

UHIP® – your health care solution



### About this booklet

For all eligible international residents studying or working at participating universities in Ontario, Canada. Group Policy Number 050150.

This booklet contains UHIP® details. Keep it in a safe place.

This is not a contract of insurance. This booklet is intended for general guidance and is not a contract. The complete terms, conditions, limitations and exclusions can be found in group insurance policy #050150 issued by Sun Life Assurance Company of Canada.

For questions about this booklet, your coverage, claims or claims payment, contact at 1-866-500-8447

This booklet includes information you need to know about your UHIP coverage. You will see references to "covered person." This refers to you, your spouse and children (if they are insured under Group Policy Number 050150).

#### **Important Information**

Not all health care providers will send the request for payment directly to Sun Life. In this case, you will have to pay out of pocket for your medical expenses.

To make a claim for services or supplies not directly invoiced to Sun Life by the provider, complete a UHIP claim form and ensure the following information is included:

- OHIP fee codes are noted on either the invoice or the claim form.
- The treating practitioner or hospital representative signs the claim form.
- Original receipts are attached to your claim request.

Once complete, make a copy for your records and submit the original form with all original receipts to:

Sun Life Assurance Company of Canada Claims Department PO Box 2015 STN Waterloo Waterloo, ON N2J 0B1

### **About UHIP**

When you come to study or work at an Ontario university, you are required under the terms of your study/employment to have health insurance to pay the cost of health care services and medical treatments.

You must apply for UHIP. This affordable plan is compulsory for all eligible international students or employees and their dependants (spouse and/or children) affiliated with a participating Ontario University. This plan provides coverage for health services and medical treatments you and your family might need to maintain your health while living in Canada.

UHIP will pay up to \$1 million (Canadian dollars) per policy year (September to August) for the cost of your eligible health services and medical treatments.

With pre-approval from Sun Life, UHIP may cover items and programs available to an Ontario resident under special approvals by the Ministry of Health and Long Term Care (e.g. Assisted Devices Program, elective surgical procedures, home care, nutritional supplements, public health programs, addiction and bridging programs).

# What is the difference between UHIP and the Ontario Health Insurance Plan (OHIP)?

UHIP may cover you for some of the same services covered under OHIP. But UHIP does not offer the same coverage. For example, prescription drugs for Canadian students under age 25 are covered by OHIP+. UHIP only covers prescription drugs given to you in a hospital.

See the "What's covered?" section on page 2 for a list of expenses covered under UHIP.

## UHIP at a glance

You are eligible for UHIP if you are a student, employee, dependant or short-term visitor.

Your policy year runs Sept. 1 to Aug. 31.

The plan maximum each year is \$1 million in most cases.

UHIP covers health care services, with some limitations and restrictions, such as:

- Hospital service in Ontario
- Doctor services
- Other practitioner services (e.g. osteopath, podiatrist)
- Diagnostic, laboratory and X-ray services
- Ambulance
- Vision care
- Prescription drugs given to you in a hospital
- Dental surgery performed in a hospital
- Emergency services outside Ontario
- · Terminal illness or death.

Providers will often invoice Sun Life directly. If not, complete a claim form at **www.uhip.ca** and send it (with receipts) to:

Sun Life Assurance Company of Canada Claims Department PO Box 2015 STN Waterloo Waterloo, ON N2J 0B1

1

### What's covered?

This section provides general information only. For detailed benefits information, please call Sun Life at **1-866-500- UHIP (8447)**.

You will see references to "medically necessary." That's a treatment, service or supply that is essential, effective and appropriate in the diagnosis, care or treatment of a medical condition, sickness or injury. It is up to Sun Life to determine eligibility.

References to "interprovincial rates" are charges for services as approved by the Ontario Ministry of Health and Long

In some cases, Sun Life has negotiated preferred rates with hospitals for inpatient and outpatient medical services. Visit **www.uhip.ca** for a list of preferred hospitals.

Most eligible services are fully covered under the plan with no additional expense to you. However, some medical professionals may bill you for an amount that exceeds the UHIP coverage. In these cases, you pay the difference between the two amounts.

Your policy year runs Sept. 1 to Aug. 31. The plan's maximum each year is \$1 million. In some cases, that amount may be reduced if directed by the terms of the policy.

You must present your UHIP coverage card each time you visit a health care provider along with your personal identification.

