

OUTLINE OF BENEFITS

Douglas Students' Union Billing Division No. 26059

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 Customer Service Centre at 1-888-711-1119 or the National Student Health Network at 1-800-468-0668 to determine benefit eligibility and for coverage details. Inquiries can also be emailed through the Green Shield Canada website at www.greenshield.ca. Visit the Contact Us – Customer Service section.

“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 20% applies to each prescription (i.e. you are responsible for 20% of the purchase)
- Generic equivalent drug substitution applies
- Quebec residents only: 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.

Benefits do not include smoking cessation products and medication for the treatment of obesity, erectile dysfunction and infertility. 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%
- Maximums shown below are per participant

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. A dental accident report form must be submitted immediately following the accident.

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, Registered Massage Therapist (medical referral required), Speech Therapist, Chiropractor, Licensed Naturopath, Podiatrist/Chiropodist, Clinical Psychologist or Acupuncturist (physician/surgeon or anyone licensed through the Acupuncture Foundation of Canada to perform acupuncture) up to a \$300.00 maximum per paramedical discipline per benefit year

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.

Private Duty Nursing Benefits carry a maximum of \$10,000.00 annually based on the date of the first paid claim for the services of a Registered Nurse (R.N.) or Registered Practical Nurse (R.P.N.)/Licensed Practical Nurse (L.P.N.) in the home on a full or part shift basis

Eye examinations performed by a registered, licensed Optometrist or Physician limited to \$25.00 every 24 months beginning September 1.

As a Green Shield Plan Member, you have access to our national preferred provider vision network arrangement where all Green Shield Plan Members are eligible to receive a discount on eyewear.

Features of this great value-added service include:

1. **offer applies to any Green Shield Plan Member, regardless of whether you have Green Shield vision benefits or not;**
2. the vision provider may bill Green Shield directly; the Plan Member just pays any portion of the expense not covered under their vision benefit;
3. trustworthy retail chains with convenient locations;
4. discount offer applies to everything such as all extra coatings, upgrades and accessories;
5. hundreds of the latest frame styles to choose from plus the latest lens and coating technology;

6. professional opticians to assist in selecting products;
7. offer applies to non-disposable contact lenses (excludes disposable contact lenses).

Visit our web site at www.greenshield.ca or call our Customer Service Centre at 1-888-711-1119 for information on the vision providers.

How to Submit Your Vision Claim

1. The vision provider will apply the appropriate discount(s) to your claim and may submit the claim directly to Green Shield for payment. You pay your vision provider any balance not covered under your vision benefit.
2. If no vision benefit exists, you pay your provider the full balance owing after the applicable discounts have been applied.

DENTAL

- Your deductible is nil
- Your overall Dental maximum is \$500.00 per benefit year
- Stated maximums are based on paid claims
- Your co-insurance which is applied to the eligible allowed amount is 80% for Basic and Comprehensive basic services
- Basic services cover: recalls once every 6 months, other exams and full mouth x-rays every 3 years
- Comprehensive basic services cover denture relines once every 3 years
- Applicable lab, drug and other expenses are eligible to a maximum of 40% 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 Provincial Dental Association Fee Guide 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 after 6 months from installation.

TUTORIAL BENEFITS

- Your co-insurance for Tutorial Services is 100%
- Your maximum is \$1,000.00 per benefit year
- Private tutorial service of a qualified teacher up to \$15.00 per hour, if an accident or illness causes you to be disabled and confined to home or hospital for 15 consecutive school days.

NOTE: Your dependents are not eligible for this benefit.

