



Health & Dental Booklet

2023/2024



NEW!

STUDENT WELLNESS

Student Wellness provides students with free, confidential access to a professional counsellor any time, anywhere, via phone or internet.

Staffed by a team of highly trained and qualified professionals who are experts in fields such as well-being, family matters, relationships, debt management, employment issues and **much more.**

In Canada 1-833-549-3281

Direct Dial Outside of Canada 416-956-2963

studentbenefits.ca/studentwellness



See page 11 for more information ↘



Mount Allison Students' Union 2023/2024

The Mount Allison Students' Union is pleased to sponsor the Extended Health and Dental Benefit Plan ("the MASU Plan"), outlined in this booklet. All benefits are reimbursed directly from The Campus Trust, unless otherwise noted. This booklet provides you with a description of the benefits to which you are entitled, an explanation of the rules regarding eligibility, and the procedures to follow when submitting a claim. The benefits described here may be revised from time to time or discontinued.

The information contained in this booklet does not create or confer any contractual or other rights. All claims are considered, and paid, in accordance with the rules of the Plan and the insurance contracts. The Campus Trust, The PBAS Group and/or insurance companies have the full authority to resolve all questions related to the provisions of the MASU Plan. The PBAS Group has the right and opportunity to examine any person whose injury or illness is the basis of a claim, when and as often as it may reasonably require during the pendency and payment period of any such claim.

Your MASU identification number, name, and date of birth are used by The PBAS Group to determine your eligibility for benefits while you are a member of the MASU Plan. Without the use of this information you are still covered for benefits - however, your claims may not be adjudicated. Your personal information is used only for this purpose; it is stored with the utmost attention to security and deployed sparingly to fulfill the requirements of the MASU Plan and the law. For further information on the use of this information or to revoke the use of this information, contact The PBAS Group.

For Benefit Plan details, reimbursement and claim enquiries contact:

The PBAS Group
101-61 International Blvd
Toronto, ON M9W 6K4
Tel: 1 (888) 404-6623
studentbenefits@pbas.ca
www.studentbenefits.ca

For information regarding eligibility and rates, contact the Campus Administrator:

Mount Allison Students' Union
62 York Street
Sackville, NB E4L 1E2
Tel: (506) 364-3238
masuhealth@mta.ca
www.masu.ca

Important Deadlines

Opt out of the MASU Plan:
September 30, 2023

Add your spouse and/or children
to the MASU Plan:

September 30, 2023

Table of Contents

Eligibility

3

Am I eligible for benefits?	3
Are my spouse and/or dependant children eligible for benefits?	3
How do I add my spouse and dependant children to the plan?	4
When does coverage terminate?	4
Can I opt out of the Health/Dental Plan?	4
Is there a reason why I should keep the MASU Plan if I am covered elsewhere?	4
When will I receive my refund if I choose to opt out of the MASU Plan?	4

Health Benefits at a Glance

5

Description of Health Care Benefits

6

Limitations to the Health Care Benefit Plan	10
---	----

Student Wellness

11

Dental Benefits at a Glance

13

Description of Dental Benefits

14

Limitations to the Dental Care Benefit Plan	14
---	----

Register for Online Services

15

Will I receive a benefit card?	15
Can I submit a claim online?	16
How do I register for direct deposit?	16
Can I view my claims and payments on the website?	16
How do I know when my benefit maximums have been reached?	16

Submitting a Claim

17

How long do I have to submit a claim?	17
Can claims be paid directly to my provider?	17
How do I submit a claim?	18
What if I have more than one plan?	18

Online Solutions

19

Why choose the mobile app?	19
----------------------------	----



Eligibility

Am I eligible for benefits?

To be eligible for coverage you must be:

- Enrolled as a full-time student at Mount Allison University;
- Under the age of 65; and,
- Covered under a Provincial Health Care Plan or equivalent.

Full-time students are automatically enrolled in the MASU Health and Dental Benefit Plan when they register for classes. The health and dental fee is automatically applied to your Student Fees Account. If you have fulfilled the requirements for eligibility, you will have up to a twelve (12) month term of coverage commencing September 1st. Students enrolling after September 1st will be eligible for the remainder of the student year.

Did you know?

The benefit maximums listed in this booklet apply to each dependant individually, unless otherwise noted.

Are my spouse and/or dependant children eligible for benefits?

Yes, your spouse and dependant children can be covered for benefits. In order to be eligible, your dependants must be covered under a provincial health care plan, under age 65, and you must pay the applicable fee before the deadline. Your spouse and dependant children become eligible when you become eligible.

Spouse

A person to whom you are legally married or whom you cohabitate with on a permanent and ongoing basis for at least one continuous year, is publicly recognized as your spouse, and is under the age of 65.

Dependant Children

Children either natural, legally adopted, stepchildren or other children that live with you on a full-time basis, who are under the age of 21 and depend on you for support while living in a parent-child relationship.

Unmarried dependant children who have been identified as disabled and are over the age of 21, or; children under the age of 25 who are in full-time attendance at an accredited educational institution, are eligible for coverage, with the submission of documentation yearly.

How do I add my spouse and dependant children to the plan?

If you choose to add your eligible spouse and/or dependant children to the MASU Plan, you must complete the required form each year, online at studentbenefits.ca. You must complete this process by **September 30, 2023**.

The applicable fee will be charged to your Student Fees Account. Due to processing, this fee will appear on your Student Fees Account within 30 days.

