective date of similar benefits obtained elsewhere
- d) date that Dependent eligibility would normally cease as defined in the Group Agreement
- e) date of remarriage of Spouse [Dependents continue to be eligible subject to the terms of a) to d) above].

Reinstatement

Where an employee who has elected to not prepay premiums, returns from a leave without pay or educational leave without pay, the employee becomes eligible for Travel Health Plan coverage on the first day of the bi-weekly pay period following the date of return to work.

How To Make a Claim

The Plan covers hospital, medical and surgical expenses in excess of what is covered under your provincial medical plan. Employees should contact Manitoba Blue Cross to request a Group Travel Health Claim Form, or [Click here for a printable claim form.](#) Payment will be coordinated with Manitoba Health.

Claims must be submitted within 2 years of date of service.

For an Air Flight and Common Carrier Accident, please call Manitoba Blue Cross at 204-775-0151 and one of their Information Service Representatives will assist you.

Changes In Status

In order to ensure proper coverage please notify your Pay & Benefits administrator immediately of any changes in marital or dependent status or change of residence.