### Hospital service Emergency room services and outpatient charges. • Emergency hospitalization in a standard wardroom is 100% covered for the first in Ontario four days. After that, coverage rises to a maximum of 2.5 times the hospital interprovincial rate. • Non-emergency hospitalization in a standard ward is covered to a maximum of 2.5 times the interprovincial rate. • A semi-private or private room is covered if medically necessary. The attending doctor must confirm this in writing. • The following is also covered: operating and delivery room usage · radiotherapy facilities and respiratory equipment home renal dialysis or home hyper alimentation equipment · supplies and medications available from a Ontario hospital and prescribed by a staff doctor of that hospital · doctor services or services provided by anyone paid by the hospital. In-patient and outpatient elective surgery or treatment requires pre-approval by Sun Life. Please provide a letter from the attending doctor indicating the medical necessity and urgency of the procedure, your expected stay at the hospital and billing information. If you expect to be in hospital for more than three nights, notify Sun Life within 48 hours of your stay. **Doctor services** • One annual health examination. • Services provided at a doctor's office, in a hospital or institution or at home. • Diagnosis of an illness or injury, and treatment. · Surgery, including anaesthetics. • Care related to pregnancy – prenatal and postnatal. Coverage applies even if the pregnancy began before arriving in Ontario. You are covered for 125% of OHIP fees. Other practitioner • Treatment by an osteopath or podiatrist, according to OHIP conditions. • Physiotherapy in an OHIP-designated physiotherapy clinic, according to OHIP services conditions. You must have a prescription from your doctor. • Ground or in-province air ambulance to the nearest available hospital. A doctor **Ambulance** or hospital official must confirm that this is essential. OHIP specifies your coverage maximum, which includes a fee payable by the covered person.

Diagnostic, laboratory and X-ray services	<ul> <li>X-rays for diagnostic and treatment purposes.</li> <li>Laboratory services and clinical pathology ordered by a doctor and performed in an approved laboratory.</li> <li>Laboratory fees.</li> <li>Your coverage matches OHIP coverage.</li> </ul>
Vision care	<ul> <li>If patient is under 20, or 65 and over:</li> <li>One eye examination by an ophthalmologist or optometrist, per 12-month period.</li> <li>If more frequent exams are necessary, please ask Sun Life for a preauthorization.</li> </ul>
Prescription drugs dispensed in hospital	Full coverage.
Dental surgery performed in hospital	Dental surgery fees, when hospitalization is required in the opinion of a doctor or dental surgeon. The procedures must be performed in an approved hospital by a dental surgeon who is on-staff at the hospital.  Sun Life's prior approval is required, except in the case of an emergency.
Emergency services outside Ontario	<ul> <li>Outside Ontario but in Canada:</li> <li>Your coverage matches OHIP coverage.</li> <li>Outside Canada:</li> <li>Coverage for medically necessary emergency expenses, including: <ul> <li>Emergency hospital outpatient services.</li> <li>Emergency inpatient hospitalization. You are covered 100% for the first four days. After that, you are covered at a maximum of 2.5 times the hospital's interprovincial rates.</li> <li>Physician services are paid at 125% of the OHIP Schedule of Fees.</li> <li>Outpatient and emergency room services are covered at 100%.</li> <li>At Sun Life's discretion, you will be transported back to Ontario. The attending doctor must approve the transfer. Sun Life requires 48 hours notice.</li> </ul> </li> <li>Services provided outside of Ontario and Canada are reimbursed at the same levels and under the same conditions as OHIP.</li> <li>Consider buying additional travel insurance so that you don't face significant out-of-pocket expenses. Visit www.uhip.ca for details.</li> </ul>

# Terminal illness or death

If a covered person is diagnosed with a terminal illness or dies, Sun Life will pay up to \$20,000 of eligible expenses to send the person to his or her home country.

Sun Life must pre-approve expenses. They must be reasonable and comparable to customary charges for whatever services you need.

#### Terminal Illness:

- A covered person who has been diagnosed with a terminal illness may wish to return to his or her home country.
- Contact Sun Life to discuss this request.
- If approved, Sun Life will pay up to \$20,000 or the actual cost, whichever is less. The return must be by the most direct route to the airport nearest the covered person's home.
- If not approved, Sun Life will obtain an independent medical opinion.
- In some cases, Sun Life will request that the covered person return to his or
  her home country. They're free to refuse. In that case, UHIP coverage will
  continue for as long as the covered person meets the eligibility requirements of
  UHIP.
- Before the patient returns to his or her home country, Sun Life may determine
  the level of care required in consultation with the patient's doctor. That
  includes a possible transfer to another hospital or medical facility. Sun Life may
  consider alternative procedures, services and personnel that are less expensive
  but that provide adequate care. At all times, Sun Life will make decisions
  consistent with accepted standards of medical practice.

