The information contained in this bulletin is for guidance only. It is intended to summarize the principal features of your plan and is not meant to provide complete details. The master contract issued to the University of Victoria Graduate Students' Society shall be the final basis for the settlement of all claims.

Who is eligible on the plan?

Students who are:
- registered in 3.0 or more on-campus units in September or January, and
- registered as a co-op student, and
- registered in an on-campus thesis or dissertation, or
- registered as a full-time student (3.0 units) off-campus and apply to opt in to the benefits program, or a distant opted in student registered in 3.0 or more units in September or January.

Dependents of the student, who reside in Canada may opt into the plan if they meet the following criteria:
- The spouse of the student.
- Any unmarried child under 21 years of age who is financially dependent on the student or spouse and under 25 years of age if the unmarried child is also in full-time attendance at a recognized educational institute. “Child” means a person born to the student and/or spouse or a stepchild, legally adopted child, or legal ward, but not a foster child.
- Any unmarried handicapped child of any age who is living with and is financially dependent on the student and/or spouse and is incapable of self-sustaining employment.

Dental Care — Basic Services
Plan covers 70% to a calendar year maximum of $750 for students enrolled on September 1st or $375 for students enrolled on March 1st or later for the following services:

- Diagnostic services — covers standard and specific oral examinations and x-rays.
- Preventive services — covers scaling, polishing, topical fluoride and fixed space maintainers.
- Restorative services — covers fillings (amalgam fillings, and composite fillings on anterior and bicuspid teeth only), and stainless steel crowns on primary and permanent teeth.
- Endodontics — covers treatment of diseases of the pulp chamber and pulp canal (including, but not limited to, basic root canal).
- Periodontics — covers treatment of diseases of the soft tissue (gum) and bones surrounding and supporting the teeth (including occlusal adjustment, gingival curettage, and root planning), but excluding grafts.
- Prosthetic repairs — covers removal, repairs, and re-cementation of fixed appliances, rebase and rel ine of removable appliances and tissue conditioning.
- Surgical services — covers extractions, other routine oral surgical procedures and anesthesia in conjunction with surgery.
**Extended Health Care**

There is a calendar year deductible of $50 per person or per family. This does not apply to vision care, eye examinations or tutorial services.

- **Prescription Drugs** — are covered at 70% of all eligible prescription drugs including contraceptives, life sustaining vitamins, anti-obesity drugs and hepatitis vaccine. Pharmacare drugs will be subject to the low cost alternative and reference drug program of the provincial/territorial plans. Non pharmacare drugs will be subject to low cost alternative pricing with a 15% mark-up cap. All drugs are subject to a $10 dispensing fee cap. Other restrictions may apply.
- **Vision Care** — is covered at 80% of prescription eyeglasses (lenses and frames), prescription contact lenses, prescription sunglasses, prescription safety goggles and eyewear repairs to a combined limit of $200 per 2 calendar years.
- **Eye Exams** — are covered at 80% to a maximum of $75 per person per 2 calendar years for those 19 to 64 years of age.
- **Paramedical practitioners** — are covered at 100%, up to a reasonable and customary limit, less a $10 per person per visit deductible, to an annual maximum of $250 per person for each of the following practitioners:
  - Physiotherapy (doctor’s note required)
  - Massage Therapy (doctor’s note required)
  - Athletic Therapy (doctor’s note required)
  - Chiropractor (including X-rays)
  - Naturopath
  - Podiatrist
  - Acupuncture
  - Speech Therapy (doctor’s note required)
  - Chiropodist
  - Psychologist / Clinical Counsellor combined (doctor’s note required)
- **Registered Nurse in Home or Hospital** — are covered at 80% to a lifetime maximum of $25,000 and a calendar year limit of $10,000 for a person with an acute condition. A doctor’s note is required.
- **Medical Supplies & Equipment** — are covered at 80%. Our authorization is required for items over $5,000.
- **Orthotics** — are covered at 80% to maximum of $200 per person per calendar year.
- **Orthopedic Shoes and Orthopedic Shoe Repairs** — are covered at 80% to a maximum of $500 per adult per calendar year or $300 per child per calendar year.
- **Hearing Aids and Hearing Aid Repairs** — are covered at 80% to a maximum of $500 per person per 5 calendar years.
- **Private or Semi-Private Acute Care Hospital Room** — are covered at 80%.
- **Emergency Ambulance** — is covered at 80%.
- **Emergency Out of Province** — is covered at 100% to a lifetime maximum of $5 million in the event of a medical emergency while traveling for 60 days or less outside your normal province of residence. The 60 day limitation will not apply to a Member or Dependent attending school or while conducting school related research provided the individual’s coverage under the Government plan remains in effect.
- **Emergency Travel Assistance** — is covered at 100%.
- **Second Medical Opinion** — is covered at 100% for students to access a second medical opinion through WorldCare International Inc. if they are diagnosed with an eligible serious medical condition.
- **Accidental Death & Dismemberment** — covers losses due to accidents and accidental death. The principal sum is $5,000.