



Prairie Teamsters Retiree Health Plan:

TRAVEL HEALTH BENEFIT PROVISIONS



Summary of Benefits

Travel Benefit

Class Description	All Retired Employees
Deductible	None
Reimbursement Level	100%
Coverage Duration	30 days*
	Benefit Maximum
Emergency Hospital and Medical Travel Coverage	\$5,000,000/Participant/Incident
Worldwide Travel Assistance	Yes
Air Flight and Common Carrier Accident	Not included
Pre-Existing Condition	Applies to a Participant age 65 or over
Survivor Coverage	24 months

*Applies to any Trip that includes travel outside Canada.

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Purpose of Coverage

Blue Cross will pay the Eligible Expenses described in this benefit, subject to the conditions outlined below.

Additional Definitions

The following definitions apply to this benefit, in addition to those found under the *Definitions* provision of this policy.

Change in Prescribed Medication: A medication dosage or frequency has been reduced, increased, stopped and/or new medication has been prescribed. Does not include:

- a change from a brand name medication to a generic brand of the same dosage.
- the routine adjustment of Coumadin, warfarin, insulin or oral medication to control diabetes (as long as they are not newly prescribed or stopped) and there has been no change in your medical condition.

Emergency: a sudden, unexpected or unforeseen illness or injury that requires immediate medical Treatment due to:

- an injury resulting from an Accident;
- a new medical condition which begins during a Trip; or
- a medical condition that existed prior to a Trip (or prior to booking a Trip) provided that it is not part of an established Treatment program.

Hospital: A facility that:

- is licensed as an accredited hospital outside of the Participant's province of residence;
- offers care and Treatment to either Inpatients or outpatients;
- has a registered nurse on duty 24 hours a day;
- has a laboratory; and
- has an operating room where surgical operations are performed by a legally qualified surgeon.

Coverage excludes any facility used primarily as a clinic, continued or extended care facility, convalescent home, rest home, health spa or drug addiction or alcohol treatment centre unless specifically authorized by Blue Cross.

Immediate Family Member: A Participant's:

- spouse;
- parent, parent's spouse and parent's sibling;
- children and spouse's children;
- sibling and sibling's children;
- grandparent; or
- grandchild.

Incident: An individual occurrence of Emergency Illness or injury.

Inpatient: A patient confined to a Hospital for more than 24 hours on the recommendation of the attending Physician.

Stable and Controlled: The medical condition is not worsening and there has been no Change in Prescribed Medication for the condition or its usage or dosage, nor any other Treatment prescribed or recommended or received for the 90-day period prior to the date of departure of the Trip.

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Travel Companion: Persons who are travelling and sharing prepaid travel arrangements with the Participant. No more than 4 persons can qualify as a Travel Companion for any given Trip.

Treatment: A medical or diagnostic procedure prescribed, performed or recommended, including but not limited to, prescribed medication, investigative testing and surgery.

Treatment does not include:

- a medical condition that is Stable and Controlled;
- the unaltered use of prescribed medication for a medical condition which is Stable and Controlled; or
- a previously identified medical condition where the Physician observes no change in the condition for the 90-day period immediately before the date of departure of the Participant's Trip.

Trip: Travel outside of the Participant's province of residence.

What Blue Cross Will Pay

Blue Cross will pay for the expenses explicitly listed in the categories below, subject to the following terms and conditions:

- payment is limited to the Reimbursement Level, coverage duration, and benefit maximums specified below and in the Summary of Benefits;
- prior approval of Blue Cross must be obtained before the Eligible Expense is incurred;
- the charges must be usual, customary and reasonable, meaning that:
 - the amount charged is consistent with the amount generally charged by Health Practitioners for similar products or services in the geographical area in which the service or supply is being purchased; and
 - the frequency and quantity in which services or supplies are purchased by the Participant are, in the opinion of Blue Cross in consultation with its health care consultants, consistent with the frequency and quantity that would usually be prescribed or needed for the Participant's condition;
- payment is limited in accordance with the *Exclusions and Limitations* provision of this benefit;
- payment of this benefit is limited to amounts that are in excess of coverage provided by any other plan (where a court determines that this policy and any other plans provide primary coverage, this benefit will be co-ordinated with the other plan, as specified in the *Other Coverage* provision found in the *Claim* provisions of this policy); and
- payment is subject to post-payment audit in accordance with the *Right to Audit* provision found under the *Claim* provisions of this policy.