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 to other services at Green Shield

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

LIMITED BENEFIT CLAUSE

Green Shield will determine the amount of benefits payable, giving consideration to limited procedures, services, or courses of treatment that may be performed to accomplish the desired result. 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 for:

1. services or supplies received as a result of disease, illness or injury due to:
 - a) intentionally self-inflicted injury while sane or insane;
 - b) an act of war, declared or undeclared;
 - c) participation in a riot or civil commotion; or
 - d) committing a criminal offence;
2. services or supplies provided while serving in the armed forces of any country;
3. failure to keep a scheduled appointment with a legally qualified medical or dental practitioner;
4. the completion of any claim forms and/or insurance reports;

5. any specific treatment or drug which:
 - a) does not meet accepted standards of medical, dental or ophthalmic practice, including charges for services or supplies which are experimental in nature, or is not considered to be effective (either medically or from a cost perspective, based on Health Canada's approved indication for use);
 - b) is an adjunctive drug prescribed in connection with any treatment or drug that is not an eligible service;
 - c) will be administered in a hospital;
 - d) is not dispensed by the pharmacist in accordance with the payment method used for Drugs;
 - e) is not being used and/or administered in accordance with Health Canada's approved indication for use, even though such drug or procedure may customarily be used in the treatment of other illnesses or injuries;

6. services or supplies that:
 - a) are not recommended, provided by or approved by the attending legally qualified (in the opinion of Green Shield) medical practitioner or dental practitioner as permitted by law;
 - b) are legally prohibited by the government from coverage;
 - c) you are not obligated to pay for or for which no charge would be made in the absence of benefit coverage or for which payment is made on your behalf by a not-for-profit prepayment association, insurance carrier, third party administrator, like agency or a party other than Green Shield, your plan sponsor or you;
 - d) are provided by a health practitioner whose license by the relevant provincial regulatory and/or professional association has been suspended or revoked;
 - e) are not provided by a designated provider of service in response to a prescription issued by a legally qualified health practitioner;
 - f) are primarily for cosmetic or aesthetic purposes, or are to correct congenital malformations;
 - g) are provided by an immediate family member related to you by birth, adoption, or by marriage and/or a practitioner who normally resides in your home. An immediate family member includes a parent, spouse, child or sibling;
 - h) are a replacement of lost, missing or stolen items, or items that are damaged due to negligence.
 - i) are 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;
 - j) would normally be paid through any provincial health insurance plan, worker's compensation board or tribunal, 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;

- k) were previously provided or paid for by any governmental body or agency, but which have been modified, suspended or discontinued as result of changes in provincial health plan legislation or de-listing of any provincial health plan services or supplies;
- l) may include but are not limited to, drugs, laboratory services, diagnostic testing or any other service which is provided by and/or administered in any public or private health care clinic or like facility, medical practitioner's office or residence, where the treatment or drug does not meet the accepted standards or is not considered to be effective (either medically or from a cost perspective, based on Health Canada's approved indication for use);
- m) are provided by a medical practitioner who has opted out of any provincial health insurance plan and the provincial health insurance plan would have otherwise paid for such eligible service;
- n) relates to treatment of injuries arising out of a motor vehicle accident;
- o) are cognitive or administrative services or other fees charged by a provider of service for services other than those directly relating to the delivery of the service or supply.

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.

PLAN MEMBER ONLINE SERVICES

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

- Print personalized claim forms;
- Find out benefit eligibility information, like when you can buy your next pair of glasses;
- Instantly view your Explanation of Benefits and claim history;
- Print your own claim history for tax purposes or Co-ordination of Benefits;
- Have claim payments deposited directly into your bank account*;
- And much more!

Contact the Green Shield Canada Customer Service Centre at 1.888.711.1119 to confirm your permanent address is entered on our system. You can then self-register for Plan Member Online Services using your Green Shield ID number **(DSU + student number)** and Green Shield will mail the logon and password information required to activate your account. Visit www.greenshield.ca today!

(*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 - PRISM CONTINUUM™ Program

The PRISM CONTINUUM™ Program offers three plans that are focused on providing coverage for you if you are leaving a company group plan.

This program may be your solution if you, your spouse or dependent children are losing, or have lost company group health benefits within the last 60 days and are looking for guaranteed coverage.

Call 416-601-0429 in the Toronto area or toll-free at 1-800-667-0429 for an information package or visit our website at www.greenshield.ca. Coverage is guaranteed if you apply within 60 days of losing your Green Shield group benefits.

