



Medical Services Plan (MSP) of British Columbia

**TRIUMF Retirees & Survivor Group Plan
Group Number. 6147458**

This booklet contains important information concerning your Medical Services Plan (MSP) group coverage, and therefore, should be kept in a safe place.

This booklet is a general outline of the plan only; it is not a contract. All information is subject to change in accordance with the provisions of the Medicare Protections Act and Regulations and the Hospital Insurance Act and Regulations. If a discrepancy exists between this pamphlet and the legislation, the legislation will prevail.

Revised 2010 March

Medical Services Plan (MSP)

The Medical Services Plan (MSP) pays for medically required services of physicians and surgeons, and for dental or oral surgery when medically required to be performed in a hospital. MSP also provides coverage for other health benefits. (For details, see Additional Benefits on page 7).

Please note, effective January 1, 1998 if you and your dependents are eligible for MSP coverage under the MSP guidelines, it is mandatory you obtain coverage either through a group plan or an individual plan.

Eligibility

Your eligibility to participate in the Medical Services Plan through TRIUMF is determined by your type of appointment.

Residents of British Columbia are eligible and are required to register themselves and their dependents with MSP. Under the Medicare Protection Act, resident is defined as a person who meets the following condition:

- a) is a citizen of Canada or is lawfully admitted to Canada for permanent residence,
- b) makes his or her home in BC, and
- c) is physically present in BC at least 6 months in a calendar year. (A calendar year runs from January 1 to December 31)

Certain groups are deemed to be residents under the Regulations, but tourists or visitors to BC are not.

When enrolling with MSP, photocopies of documents to support name and Canadian Citizenship or immigration status must accompany registration forms.

If your immigration documents expire and you obtain an extension, it is your responsibility to provide a copy of the extension to TRIUMF Human Resources. If you extension is not received by MSP by your original immigration expiry date, your MSP coverage will be reinstated.

For further information, please contact TRIUMF Human Resources.

Eligible Dependants

Dependants must qualify as residents and include:

- 1) Your legal spouse or common-law spouse, including a partner of the same sex. At any one time, only one person may be insured as your spouse.
- 2) Unmarried dependant children who are supported by you and are either under the age of 19, or under the age of 25 if the child is in full-time attendance at a school or university. You must complete the form provided by MSP to verify your child's attendance in order to maintain continuous coverage.

All eligible dependants should be enrolled when you apply for coverage, and are also subject to MSP guidelines. New dependants should be enrolled within thirty days of becoming eligible.

When Coverage Begins

MSP coverage **through TRIUMF** is subject to MSP guidelines. Please contact TRIUMF Human Resources to determine your effective date. If you are a new BC resident, or a BC resident returning to the province after an absence of 12 months or more, you will be subject to the MSP waiting period that consists of the remainder of the month in which you established residence plus two months. For example, if you arrive in BC on March 16, you will be eligible for MSP coverage effective June 1.

Applicant and Spouse Arrive Separately

When a family moves to BC from another part of Canada, and the applicant and spouse arrive separately, the waiting period for the family begins on the later date of arrival.

Coverage During the Waiting Period

New residents from other parts of Canada should arrange for coverage with their former medical plan during the waiting period. New residents arriving from outside Canada should contact a private insurance company for coverage during this period.

Changes Affecting Coverage

Certain changes can affect your coverage; for example, marriage, the birth of a child, or a change in family size. Please notify TRIUMF Human Resources if you require changes to your coverage.

Children are no longer eligible for coverage as dependants when they:

- a) marry or live in a marriage-like relationship, or
- b) start full-time employment, or
- c) turn 19. However, coverage can continue to age 25 for dependants who are full-time students. The dependants' student status must be confirmed each year to ensure continuation of coverage.

In case of a divorce, the former spouse is no longer eligible for coverage as a dependent and should apply for separate coverage.

Please refer to your Premium Rate Sheet for information about your MSP premiums.

If you have questions about the MSP guidelines, please contact TRIUMF Human Resources or call MSP at (604) 683-7151. For more information about MSP Premium Assistance, contact MSP or any provincial government agent's office directly.

When Coverage Ends

MSP coverage through TRIUMF for you and your dependants will end on the last day of the month if you terminate your employment before the 15th of the month. Otherwise, your coverage through TRIUMF will end on the last day of the following month. For example, if you terminate your employment on January 5, your MSP coverage through TRIUMF will end on January 31. If you terminate your employment on January 18, your MSP coverage through TRIUMF will end on February 28.

To cancel coverage for a dependant, please notify TRIUMF Human Resources. Once their coverage through TRIUMF has been cancelled, it is their responsibility to apply for coverage through their employer or through MSP directly.