When does coverage terminate?

Coverage for you and your dependants will terminate on August 31, unless:

- You cease to be an eligible student;
- You attain the age of 65;
- Premium payments by the Mount Allison Students' Union cease; or,
- Your plan is discontinued.

Coverage for your dependants will terminate on the date your dependants no longer meet the definition of an eligible dependant.

Can I opt out of the Extended Health and/or Dental Plan?

In order to opt out of this plan, you must be enrolled in another equivalent extended health and/or dental plan. Proof of coverage for health is required before you are able to opt out. You must complete this process by **September 30, 2023**.

If you choose to exclude yourself from the plan, you must complete the required form each year, online at studentbenefits.ca.

Once your opt out request has been approved, it will remain in force for the entire student year, unless your alternate extended health and/or dental plan terminates. You have 30 days from the loss of coverage to notify The PBAS Group, in order to be covered under this plan for the remainder of the student year. You must provide a copy of your notice of termination and pay the applicable fees.

Is there a reason why I should keep the MASU Plan if I am covered elsewhere?

The MASU Plan has been designed by students to specifically prioritize student needs. Remaining in both this plan and another plan may enable you to maximize your total coverage by coordinating the benefits of the two plans.

Students who have more than one group benefit plan can coordinate their benefits under each plan to increase coverage up to 100% of the total eligible expense. The payments from each plan are adjusted to limit the reimbursement to the total expense paid.

When will I receive my refund if I choose to opt out of the MASU Plan?

If you are already covered under an extended health and dental plan, and you choose to opt out of this plan, the MASU will refund the fee via direct deposit or cheque, as selected in your opt out form. Refund cheques are issued after the opt out period has closed.



Health Benefits

At-a-Glance | 2023/2024



Accidental Dental	100%	up to \$1,000 per injury
AD&D	—	see schedule of losses
Ambulance	100%	unlimited
Counselling	100%	up to \$1,000 per student year
Eye Exam	100%	up to \$100 every 24 months
Eye Wear	100%	up to \$100 every 24 months
Health Practitioners ¹	100%	\$50/visit, up to \$400 per practitioner
Hearing Aids	100%	up to \$400 every 60 months
Medical Equipment ²	100%	up to \$3,000 per student year
Orthotics ²	80%	up to \$200 per student year
Prescription Drugs	80%	up to \$4,000 per student year
Student Wellness	—	24 hours a day, 7 days a week, 1 (833) 549-3281
Travel Benefit	\$5,000,000	per coverage period
Tutorial Benefit	\$15/hour	\$1,000 maximum per disability

This is a basic overview of your health & dental plan, created as an easy way to assist students to maximize coverage. Complete descriptions of all benefits, including specific limits, are listed in your booklet.

¹ Includes Acupuncturists, chiropractors, dietitians, massage therapists², naturopath consultations, osteopaths, physiotherapists², podiatrist/chiropracist consultations, and speech therapists.

² Referral required every 12 months

Pharmacy Direct Billing:

Group: 6139
Carrier: MDM
Pharmacy Support: 1 (800) 838-1531

Student Benefits

studentbenefits.ca
1 (888) 404-6623
studentbenefits@pbas.ca

Address:

101-61 International Blvd.
Toronto, ON M9W 6K4



studentbenefits.ca



Description of Health Care Benefits

This section of the booklet contains information pertaining to the health portion of your benefit plan. This coverage information can also be found online, at studentbenefits.ca. Your benefits, as described below, come into effect after any Provincial Health Care annual maximums have been exhausted.

Covered charges are reasonable and customary expenses needed for medical care, services or supplies, and received while the person is eligible, for either an illness or injury that is non-occupational or related to pregnancy. No amount will be payable for taxes and/or shipping and handling fees for any covered service/product(s).

Accidental Dental – \$1,000 per injury

Charges for dental services by a licensed dentist for the repair of sound natural teeth (healthy, non-diseased and not heavily restored) are covered when required for a non-occupational accidental injury, external to the mouth, which occurs while the person is covered. No amount will be payable for injury caused by an object placed in or on the mouth, self-inflicted or to existing dentures, crowns, or bridgework. Work performed outside of Canada may be considered, after submitted to any Medical or Travel insurances of which you are eligible.

Benefits shall be paid in accordance with the New Brunswick Dental Society Suggested Fee Guide for General Practitioners, in effect at the time of treatment. Treatment must commence within 90 days following the date of the accident, and the care or services must be completed within one year from such date. No amount shall be payable for charges incurred after the termination date, or after the person's coverage terminates.

When submitting a claim for accidental dental, you are required to submit a letter detailing when and how the accident happened. The attending dentist must confirm that the treatment is the result of an accident.

It is recommended that the dentist submit a predetermination outlining the course of treatment and the resulting cost. Eligible accidental dental claims must first be submitted to the Health Care Plan. Once this benefit is exhausted, remaining expenses can then be considered under the Dental Care Plan.

Accidental Death and Dismemberment (AD&D) – AD&D Booklet on studentbenefits.ca

(This benefit is underwritten by Chubb Life Insurance Company of Canada under Policy Number SG10252601)

This coverage applies to the student only. The amount of the benefit is limited to the percentage shown in the Schedule of Losses. To see complete details of coverage, or to download your copy of the Accidental Death and Dismemberment Policy, please visit the Document Centre on studentbenefits.ca.