Emergency Hospital and Medical Travel Coverage

Blue Cross will pay the Eligible Expenses listed in this section if:

- they are incurred as a result of an Emergency;
- they are incurred outside the Participant's province of residence;
- they are provided at the nearest facility capable of providing adequate service at the time of Illness or Accident;
- the Participant is covered by Government Health Care Coverage when the Emergency occurs; and
- Blue Cross is satisfied the expense is necessary to stabilize the Participant's Emergency medical condition.

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Hospitalization: Charges for Hospital room accommodation and for Medically Necessary Inpatient and outpatient services.

Hospitalization Inpatient Allowance: An allowance of \$40 per day for each day the Participant is hospitalized as an Inpatient to a maximum of \$1,000.

Physician Fees: Fees charged for Physician or surgeon services.

Medical Appliances: The cost of casts, crutches, canes, slings, splints, trusses, braces or the temporary rental of a wheelchair or scooter, when prescribed by the attending Physician.

Nursing Care: Fees for private duty nursing during or immediately following hospitalization as an Inpatient performed by a professional nurse when prescribed by the attending Physician. The nurse providing the service must not be a Family Member of the Participant.

This coverage excludes nursing fees for custodial care.

Diagnostic Services: Charges for laboratory tests, X-rays and diagnostic imaging, when prescribed by the attending Physician.

Blood and Blood Plasma: Charges for blood and blood plasma if not available free of charge.

Drugs: The cost of drugs prescribed by a Physician, but only in a quantity sufficient to treat the condition for the duration of Trip. The Participant must provide satisfactory proof of purchase of this medication that includes:

- the name of the Participant;
- the date of purchase;
- the name of the medication;
- the Drug Identification Number, if available;
- the quantity and strength of the drug; and
- the total cost.

This coverage excludes vitamins and vitamin preparations, over the counter drugs, and patent and proprietary medicines available without a written prescription.

Paramedical Services: The cost of services rendered by:

- chiropractors, and chiropodists/podiatrists, a letter from the attending Physician is required indicating Treatment was for acute care and not chronic care; and
- physiotherapists in a Hospital.

This coverage excludes charges for X-rays.

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Accidental Dental and Other Dental Emergencies: Fees of a dental practitioner for Treatment:

- (a) of damage to natural teeth that occurs as a result of a direct accidental blow to the mouth;
- (b) that is necessary to repair a fracture or reposition a dislocation of the jaw resulting from an Accident; or
- (c) that is needed to relieve pain caused by an Emergency other than those listed in (a) or (b).

With respect to Treatment under categories (a) or (b):

- Treatment must begin while the Participant is covered by this benefit and end within 6 months of the Accident, unless deferred Treatment is approved by Blue Cross due to the age of the Participant; and the maximum reimbursement per Participant per Incident is \$3,000.

With respect to Treatment under category (c):

- a letter from the attending dentist is required indicating Treatment was necessary to relieve acute dental pain not present before the departure date; and the maximum reimbursement per Participant per Incident is \$300.

Ambulance Service: The cost of ground or air ambulance for transportation of a stretcher patient to the nearest qualified medical facility. This includes the cost of an inter-Hospital transfer if the attending Physician and Blue Cross determine that existing facilities are inadequate for Treatment or stabilization. Economy air transportation by a stretcher to the Participant's home city in Canada if they have received Treatment at a Hospital as an Inpatient.

The ambulance must be equipped with first aid equipment, oxygen and resuscitators, and regularly used for transporting sick and injured persons.

