

Policy XII Health and Dental Plan

12.01 Coverage Period

- i. Health and dental plan coverage begins on September 1st, and ends on August 31st for all plans.

12.02 Eligible Members

- i. All full time undergraduate students, including co-op students, are automatically enrolled in both the health and dental plans.
- i. Full time undergraduate students are eligible to obtain the family health plan

12.03 Opting Out

- i. The opt-out process must be done by the student, in person.
- ii. All full time undergraduate and co-op students may opt out of the plans if they have proof of alternative coverage. Co- op students must opt-out prior to leaving for their co-op work term.
- iii. Proof of insurance may include the following:
 - 1. Insurance card with the student's name, which must indicate both health and dental coverage
 - 2. Dated letter stating alternate health & dental care coverage, including policy number(s) and company name
- iv. Proof of insurance does not include a provincial health card.
- v. A waiver will be signed by the student and Health Plan Manager; the student will be given a copy of the waiver for their records. Funds will then be refunded on the student's account through Financial Services.
- vi. Once the opt-out deadline has gone by, no fee will be removed from the student's account.

12.04 Opting In

- i. Those full time undergraduate students who wish to obtain the family health plan must opt-in in person by the opt-out/opt-in deadline. Once this deadline passes, no fee will be added to the student's account.
- ii. Students who wish to obtain the family health plan must opt-in; there is an additional fee for the family medical plan.
- iii. Payment for the medical plan is due upon opting in and can be paid at Financial Services in Evaristus.
- iv. Opt-ins are completed by the Health Plan Manager.
- v. There are no opt-ins for the dental plan and no family dental coverage.

12.05 Plan Coverage

- i. The Insurance Company is responsible for determining the coverage and it may change from year to year.
- ii. The Health Plan Manager does not make decision as to certain items that are covered or paid out.

12.06 Health and Dental Cards

- i. Medical cards will be available from the middle to end of October from the Health Plan Manager with a valid student ID card. If students were on the plan in previous years, a new card will not be sent. Students who lose or misplace their card must contact the Health Plan Manager.
- ii. Medical cards will terminate each August 31st. Any prescription drugs covered by the plan that have to be purchased during this time will be at the students' expense and will not be reimbursed until the eligible list is sent in after the opt-out date.
- iii. There is no dental card. Students must take a claim form with them when they go to the dentist. Claims can not be electronically billed to the insurance company. All claims must be mailed to the Plan Administrator in Newfoundland. Depending on the dental office's billing policies, the student may or may not have to pay upfront for services rendered.
- iv. There is no card for the vision plan. Students must take a claim form with them to their eye appointment, and to purchase glasses or contacts. Depending on the billing policies for the eye care professionals, the student may or may not have to pay for their appointment and glasses or contacts.

12.07 Claim Forms

- i. All claim forms must be completed by the student and necessary parties (dental office/eye care professionals), original receipts attached to the forms and mailed for reimbursement to the Plan Administrator in Newfoundland.

Please see **Appendix A** for further information

Appendix A Policy XII Health and Dental Plan

As of May 1, 2007, all voluntary opt-ins for the MSVU Students' Union Health Plan has been eliminated, which means that no opt-ins will be allowed from any of the groups previously eligible for opt-in. These groups include (but are not limited to): Part-time students and Graduate Students.

Starting May 1, 2007, the MSVU Students' Union Health Plan is providing coverage for Full- time Undergraduate Students only.

However, to practice fair treatment and to ensure that the current voluntary opt-ins do not suffer undue hardship and are able to obtain health insurance coverage, the MSVU Students' Union will continue providing coverage for these current members, and will therefore not be asking anyone to leave the plan.

This is why, as of May 1, 2007, all current voluntary opt-in members from any of these said groups will be notified by the provider, Campus Trust, and informed about this change.

All current voluntary opt-in members will be eligible to stay on the MSVU Students' Union Health Plan for as long as they are enrolled in the studies in which they were enrolled as of May 1, 2007.

However, should the member decide to terminate the plan or their program of study, the member is no longer eligible to opt-in.

A record of those students on the plan as of May 1, 2007, will be kept at the Health Plan Office.

Further to that the price of the plan will be adjusted to cover the claims that are being made from this specific group of members. The price will be calculated every September.

Voluntary Opt – In members will be responsible for updating the Health Plan Manager on their status every year, should they wish to remain covered under the MSVU Students' Union Health Plan.

Voluntary Opt-In members will not be required to show proof of alternative coverage, nor will they be required to opt-out in person.