To designate or change your beneficiary, you must visit the Document Centre to fill out the form. Send a scanned copy, or the original signed copy, to The PBAS Group. If a beneficiary is not designated, any payments will be made to your estate.

Ambulance – No Maximum

Charges for licensed ambulance services within Canada, in excess of the amount payable under the covered person's Provincial Health Care Plan, are covered.

The coverage includes the transport of the covered person from the place of debilitation to the nearest hospital where treatment is available, or from the first hospital to another for specialized treatment not available at the first hospital, or to a convalescent/rehabilitation hospital. No amount will be paid for air ambulance, or for expenses outside of Canada.

Counselling – \$1,000 per student year

Counselling services provided by a:

- Licensed Psychologist;
- Registered Social Worker/Master of Social Work;
- Licensed Professional Counsellor;
- Licensed Counselling Therapist; or,
- Psychotherapist;

are covered, provided the counsellor is licensed under the appropriate provincial or federal organization to practice their profession, in accordance with the rules of their profession. No amount will be paid for group counselling, testing/reassessments of learning disabilities or reports.

Standard fare for a licensed taxi will be covered, up to the benefit maximum of **\$150** per round trip, when transporting the covered person to their Counselling appointment. Taxi receipts must be submitted with the claim for Counselling. There is an overall taxi maximum of \$750 per student year. See the Taxi Benefit for details.

Eye Exam – \$100 every 24 months

One eye examination, by an Ophthalmologist or Optometrist, registered and legally practicing within the scope of their license, is covered. No amounts will be paid for contact lens fitting fees or retinal photos

Eye Wear – \$100 every 24 months

Lenses and frames or contact lenses are covered, when prescribed by an Ophthalmologist or Optometrist. Laser eye surgery in lieu of lenses and frames will also be covered, up to the benefit maximum. No amount will be paid for non-prescription glasses, such as safety or sunglasses,

When purchasing glasses or contact lenses online, you are required to submit a copy of your current prescription with your claim.

Health Practitioners – \$50 per visit, \$400 per practitioner, per student year

Services provided by the following health practitioners, are covered provided the practitioner is licensed by the appropriate provincial or federal organization to practice their profession in accordance with the rules of their profession;

- Acupuncturist
- Chiropractor
- Dietitian
- Massage Therapist (referral required)
- Naturopath consultations
- Osteopath
- Physiotherapist (referral required)
- Podiatrist/Chiroprapist consultations
- Speech Therapist

If a referral is required, it must be current, and will be valid for one year after the date of issue.

If an x-ray is recommended by any of the above health practitioners, an additional \$25 is covered towards this expense. No amount will be paid for any visit for which any amount is payable under the covered person's Provincial Health Care Plan, unless permitted by law.

Hearing Aids– \$400 every 60 months (referral required)

Charges for hearing aids, purchase or repairs, (excluding batteries), are covered when recommended by a certified, clinical audiologist.

Ask your health practitioner if they direct bill to The PBAS Group, to save you from having to pay for your services out of pocket.



Medical Equipment – \$3,000 per student year (referral required)

Charges are covered for the rental or purchase of medical equipment based on the nature and severity of the covered person's medical needs, when recommended by a licensed medical doctor (M.D.).

Before incurring any major expenses, it is recommended you submit details to The PBAS Group to determine to what extent benefits are payable.

Covered items include, but are not limited to:

- Wheelchairs (purchase, \$1,000 per lifetime; repairs, \$250 per lifetime);
- Respiratory equipment, including oxygen (\$1,500 per lifetime);
- Contact lenses/glasses following cataract surgery (1 pair per lifetime);
- Canes, crutches, walkers, casts, splints, catheters, colostomy supplies;
- Compression stockings (2 pairs per student year);
- Diabetic supplies (\$1,500 per student year);
- Intra-uterine devices with no medicinal content (1 per student year);
- Aero chamber (1 per student year);
- Custom-made rigid or semi-rigid braces (not for athletic use) for back, neck, arm or leg (\$1,000 per lifetime, per condition);
- Non-dental prosthesis such as artificial limbs and eyes, including replacement if required because of a change in physical condition (\$1,000 per lifetime, per condition);
- Wigs for a diagnosed medical condition or medical treatment resulting in full or partial hair loss (\$1,000 per lifetime).

Excluded are items required for athletic use, personal comfort, convenience, exercise, safety, self-help or environmental control items, or items which may also be used for non-medical reasons, such as, but not limited to: heating pads or light therapy devices, communication aids, air conditioners or cleaners, and whirlpool baths or saunas.

In order to submit a claim for medical equipment, a letter (referral) will be required from a licensed medical doctor (M.D.) describing the nature of the disability, the type of equipment, medical need and estimated duration required.

Orthotics - 80% to a maximum of \$200 per lifetime (referral required)

Charges for custom-made orthopedic shoes (including repairs), arch supports, molds and orthotics, which have been specially designed and molded for the covered person, are covered when required to correct a diagnosed physical impairment and when recommended by a licensed medical doctor (M.D.) or Podiatrist/Chiropracist.



Prescription Drugs - 80% up to \$4,000 per student year

The plan covers a list of Health Canada approved prescription drugs, professionally compiled to address the needs of students. The “Student Managed Drug Formulary” is designed to help reduce the cost of the plan while maintaining comprehensive quality care and benefits. Access to the drug formulary can be found at studentbenefits.ca.