Emergency Remote Evacuation: When a regular ambulance service cannot be used, coverage for emergency evacuation from a mountain, body of water or other remote location by a commercial operator licensed to convey passengers to the nearest qualified medical facility capable of providing appropriate Treatment to a maximum of \$5,000 per Participant.

Medical Evacuation: The cost of:

- medical evacuation to a Hospital in the Participant's province of residence if not harmful to their health. Prior approval must be obtained and is at the discretion of Blue Cross; and
- medical evacuation from the place of hospitalization as an Inpatient to the Participant's province of residence to receive immediate medical attention, along with the cost of simultaneously returning one Travel Companion or any Immediate Family Member covered by the policy. If Medically Necessary, this cost may include a professional nurse when nursing care is required during the flight home.

If returning on a commercial aircraft, coverage includes:

- economy fare to the Participant's home city in Canada; and
- in the case of a nurse, round-trip economy fare.

Transportation to the Bedside/Identify the Deceased: The cost of round-trip economy airfare for an Immediate Family Member to the Hospital where the Participant has been confined for 3 or more days if the attending Physician provides written acknowledgement that this attendance is required.

The cost of round-trip economy airfare for an Immediate Family Member to identify the body of the Participant, if deceased.

The cost of commercial accommodation and meals for an Immediate Family Member travelling to the bedside or to identify the body of the Participant to a combined maximum of \$200 per day to a maximum of \$2,500.

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Vehicle Return: The fees charged by a commercial agency to return the Participant's vehicle, whether private or rental, to the Participant's residence or to the nearest appropriate vehicle rental agency, when the Participant is unable to drive as a result of an Emergency illness or injury. A medical certificate from the attending Physician confirming the Participant's medical incapacity to operate the vehicle is required. This benefit is subject to a maximum of \$4,000 per Trip.

Vehicle means a passenger automobile, motorcycle, motor home or truck with a gross weight of less than 9,000 pounds provided the vehicle is not licensed to carry passengers for hire.

Return of the Deceased: The cost of preparing and transporting the remains of the deceased Participant to their home city in Canada to a maximum of \$7,500 or up to \$5,000 for cremation or burial at place of death.

Meals and Accommodation: The cost of commercial accommodation and meals for an Immediate Family Member covered by the policy or Travel Companion remaining with the Participant during their hospitalization as an Inpatient when travel is delayed due to Emergency illness or injury. The medical reason for the delay must be verified by the attending Physician. Only expenses incurred after the termination date of the Participant's scheduled Trip will be considered an Eligible Expense.

All costs must be supported by receipts from commercial organizations.

Dependent Escort: The cost of return economy airfare for an escort to accompany the covered Child (up to 18 years of age) to their province of residence in the event a Participant has been air evacuated to Canada for medical reasons.

Replacement of Eyeglasses or Contact Lenses: Charges for the repair or replacement of prescription eyeglasses or contact lens or lenses up to a maximum of \$100 in the event of accidental injury resulting in the loss or breakage of eyeglasses or loss or breakage of a contact lens or lenses. The injury must be treated by a Physician or dentist to be eligible.

Return of Pet/Veterinarian Services: The cost to return the Participant's accompanying pet to the Participant's home city in Canada when the Participant has been confined to a Hospital outside their province of residence for 3 days. Subject to a maximum of \$500 per pet.

Charges for emergency veterinary care for unexpected injury to the Participant's accompanying pet to a maximum of \$200 per pet.

Worldwide Travel Assistance

Blue Cross, through its travel assistance provider, will provide an emergency toll-free line available 24 hours a day, 7 days a week, for Participants who need medical assistance or general assistance while travelling.

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Medical Assistance

If the Participant requires hospitalization or a consultation with a Physician as a result of an Emergency, the travel assistance provider appointed by Blue Cross will provide the following support services:

- direct the Participant to an appropriate clinic or Hospital;
- confirm with the service provider that the Participant is covered;
- ensure a follow-up of the medical file and communicate with the Participant's family Physician;
- co-ordinate the return home of a Child if the Participant is hospitalized;
- repatriation of the Participant to the province of residence if the Participant meets the eligibility requirements of this expense; and
- co-ordinate the return of the Participant's vehicle if the Participant meets the eligibility requirements of this expense.