#### Death:

- If a covered person dies, Sun Life will pay \$20,000, or the actual cost, whichever is less, of returning the covered person's remains. The return must be by the most direct route to the airport nearest the covered person's home.
- Eligible expenses within the \$20,000 limit will include the reasonable and customary costs for preparation of the body, transportation of the remains, documentation, and shipment container(s). Sun Life will pay only what is required by provincial, federal, international or transportation legislation. Please notify Sun Life as soon as possible.

### What's not covered?

- Drugs, except as detailed in the UHIP policy.
- Paramedical services, except as described in "Other practitioner services" above.
- Dental services, except as described in "Dental surgery performed in hospital" above.
- Services not provided by OHIP. Changes to OHIP will be adopted when approved by the UHIP Steering Committee.
- Doctors' and hospitals' charges above those covered by UHIP.
- Charges that the covered person is entitled to submit for payment in any other plan.
- Charges that would be provided free of charge if the patient was not covered by UHIP.
- Cosmetic surgery, unless required because of an accident that occurred while the patient was covered by UHIP. The injury must also qualify for OHIP coverage.
- Medical examinations and tests required for immigration purposes or by a third party.
- Expenses for traveling time or mileage.
- Expenses for advice given by telephone.
- Court testimony, preparation of records, reports, certificates or communications.
- Group examinations, immunizations or inoculations.
- Doctors' services or examinations for screenings, such as an immigration examination. Only services covered by OHIP are eligible.
- Laboratory services or clinical pathology, unless specifically included as an eligible expense.
- Acupuncture.
- Eyeglasses, frames or contact lenses.
- Private-duty nursing, except when provided as part of home care.
- Hospital visits solely for the administration of drugs.

Contact your university to learn if these types of services are covered through your student union supplemental health plan.

## Eligibility

#### To be eligible for UHIP as a student, you must be one of the following:

- A full-time student with a valid study permit or temporary resident visa issued by Immigration, Refugees and Citizenship Canada. You must be registered in a degree program at a university that is participating in UHIP or at an affiliated college. You must be working toward an undergraduate, graduate or post-graduate degree.
- A part-time student who was previously enrolled as a full-time student. You must have a valid study permit or temporary resident visa issued by Immigration, Refugees and Citizenship Canada. You must be registered in a degree program at a university that is participating in UHIP or at an affiliated college. You must be working toward an undergraduate, graduate or post-graduate degree. You may be enrolled as a part-time student for a maximum of six semesters.
- A non-Ontario resident who is not entitled to OHIP coverage. You must be a full-time student at a university that is participating in UHIP. You may participate in a study-abroad or co-op work exchange program, or you may receive a letter of permission to attend an overseas university for credit.
- A non-Ontario resident student who does not fit any of the categories above. You must not be entitled to OHIP coverage. You must be registered in an English as a Second Language and/or non-degree program at a university that is participating in UHIP. Participating universities make a decision each year regarding UHIP coverage for these students. If your university elected to extend UHIP coverage to students in this category, you must participate. Coverage under UHIP is mandatory. This coverage is limited to a maximum period of two years.

#### To be eligible for UHIP as an employee, you must be one of the following:

- An international employee of a university that is participating in UHIP or at an affiliated college. You must have a valid work permit issued by Immigration, Refugees and Citizenship Canada.
- A Canadian employee of a university that is participating in UHIP or at an affiliated college. You must have exhausted your lifetime extension of OHIP coverage and be absent from Canada on approved university business (such as sabbatical, special work term or secondment).
- A Canadian employee or other individual who is officially associated with a university that is participating in UHIP or at
  an affiliated college. You must have applied for OHIP during the three-month waiting period for OHIP coverage and you
  must be eligible for OHIP coverage.

#### To be eligible for UHIP as a dependant, you must be one of the following:

- A legal, common-law or same-sex spouse who is living with the eligible student or employee. Your conjugal relationship must have existed for at least 12 months.
- A natural or legally adopted child, stepchild or child for whom the eligible student or employee has been appointed legal guardian. Your primary residence must be with the student or employee. You must not be married, and you must depend on the student or employee for support. You must be under the age of 22. If you are studying full-time at an accredited educational institution, you must be under the age of 25. Or you must be mentally or physically disabled, as defined by UHIP.