Eligible drugs include those approved by Health Canada, and are within the following general categories:

- Eligible drugs that by law require a prescription for purchase; and,
- Compound mixtures where one of the ingredients is an eligible item

Coverage is limited to the cost of the lowest priced equivalent item in the applicable generic category that can be legally used to fill your prescription. The plan covers up to a 34-day supply of therapeutic (acute) drugs and up to a 100-day supply for maintenance drugs, unless prior approval is obtained from The PBAS Group.

The plan is limited to one intra-uterine device (IUD) per student year. IUDs that do not contain medicinal content may be eligible for coverage under the Medical Equipment benefit.

It should be noted that drugs are only considered eligible if they were prescribed by a licensed medical doctor (M.D.), licensed dentist, or another professional authorized by provincial legislation to prescribe drugs, and dispensed by a registered pharmacist or licensed medical doctor (M.D.).

The only drugs not legally requiring a prescription that will be reimbursed if accompanied by an official prescription receipt from the pharmacist, are:

- Vaccines/serums (only if course requirement, authorization by school required);
- Diabetic supplies such as insulin, syringes, needles, diagnostic reagents for the diagnosis and monitoring of diabetes, and lancets.

Mednow is an online pharmacy that helps you save on your out-of-pocket expenses, and offers coverage for your prescriptions up to 100%. They offer an accessible, personal pharmacy experience and provide students the support they need to improve their overall health outcomes. Mednow offers a secure, simple and intuitive app that helps you manage your family's medication needs with free delivery.

Download the Mednow app to, book appointments, speak to an expert pharmacist, manage medications and refills, and find details about how to save money by ordering through Mednow.

Specifically excluded from coverage, whether legally requiring a prescription or not, are:

- Allergy testing and supplies;
- Cannabis and psychedelics;
- Dietary foods and supplements;
- Fertility drugs;
- Hair loss and hair growth agents;
- Household products such as, but not limited to, soap and toothpaste, prescription mouthwash;
- Oral drugs for the treatment of erectile dysfunction;
- Smoking cessation products;
- Vitamins (other than injectable);
- Vaccinations, unless required for course of study.

Taxi Benefit - \$750 per student year

Standard fare for a licensed taxi will be covered, up to the benefit maximum of \$150 per round trip, in the following instances:

- when transporting the covered person to a pre-booked mental health appointment through the Wellness Centre. Taxi receipts must be submitted with the claim for Counselling;
- when the student experiences an emergency that does not require an ambulance, and a taxi voucher is supplied by a residence Don.

Travel Benefits - \$5,000,000 per coverage period

(This benefit is underwritten by SSQ Canada Policy Number 30W50)

As part of the health plan, you and your eligible dependants are covered for hospital services, physicians, and other services for emergency treatment of an injury or illness while traveling outside of the province of New Brunswick, including international travel. The travel plan covers reasonable and customary charges, which are in excess of the provincial health-care allowance.

You're covered for up to 90 days per trip, for an unlimited number of trips taken during the time you're covered. The maximum coverage is \$5,000,000 per coverage period. Students and their dependants are not covered for out-of-province or out-of-country emergency services once they reach age 65.

When travel is required to complete a course of study, coverage can be extended to 365 days, following confirmation from your academic supervisor. Please contact the Students' Union or The PBAS Group to obtain a 365-day Medical Assistance Travel Card. For complete details of coverage and/or to print your 90-day Medical Assistance Travel Card, visit the Document Centre at studentbenefits.ca.

Tutorial Expenses - \$15 per hour up to \$1,000 per disability

(This benefit is underwritten by Chubb Life Insurance Company of Canada under Policy Number SG1025601)

This benefit applies to the student only. If you become disabled while covered, and are confined at home or in a hospital for a minimum of 15 consecutive school days, you are eligible for the private tutorial services by a qualified teacher, up to the benefit maximum. The teacher must be approved in advance by the Students' Union. Disabilities due to the same or related cause will be treated as one disability.

If the disability is the result of an accident, confinement must occur no later than 100 days after the accident. Disabled means that you cannot, because of illness or injury, engage in most of the standard activities a person of the same age or sex.

Limitations to the Health Care Benefit Plan

No amount will be paid for care, services or supplies:

- If the payment is prohibited by law;
- If the benefit is covered under any government plan or law;
- Where no charge would have occurred in the absence of this coverage;
- For care or treatment which is not medically required;
- For dental work, excluding Accidental Dental;
- For testing including, but not limited to, allergies, learning disabilities; or,
- For care or treatment that exceeds the normal care or treatment that is recognized as customary and common practice for an illness or injury, in accordance with current therapeutic practice.

No amount will be paid for any charge incurred as a result of:

- War, whether declared or not;
- Insurrection, rebellion or participation in a riot or civil commotion;
- Purposely self-inflicted injury; or,
- The covered person's commission of, or attempt to commit, an assault or a criminal offence.



STUDENT WELLNESS

Student Wellness provides students with free, confidential access to a professional counsellor any time, anywhere, via phone or internet.

Staffed by a team of highly trained and qualified professionals who are experts in fields such as well-being, family matters, relationships, debt management, employment issues and more.

See what Student Wellness can do for you.



Healthy Living

Student life can be busy, and keeping up with class requirements on top of work or family duties means less time for your health and wellness.