If you divorce your spouse he/she is no longer eligible for MSP coverage as a dependant and should apply for separate coverage directly with MSP.

A self-pay account is set up automatically when MSP is notified of your termination off the TRIUMF group plan. You will then be billed directly by MSP for premiums. If you do not receive a premium billing notice within 90 days, contact MSP toll free at (604) 683-7151.

CareCards

If you have been coverage by MSP immediately prior your employment with TRIUMF, you will not be issued a new CareCard.

A CareCard with a lifetime Personal Health Number (PHN) is issued to each person who registers with the Ministry of Health. The CareCard identifies the card holder as someone who may access invaluable BC health care services; hence it can only be used by the person to whom it has been issued. Using a PHN other than the one issued to you or allowing someone to use your PHN to obtain benefit is an offense under the Medicare Protection Act. It is best to carry your CareCard at all times so that it is available for presentation whenever health services are required. A spouse, guardian or other responsible adult should look after the CareCard of anyone unable to do so, and ensure the card's availability as needed.

Replacement Fee

A fee is charged to replace lost, damaged or stolen CareCards and where the beneficiary, for valid personal reasons, requests a replacement card. Please note that the fee is not charged for a card issued when a person first registers or for the first gold CareCard is issued to a senior. The fee is \$20.00 for one card, \$34.00 for two family members' cards and \$50.00 for three or more family members' cards. Payment of the fee is required before a replacement card will be issued.

Consideration for waiving the replacement fee will be given to those whose CareCard is damaged through normal use, and to those who receive premium assistance or receive benefits through the Ministry of Human Resources, Ministry of Children and Families or Health Canada.

The CareCard Replacement Form can be downloaded from the web at:

<https://www.healthservices.gov.bc.ca/exforms/msp/H2811.pdf>

CareCards For Seniors

A gold CareCard, valid upon a person's 65th birthday, is issued automatically to all beneficiaries of the Medical Services Plan several weeks before they turn 65. For information about prescription drug benefits, please ask your pharmacist or contact Pharmacare. (Pharmacare's address and telephone numbers are shown on page 11).

Change of Address or Name

In order to ensure continued coverage and the receipt of CareCards, please notify MSP immediately of any changes of address or name. See the pages 12-13 for MSP's address and telephone numbers.

If you have group coverage through TRIUMF, please notify TRIUMF Human Resources.

Benefits

MSP provides the following benefits:

- medically required services of a physician, or of a specialist (such as a surgeon, anaesthetist, psychiatrist) when referred by a physician;
- maternity care by a physician or by a specialist when referred by a physician;
- diagnostic X-ray and laboratory services when ordered by a physician, podiatrist, dental surgeon or oral surgeon;
- dental and oral surgery when medically required to be performed in a hospital;
- orthodontic services related to severe congenital facial abnormalities, Please contact MSP for further information about this benefit.

Additional Benefits

The following services are covered **ONLY WHEN** performed in British Columbia:

- eye examinations - only when **medically required*** and are limited to once every 24 months.
- surgical podiatry services are limited to \$150.00 per calendar year unless referred by a physician.

*Please consult with your Optometrist/Ophthalmologist to determine if your eye examination is medically required or is considered routine.

Services Not Covered by MSP

MSP does not provide coverage for the following:

- Routine eye/physical examinations performed for reasons other than medically necessity;
- Medical examinations, certificates or tests required for life insurance, a driver's license, school, immigration, employment, etc.;
- "cosmetic" surgery for the alteration of appearance;
- Restorative of other dental work performed in a dental office;
- Eyeglasses, hearing aids, and other equipment or appliances;
- The services of counselors or psychologists.

Hospital and ambulance services are covered under other Ministry of Health programs. Please see pages 11 & 12.

Out - Of - Province Benefits

MSP will help pay for unexpected medical services you receive anywhere in the world, provided that the services are medically required and are normally covered by MSP. Please note that reimbursement will not exceed the amount payable had the same services been performed in BC. Any excess cost is the beneficiary's responsibility. Additional benefits such as massage therapy, chiropractic, naturopathy, optometry, physical therapy and podiatry are not covered outside BC.

Most physicians in other Canadian Provinces and territories (except Quebec) will bill their own medical plan directly for services provided to you, if you present your valid BC CareCard.

When traveling in Quebec or outside Canada, you will probably be required to pay for insured services and seek reimbursement later from MSP. Claims for medical care must be submitted within 90 days of the date of service and hospital claims must be submitted within six months of the date of discharge. Claim forms are available at the TRIUMF Human Resources Department or they may be downloaded at:

<http://www.healthservices.gov.bc/exforms/msp/H2814.pdf>

Claims which may be eligible for partial reimbursement from both MSP and Extended Health must be submitted to MSP first.

