

THE JOURNAL

solid group plans made simple

TRAVELLING? CHECK YOUR COVERAGE

Going on a vacation? Or, leaving the country for a business trip? You have out-of-country (OOC) insurance coverage for both emergency and nonemergency events as part of your company's extended health plan. Nonemergency medical expenses not covered under the provincial health plan, including prescription drugs, are claimed and paid as if the expense was incurred in your province of residence. Emergency hospital and medical expenses, including hospital charges, medical supplies, physician charges and ambulance for non-work-related illness or injury are also covered under your plan. Call the Travel Assistance number as soon as possible for assistance with filing the claim.

OOC Insurance Lifetime Maximum

Insurers limit payment for expensive out of country medical expenses by including a lifetime maximum on all group policies. Dependent on the specific contract provisions, this is typically between \$1,000,000 and \$5,000,000 per insured person.

While \$1,000,000 may seem like adequate coverage, a medical emergency outside of Canada could use up that \$1,000,000 quickly! As part of the annual renewal process that Johnstone's Benefits completes, the Account Manager reviews the lifetime maximum to assess the appropriateness of this maximum / coverage limit, and will bring it to the client's attention as necessary. Don't hesitate to contact us about the coverage and options.

Individual Travel Insurance

Depending on the lifetime maximum in the group plan, as well as other personal factors, employees can purchase additional protection while out of the country. Both the group plan and individual travel plan cover ambulance, physician, in-hospital nursing, testing and drugs in a medical emergency although there may be differences in the amount of coverage provided by each. In case of a claim, the individual travel plan will pay first, protecting the group plan's lifetime maximum.

In preparing to travel, employees should check the fine print – plan limitations and exclusions, plan maximums, need for things like trip cancellation, baggage return, trip interruption, etc. (items typically not covered in group plans).

THE JOHNSTONE'S ADVANTAGE

Our mission is simple: Treat each client as if they were our only client.

Our value is clear: We are completely independent. We work for you and offer total flexibility on insurers and plans.

We offer all your group insurance services including administration, brokerage, consulting, and communications.

We provide dedicated client support, customization and flexibility to meet all of your company's benefits needs. And we make **solid group plans simple**.



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Limitations & Exclusions

While comprehensive, the provisions of group and individual travel insurance will typically include limitations and exclusions such as:

- 🕿 The length of a single trip 60- or 90-day limits are common
- Coverage is for acute medical emergency situations only, and doesn't cover nonemergent, elective, or continuing care for existing conditions
- Complications of pregnancy, usually within two months of the due date, may not be covered outside of Canada.

Pre-Existing Conditions

If the traveler has a pre-existing medical condition, a review of the coverage "details" is important particularly if the condition or treatment has changed. Some contracts exclude pre-existing conditions altogether, while others have a stability clause that stipulates emergency expenses incurred due to a pre-existing condition are covered only if the traveler's condition has not changed within 60 or 90 days before travel and that medical attention is not anticipated during the trip.

Traveling in Other Provinces?

The Canada Health Act requires provinces and territories to extend medically necessary hospital and physician coverage to their eligible residents during temporary absences. This "portability" provision (generally implemented through a series of bilateral reciprocal billing agreements between the provinces and territories with the exception of Quebec) generally means that your health card will be accepted when you receive hospital or physician services in another province or territory. However, sometimes there is a

requirement for patients to pay "up front" and claim reimbursement from their home provincial or territorial health insurance plan.

Additional benefits that provinces and territories may include under their respective health are generally not portable insurance plans outside one's home province/territory (e.g. drug plans).

Most group extended health plans provide coverage for such "additional benefits" (such as ambulance services and prescription drugs) in case of a medical emergency while travelling in another province or territory.

We offer individual travel insurance options! Call us to discuss your needs. We'll give you some good solutions.

Premium Calculations Made Simple

Johnstone's Benefits will be moving to the industry standard for applying benefit premiums.

Premiums will be payable on a full month basis, rather than on a partial month basis – based on date of eligibility. Employees eligible after the first of the month will not be charged until the following month; employees terminating after the first of the month will pay premiums for the full month.

CONTACT US

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JOHNSTONE'S JOURNAL is published monthly and designed to provide topical information of interest not only to plan administrators, but to all employees who enjoy coverage under the benefit plan. Feel free to make copies and share with your employees.