Student Wellness is here to provide:

- Information and referrals
- Articles on health and wellness
- Online assessments and stress management training



Unhealthy Habits

Letting go of unhealthy habits isn't easy but Student Wellness can provide information and resources to help change your routines and replace unhealthy habits with healthier ones.

Student Wellness is here to provide:

- Tips to quit smoking and tobacco
- Articles on healthy eating and fitness
- Audio on stress management techniques



Stress and Resiliency

Learning resilience means coping with the stresses of student life, by forming strong relationships, communication and problem-solving skills, the ability to make plans, and a positive outlook.

Student Wellness is here to provide:

- Financial consultations
- Articles and tip sheets on resilience
- Online assessments and stress management training
- Work-life consultations



Goal Setting

Increase your GPA. Run a marathon. Find an internship. Creating a set of specific short and long-term goals is the best way to turn your personal and professional dreams into reality.

Student Wellness is here to provide:

- Articles and tip sheets on goal setting and time management
- Referrals to self-help groups, coaches, and tutors



Healthy Relationships

Maintaining supportive, lasting relationships can enhance our lives, give us purpose, and provide support in times of crisis—improving our health and reducing stress.

Student Wellness is here to provide:

- Articles and information on healthy communication
- Online training in conflict resolution and anger management
- Legal/financial information for couples and spouses



Organizational Tools

Reading, papers, and presentations are great opportunities to learn, but can be a source of anxiety if you aren't organized. Learning simple time management, keeping an organized workspace, and having the right tools can help you succeed.

Student Wellness is here to provide:

- Articles and information on goal setting and time management
- Organizational tools and strategies
- Online stress management support



Anger Management

We all face situations that can make us feel angry. Anger in response to certain situations is normal, but expressing that anger in a healthy way is key to successful communication.

Student Wellness is here to provide:

- An online seminar to identify and manage anger
- Articles on stress management and anger control
- Audio tips on anger



AWARE

AWARE is a research-based, personalized mindfulness program that helps individuals manage personal or work stress through six phone sessions with a specialist trained in wellness coaching.

Student Wellness is here to provide:

- Focus and concentration
- Chronic medical conditions and pain
- Increasing awareness and commitment to intentional living



We've got you covered.

Our Student Wellness program is available 24 hours a day, 7 days a week, and can be accessed by phone or web.

In Canada 1-833-549-3281

Direct Dial Outside of Canada 416-956-2963

studentbenefits.ca/studentwellness

Dental Benefits



At-a-Glance | 2023/2024

Benefit maximum is \$1,000 per student year

Diagnostic	100% Coverage	(Exams, X-Rays)
Preventative	100% Coverage	(Polishing, Scaling, Fluoride, Oral Hygiene Instruction, Space Maintainers)
Restorative	80% Coverage	(Fillings)
Endodontic	80% Coverage	(Root Canals, Pulpotomy)
Periodontic	80% Coverage	(Management of Oral Disease, Root Planing)
Oral Surgery	80% Coverage	(Erupted Teeth/Surgical, Residual Root Removal, Fractures, Surgical Excision/Incision)
Anesthesia	80% Coverage	(Deep, Inhalation, Intravenous)

Payments will be based on the New Brunswick Dental Society Suggested Fee Guide for Dental Services provided by General Practitioners in effect at the time of treatment.

This is a basic overview of your dental plan, created as an easy way to assist students to maximize dental coverage. Complete descriptions of all benefits, including specific limits, are listed in your booklet.

Electronic Billing:

Account: PBAS
Carrier Code: 610256
Claim Format: NDC
Group No: 662

Student Benefits

studentbenefits.ca
1 (888) 404-6623
studentbenefits@pbas.ca

Address:

101-61 International Blvd.
Toronto, ON M9W 6K4



STUDENT BENEFITS

Description of Dental Care Benefits

There is an overall dental maximum of **\$1,000** per student year

This section of the booklet contains information pertaining to the dental portion of your benefits plan. This coverage information can also be found online, at studentbenefits.ca. Eligible dental expenses are covered when they are incurred while the person is insured and service is provided by a licensed dentist, dental hygienist, anesthetist, or specialist. The term "dentist" in this provision intends to include all of the above. If treatment is given by a specialist, the amount paid will be limited to the amount stated for that treatment in the New Brunswick Dental Society Suggested Fee Guide for Dental Services provided by General Practitioners, as described below.

There is an overall dental maximum of **\$1,000** per student year, however certain items are specifically excluded and limits exist. It is recommended to submit a predetermination to ensure you are covered for your procedure.

Diagnostic and Preventive - 100%

Examinations

- Initial or complete examinations (1 exam per student year)
- Recall examinations (1 every 6 months)
- Specific examinations
- Emergency examinations

X-rays

- Full mouth series x-rays (1 time in a 3 year period)
- Periapical x-rays (total of 16 films in a 3 year period)
- Bitewing x-rays (total of 4 films in a student year)
- Panoramic x-rays (1 time in a 3 year period)

Cavity Prevention

- Polishing or cleaning teeth (2 units per student year)
Recall scaling (2 units per student year, 6 additional units covered at 80%)
- Fluoride (1 time in a student year for dependants age 16 or younger)
- Oral hygiene instruction (covered 1 time only)
- Pit and fissure sealants (1 time in a 3 year period for dependants age 16 or younger)

Space Maintainers(1 per space in a student year)

Restorative, Endodontic, Periodontic, Oral Surgery and Anesthesia - 80%

Restorative, Endodontic, Periodontic, Oral Surgery and Anesthesia procedures are completed to treat a variety of dental problems. These procedures are covered at 80%, however certain items are specifically excluded and limits exist. It is recommended to submit a predetermination to ensure you are covered for your procedure.