Costs of medical care outside Canada can be much higher than the amounts payable by MSP and by extended healthcare plans. For complete protection, additional medical insurance should be purchased from a private insurance company, even if you plan to leave the country only for a day. For further information about out-of-province claims, please contact MSP

Leaving British Columbia to Obtain Medical Care

If you leave Canada specifically to obtain medical or hospital care, it is necessary for the specialist looking after your care in BC to write to MSP before you leave the province, to receive prior approval for payment of insured services. Please note that if approval is not received, all costs of such elective service will be your responsibility. Travel costs and accommodation are the responsibility of the patient.

Absence From British Columbia

Please be sure to contact MSP before leaving so that MSP can determine the coverage available to you. Beneficiaries who have temporary immigration status, for example, holders of Student or Employment Authorizations, may not be eligible for out-of-province benefits and are required to contact MSP prior to departure.

Temporary Absence

Residents who spend part of every year outside British Columbia must be physically present in Canada at least 6 months in a calendar year (January 1 to December 31) and continue to maintain their home in BC. However, in some circumstances beneficiaries may be eligible to receive coverage for up to 12 months while temporarily outside the province.

Effective January 1, 1998 approval is limited to once in five years for absences that exceed six months. Those who will be absent for more than two months should contact MSP before leaving.

If you are temporarily absent from BC for up to 12 months, you will be covered by MSP provided your premiums are paid. In the event that you are on a leave of absence from TRIUMF, you will receive an invoice from UBC Financial Services for your benefit premiums before you begin your leave. In the event that you are on a leave of absence, please contact TRIUMF Human Resources.

Studying Outside of British Columbia

Residents who leave BC temporarily to attend school or university are eligible for benefits provided that they are in full-time attendance at an accredited educational facility, and are enrolled in a program which leads to a degree or certificate recognized in Canada. If attending school outside Canada, benefits may be available for up to five years (plus one month if required, for traveling home).

Beneficiaries who have been studying outside BC for more than 12 months must return to the province by the end of the month following the month in which studies are completed.

Please contact MSP for further information.

Permanent Move from British Columbia

Within Canada - If you have been a BC resident, MSP will provide coverage for the balance of the month you leave the province plus two months. If required, benefits may be extended for up to three extra months to cover you while in transit. Upon arrival, you should immediately apply to the health plan of your new home province or territory. Please contact MSP before leaving.

Outside Canada - If you have been a BC resident, you can receive coverage for the balance of the month you leave the province. Please contact MSP before leaving.

Other Ministry of Health Benefits

Prescription Drugs

Pharmacare provides assistance to BC residents with the purchase of many prescription drugs and certain other benefit items. Please note that Pharmacare does not provide out-of-province benefits.

For information contact your pharmacy or:

Pharmacare
PO Box 9655 Stn Prov Govt
Victoria, BC
V8W 9P2

(604) 682-6849 Vancouver
(250) 952-2866 Victoria
1-800-554-0250 Elsewhere

Hospital Benefits

Hospital benefits are provided to all eligible residents of BC who are enrolled with MSP. There is no charge for acute care, in-patient services received in the province. However, the patient may be charged for a semi-private or private room costs.

Payment of hospital charges outside Canada will not exceed \$75.00 a day. Further information can be obtained from:

Vancouver (604) 669-4211
Victoria (250) 952-1334
Elsewhere in BC 1-800-663-7100

Ambulance Service

Ambulance Service is subsidized by the Province of British Columbia; however, there is a user fee for this service. Please note that Ambulance Service does not provide out-of-province benefits.

British Columbia Ambulance Service
Communications
PO Box 9600 Stn Prov Govt
712 Yates Street, 5th Floor
Victoria, BC
V8W 9P1

(250) 953-3298 Victoria
(250) 953-3119 Fax

Medical Services Plan of BC

Mailing Address:

PO Box 9035 Stn Prov Govt
Victoria, BC
V8W 9E3

Website: www.hlth.gov.bc.ca/msp

Automated Telephone Information Line:

This service is available 24 days a day, 7 days a week, to provide general information. We encourage you to use this service if you have a touch tone telephone. Representatives are available to assist you from 8:30am and to 4:30pm, Monday to Friday.

Registration and Premiums:
Vancouver (604) 683-7151
Victoria (250) 386-8406
Fax (250) 952-3427
Other Areas Within BC 1-800-663-7100

Claims

Medical

Victoria (250) 952-2654
Fax (250) 952-3222

Out-Of-Country

Victoria (250) 952-2654
Fax (250) 952-2964

Information about MSP can be obtained from Government Agents/BC Access Centres (listed in the blue pages of your telephone directory). Premium and CareCard payments are accepted at these offices.