BASIC ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE

DOUGLAS STUDENTS' UNION
POLICY SGC 10 30 35 17

ACE INA Insurance

The Basic Accidental Death and Dismemberment plan covers you 24 hours a day, anywhere in the world, for specified accidental losses. If you suffer any of the eligible losses listed in the policy as the result of an accidental injury which results directly and independently of all over causes and the loss occurs within 365 days of the date of the accident, the benefits indicated in the policy will be paid.

Who is Covered?

Class 1: All active full-time Students of the Policyholder under the age of 70 whose names are on file with the Policyholder.

Amount of Insurance (Principle Sum): \$7,000.00

For details regarding the schedule of losses and information on other benefits under the AD&D policy, please contact your health plan administrator.

September 2007



**OUT OF PROVINCE/CANADA
TRAVEL MEDICAL EMERGENCY INSURANCE**



**Canadian Federation of Students/
National Student Health Network**

Policy #: 28556323
 Effective:..... September 1, 2007
 Administrator:..... ETFS Insurance Services Inc.
 Underwriter:..... Royal & Sun Alliance Insurance Company of Canada

BENEFIT SUMMARY

Coverage Maximum: \$5,000,000 per Coverage Period per Insured Person
 Coverage Period:..... 60 Days per Trip

BENEFIT	LIMIT
Hospital Accommodation	Reasonable & Customary Costs
Physician Charges	Reasonable & Customary Costs
Diagnostic Services	Reasonable & Customary Costs
Paramedical Services	\$250 per Profession
Prescription Drugs	30day supply per Prescription
Ambulance Services	Reasonable & Customary Costs
Medical Appliances	Reasonable & Customary Costs
Private Duty Nurse	Up to \$5,000
Emergency Air Transportation (air ambulance, emergency travel arrangements and medical attendants)	Reasonable & Customary Costs
Transportation to Bedside	Economy Roundtrip Airfare plus up to \$150 per day to \$3,000
Return of Travelling Companion	Oneway Airfare
Treatment of Dental Accidents	Up to \$2,000
Meals and Accommodation	Up to \$150 per day, to \$3,000 per Trip
Vehicle Return	Up to \$5,000
Return of Deceased	Up to \$5,000

Incidental Expenses	Up to \$250
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- Coverage maximum and limits are expressed in Canadian dollars
- Certain conditions and limitations apply, consult the participant's booklet wording for details
- The actual wording of the master policy governs all situations

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ASSURANCE VOYAGE
COLLECTIVE

GROUP TRAVEL
INSURANCE



Canadian Federation of Students/
National Student Health Network

Policy Number: 28556323

Coverage Period: 60 days per Trip

ASSURANCE VOYAGE COMPLÉMENTAIRE POUR SOINS MÉDICAUX ET HOSPITALIERS D'URGENCE
EMERGENCY EXCESS MEDICAL AND HOSPITAL TRAVEL INSURANCE

Medical Assistance

YOU MUST contact Global Excel
prior to receiving any medical treatment.

In the event of an emergency, call:

From / Du CANADA and USA / et E.U. 1-866-870-1898
Collected from anywhere / À frais virés de n'importe où + (819) 566-1898

Assistance médicale

VOUS DEVEZ communiquer avec Global Excel
avant de recevoir un traitement médical quelconque.

Advenant une urgence, composez :

From / De
Australia / Australie 1 800 554 365
Dominican Republic /
République Dominicaine 1 888 751 4335
France 0 800 913 330
Germany / Allemagne 0600 181 6871
Ireland / Irlande 1 800 550 570
Italy / Italie 800 871 706
Mexico / Mexique 00 1 800 514 1518
United Kingdom /
Royaume-Uni 0800 917 8632

The following toll free numbers are subject to change without notice.
Les numéros sans frais suivants peuvent être modifiés sans préavis.

Utilisation de cette carte est assujettie
aux conditions du contrat d'assurance et
ne constitue pas nécessairement une
garantie de paiement.

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France 0 800 913 330
Germany / Allemagne 0600 181 6871
Ireland / Irlande 1 800 550 570
Italy / Italie 800 871 706
Mexico / Mexique 00 1 800 514 1518
United Kingdom /
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