Limitations to the Dental Care Benefit Plan

No amount will be reimbursed for the following expenses:

- Bridges, major restorative (unless listed), bleaching, orthodontic services;
- Any anesthesia administered in a hospital;
- Dental charges that could be claims under Workers' Compensation;
- Dental charges not included in the current provincial fee guide for General Practitioners;
- Cosmetic procedures, experimental treatment or testing;
- Charges for appointments that are not kept;
- Charges for the completion of claim forms;
- Treatment to correct temporomandibular joint dysfunction of the jaw;
- Endodontic treatment that started before the effective date of coverage;
- Dental appliances (unless listed);
- Any orthognathic surgery (remodeling or reconstruction of your jaw);
- Procedures or supplies used in vertical dimension corrections (changing the height of the teeth) or to correct attrition problems (worn down teeth); or,
- Implanting fabricated teeth or any major surgery resulting from implanting fabricated teeth.

Register for Online Services

There are many services available on studentbenefits.ca that will make your benefit plan easier than ever to access. You must register as a member to take advantage of all features of the site.

Will I receive a benefit card?

After you are eligible for coverage and have registered at studentbenefits.ca, you will be able to print the following personalized benefit cards under the Document Centre.



Pay-Direct Card – Pharmacy

This card should be presented to your pharmacist (along with your prescription) in order to access the electronic pay-direct system. Your claim is processed immediately without the need for you to mail in a claim. Your pharmacist will advise you of any amount owing.



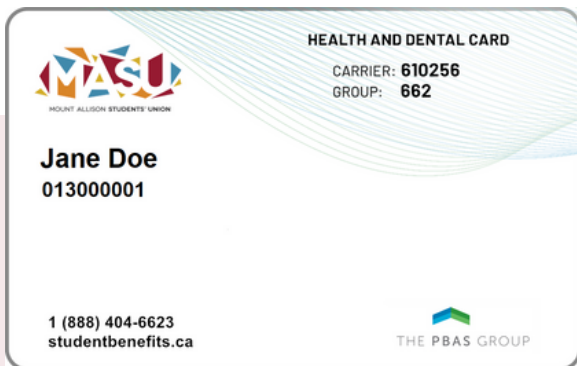
Pay-Direct Card – Health and Dental Practitioner

This card should be presented to the health or dental practitioner, in order to access the electronic pay-direct system. Your claim is processed immediately without the need for you to mail in a claim form. Your practitioner will advise you of any amount owing.



Travel Card

This card gives you coverage for 90 Days while you are traveling. If you are traveling on an Exchange Program or to complete a course of study, and you require an extended period of travel, please contact the Students' Union office or The PBAS Group for further details. If you have a medical emergency, you must contact the travel insurance provider prior to receiving services or making a travel claim. The contact numbers are on back of the card.



Remember...

When your provider submits a claim on your behalf, your claim will be processed immediately, eliminating the need for you to mail in a claim or submit the claim online. All benefits have limits, and pharmacists, health practitioners, and dental offices are not obligated to submit your claims electronically.

Register for Online Services

Can I submit a claim online?

Online claim submission is an easy and practical way to submit your health or dental claims online. Once you have registered on the website, you will be able to submit your claims online. Simply complete the required fields in the claim form, use your smart phone to upload pictures of your receipts, or attached scanned copies of your receipts. By submitting your claim electronically, you avoid waiting for your claim to reach us by mail.

The online claim submission system will help ensure that we have all the information required for processing your claim. The system will let you know if you are required to submit a referral, and will explain to you aspects of claim submission, such as coordinating benefits with another plan.

When submitting claims online, you are required to retain your original receipt(s) for twelve (12) months, as The PBAS Group may request them at any time.

How do I register for direct deposit?

If you currently receive payments by cheque, you can now take advantage of direct deposit for your claim reimbursements. Once you have registered as a member on **studentbenefits.ca**, you can add your direct deposit information in your profile. Your direct deposit payments will normally begin with your next submitted claim.

To make the direct deposit registration process simple, have a blank cheque or direct deposit form from your bank on hand when you register. These documents include all the information required to set up direct deposit. Your payments can be deposited into a chequing or savings account. If you have another kind of account, please call your financial institution to find out what accounts you can use for direct deposit.

You can change your direct deposit information at any time by visiting **studentbenefits.ca** and updating the information in your profile. To cancel your direct deposit, please send an email to the plan administrator, advising them of your request. It may take a few days to process your request, so please consider that when changing or deleting your banking information.

Before the payment has been deposited into your account, you will receive an Explanation of Benefits (EOB) by email. With normal bank clearing procedures, your payment should be deposited within two or three business days.