#### To be eligible for UHIP as a short-term visitor, you must be:

• Officially associated with a university that is participating in UHIP or at an affiliated college. You must be in a designated educational or staffing function, or be an invitee attending a seminar. Eligible dependants travelling with the short-term visitor are also covered. Participating universities make a decision each year regarding UHIP coverage for short-term visitors. If your university elected to extend UHIP coverage to short-term visitors, you must participate. Coverage under UHIP is mandatory. It is up to each university to define short-term. Coverage begins on the date you arrive in Canada, and must run a minimum two weeks and a maximum three months. Visitors staying more than three months must register for UHIP coverage.

To confirm your eligibility, contact your university plan administrator.

# When your UHIP coverage begins

**As a student or dependant of a student**, your coverage begins on the date you arrive in Canada. If you arrive before your university term starts, the earliest date your UHIP coverage can start is the 10th day of the month prior to the month in which your university term begins.

**As an employee or dependant of an employee**, your coverage begins on the date you arrive in Canada. If you arrive before your university employment starts, the earliest date your UHIP coverage can start is 20 days prior to the month in which your university employment begins.

Visit www.uhip.ca for examples of when coverage begins.

# When coverage ends

#### Your coverage ends if one of the following happens:

- You stop paying premiums. This happens on the last day of the month for which you purchased coverage.
- You fail to meet the eligibility requirements. Coverage ends the day this is determined.
- You retire. If you retire on the first of the month, coverage ends on your retirement date. Otherwise, coverage ends on the first of the month following your retirement date.
- The group insurance policy is terminated. Coverage ends on that date.
- You obtain OHIP coverage. Coverage ends on the date this becomes effective.
- You are denied OHIP coverage. Coverage ends 24 months after the date you receive notification of this denial.
- You misuse your coverage card. Coverage ends on the date Sun Life obtains evidence of this.
- You fail to report medical test results or submit false medical test reports to Immigration, Refugees and Citizenship Canada in order to obtain medical clearance. Coverage ends on the date Sun Life obtains evidence of this.

#### Your dependant's coverage ends whenever one of the following happens:

- Your coverage ends. This happens on the last day of the month for which you purchased coverage.
- Your dependant stops meeting the definition of an eligible dependant. Coverage ends on the last day of the month in which this happens.
- Your dependant acquires OHIP coverage. Coverage ends on the date this becomes effective.
- Your dependant is denied OHIP coverage. Coverage ends 24 months after the date he or she receives notification
  of this refusal.
- Your status changes to that of visitor under a permit from Immigration, Refugees and Citizenship Canada. Coverage ends on that date.
- You or your dependant misuse your coverage card. Coverage ends on the date Sun Life obtains evidence of this.
- You or your dependant fail to report medical test results or submit false medical test reports to Immigration, Refugees and Citizenship Canada in order to obtain medical clearance. Coverage ends on the date Sun Life obtains evidence of this.

### Limitations of actions

#### For covered persons residing in Ontario:

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Limitations Act, 2002.

#### For covered persons residing outside of Ontario:

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act or such other applicable legislation of your province or territory.

# Right to copies of documents

#### You have a right to ask for copies of the following:

- any written statement or other record, not otherwise part of the enrolment for insurance,
- this booklet, and
- the group policy.

The first copy will be provided at no cost. A fee may be charged for additional copies. Contact your university plan administrator to ask for any of these documents.

## Questions?

Contact or visit the International Student office or Human Resources office at your university. You can also visit **www.uhip.ca**.

For information about making a claim, or the status of a claim you have already sent to Sun Life, call our Health Claims Client Care Centre at **1-866-500-UHIP (8447)**.

# Respecting your privacy

Respecting your privacy is a priority for the Sun Life Financial group of companies. We keep in confidence personal information about you and the products and services you have with us to provide you with investment, retirement and insurance products and services to help you meet your lifetime financial objectives. To meet these objectives, we collect, use and disclose your personal information for purposes that include: underwriting; administration; claims adjudication; protecting against fraud, errors or misrepresentations; meeting legal, regulatory or contractual requirements and we may tell you about other related products and services that we believe meet your changing needs. The only people who have access to your personal information are our employees, advisors, third-party service providers and our reinsurers. We will also provide access to anyone else you authorize. Sometimes, unless we are otherwise prohibited, these people may be in countries outside Canada, so your personal information may be subject to the laws of those countries. You can ask for the information in our files about you and, if necessary, ask us in writing to correct it. To find out more about our privacy practices, visit www.sunlife.ca/privacy.