General Assistance

In Emergency situations, the travel assistance provider appointed by Blue Cross will also provide the Participant with the following services:

- transmittal of urgent messages;
- co-ordination of claims;
- referral to legal counsel in the event of a serious Accident;
- settlement of formalities in the event of death;
- assistance with the loss or theft of identity papers; and
- information regarding embassies and consulates.

In addition, pre-travel advice regarding visas and vaccines is available.

Blue Cross and its travel assistance provider are not responsible for the quality of medical and Hospital care provided to the Participant, for the availability of such care or for the failure of the Participant to obtain medical treatment.

Payment of Claims

How Payments are Made

Blue Cross may approve payment directly to the service provider. In certain circumstances, the Participant will pay the full cost of any Eligible Expense at the time of purchase. Blue Cross will then reimburse any Eligible Expenses on receipt of proof of payment from the Participant.

Exclusions and Limitations

1. Blue Cross reserves the right to return the patient to their province of residence in an appropriate mode of transportation subject to agreement by the travel assistance provider and the attending Physician that such transportation would not be harmful to the patient's health. The refusal by the patient or the patient's family to be returned will absolve Blue Cross of any claim liability.
2. No payment will be made if:
 - (a) the Participant is travelling against medical advice;
 - (b) the Participant is in full-time attendance at a learning institution outside of Canada;
 - (c) it was reasonable to expect Treatment or hospitalization during the Trip for a medical condition;
 - (d) expenses are incurred beyond the coverage duration period specified in the Summary of Benefits;
 - (e) the purpose of the Trip is primarily or incidentally to seek medical advice or Treatment, even if this Trip is on the recommendation of a Physician;

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- (f) expenses have already been paid or are eligible for refund from a third party;
- (g) expenses or losses are incurred as a result of:
 - i. participation in a criminal act or attempt to commit a criminal act, regardless of whether charges are laid or a conviction is obtained;
 - ii. an injury or illness resulting from non-compliance with medical Treatment or therapy that has been prescribed, or failure to carry out a Physician's or Health Care Practitioner's instruction;
 - iii. suicide, attempted suicide or voluntary injury or illness; or
 - iv. insurrection, war (declared or not), the hostile action of the armed forces of any country or participation in any riot or civil commotion;
- (h) expenses for any care, Treatment, surgery, products or services that:
 - i. are for chronic or on-going care;
 - i. are not incurred as a result of an Emergency;
 - ii. are not Medically Necessary;
 - iii. are performed for cosmetic purposes only;
 - iv. are not required for the immediate relief of acute pain and suffering; or
 - v. could be delayed until the Participant's return to Canada;
- (i) expenses associated with the confinement of the Participant due to childbirth and delivery if any portion of the Trip is after the 31st week of gestation; or
- (j) charges for any medical condition or Emergency that occurs or recurs after Blue Cross or the international travel assistance provider recommends returning home following Emergency Treatment and the Participant chooses not to return.

Extension of Coverage

The Participant may purchase coverage beyond the coverage duration period specified in the Summary of Benefits. The Participant must purchase the coverage for the remainder of the trip prior to the expiry of the coverage duration period.

Pre-Existing Condition

Travel benefits are not payable if the expenses are directly or indirectly a result of a pre-existing condition as specified in the Summary of Benefits.

A pre-existing condition is an illness or medical condition for which, during the 90 days immediately before the date of departure of the Participant's Trip, the Participant has:

- been hospitalized;
- had a medical consultation;
- been prescribed Treatment or new medication;
- had a Change in Prescribed Medication; or
- received Treatment.

When Coverage Ends

Coverage ends on the date specified in the Summary of Benefits. In addition, coverage may end on an earlier date, as specified in the *When Coverage Ends* provision found under the *Coverage* provisions of this policy.

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