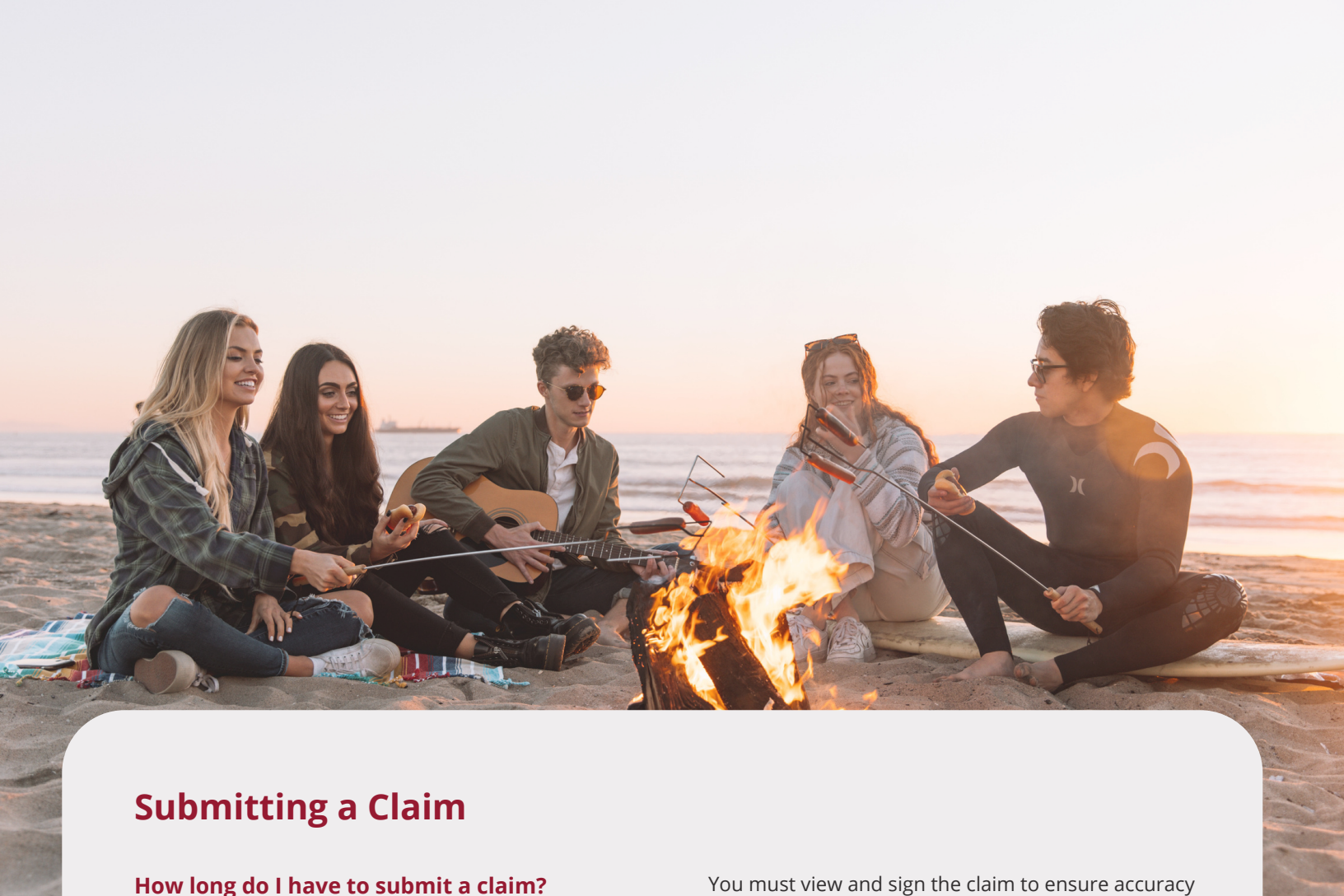
Can I view my claims and payments on the website?

Claim history is available on the website, and updated daily, so that you will always have the most current information regarding your submitted claims.

You have the option to print the Explanation of Benefits (EOB) for any claim that has been processed. The EOB outlines claim information, and payments made by your plan. Having this information easily accessible will make it easier for you to submit the information to any alternative insurance you may have, or provide you the information you may require for income tax purposes.

How do I know when my benefit maximums have been reached?

You can view your benefit balances on **studentbenefits.ca**. Once you have registered, you will have access to view the remaining balance of any benefit. This option is particularly helpful when you have repeat treatments for a specific benefit type.



Submitting a Claim

How long do I have to submit a claim?

Claims must be submitted within **6 months** of the date of service. If the plan terminates, claims must be submitted within 3 months from the termination date of the plan. Legal action to recover benefits must begin within 2 years of the date of service.

Can claims be paid directly to my provider?

In the event that your provider does not submit claims electronically, your plan allows you to assign your benefit to your provider. When the provider is manually submitting a claim on your behalf, a Health claim must include an Assignment of Benefits form, found on studentbenefits.ca under the Download Centre, and invoice, and a doctor's referral (if required).

A dental claim requires a standard dental claim form, issued by your dental office, of which both parties have signed.

You must view and sign the claim to ensure accuracy before the claim is submitted. When you assign your benefits to a provider, the explanation of benefits is mailed to the provider only, however, your copy can be obtained online in your Claim History.

You are responsible to ensure that you are eligible for coverage on the date of your treatment. No amount will be paid if your coverage is not in effect at the time of treatment.

Remember that all benefits have limits, and not all providers will accept direct billing. You should ask your provider if they will direct bill before starting treatment.



Submitting a Claim

How do I submit a claim?

While the online claim submission has proven to be the most efficient way to submit claims for reimbursement, you can also submit your claims by mail, email, or fax, for review.

- For health claims, send us a completed claim form, available online at studentbenefits.ca, along with your receipts and any required referrals.
- For dental claims, a Standard Dental Claim Form can be obtained from your dental office.

Remember to complete each section of the claim form in full, including your certificate number, signatures, and correct mailing address, in order to avoid delays.

All benefits are paid on a reimbursement basis. Send a scanned copy, or the original signed copy, to:

The PBAS Group
101-61 International Blvd
Toronto, ON M9W 6K4

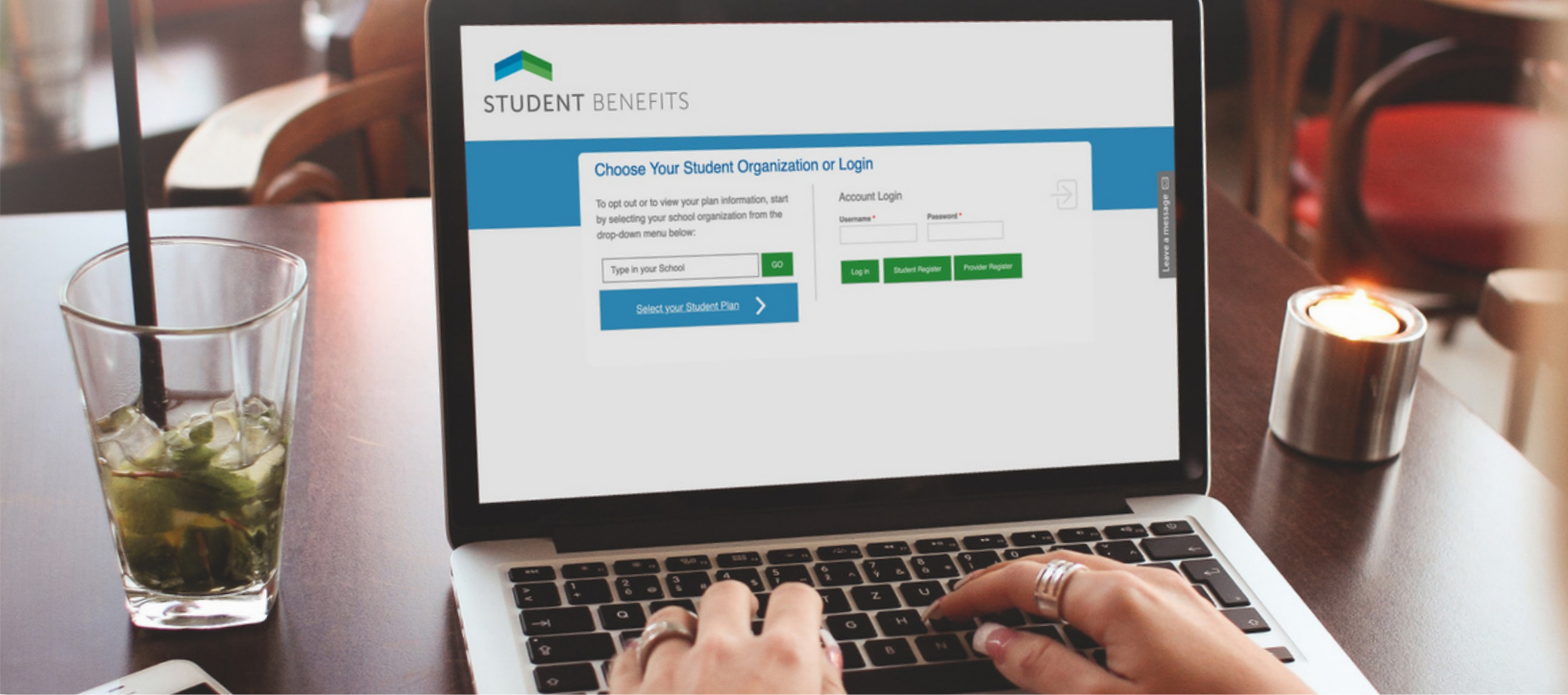
Email: studentbenefits@pbas.ca
Tel: 1 (888) 404-6623

What if I have more than one plan?

In the case of a claim for you, the student, this plan is the first payer and the dependant coverage available through your other plan is the second payer. In the case of your spouse's claim, this plan is the second payer if they have their own plan.


For dependant children, claims are submitted first to the benefit plan for the parent whose birthday (month and day) occurs earlier in the calendar year, regardless of age.


Following the reimbursement from the first payer, copies of the receipts and the explanation of benefits can then be submitted to the secondary plan so that the balance can be considered for payment.





Online Solutions


Our interactive website was designed for use across all platforms and mobile devices. After you have registered your account, you have access to:


- 


Submit Claims Online
- 


Review and update personal information
- 


View your Claims History and print your Explanation of Benefits
- 


Print or save your convenient benefit cards for on the spot reimbursement
- 

Review your Benefit Balance
- 

Register for direct deposit
- 

Access the Drug Formulary to determine if a drug is covered
- 

Print and view plan booklets and benefits at a glance
- 

Locate a health practitioner or medical provider in your area
- 

Access Live Chat

Download our Mobile App!
Search "Student Benefits" on:



Enjoy 24-hour access to your student health and dental benefits with the revamped, easy to use Student Benefits app.





Have questions?

The PBAS Group
101-61 International Blvd
Toronto, ON M9W 6K4

1 (888) 404-6623
studentbenefits@pbas.ca
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