

Why a health & dental plan?

Costs for dental and health services are at an all time high and show no sign of reprieve. Students on fixed incomes are especially susceptible to these increases, and the last thing they want to spend these fixed monies on is an unforeseen accident, dental or medical procedure. Putting even routine procedures off can have monumental effects for students, as missing classes or study time can have disastrous consequences. Considering these points, the Legal & Literary Society has worked to design and implement a reasonably priced health and dental insurance plan. This plan can aid students in maintaining a quality of health, which can ensure that avoidable medical emergencies do not endanger the pursuit of their studies.

Why is the plan mandatory?

With a mandatory plan, the insurance risk is spread over a larger number of students, thereby lowering the cost per student, making the fee in a range that is affordable to students. An individual health and dental plan can cost as much as 5 times the current student fee.

Is this plan the same as my provincial health care?

No. The Legal & Literary Society Benefits Plan is an extended health and dental plan, which supplements your existing provincial health care. It DOES NOT replace your provincial health care.

Student benefits are payable after any provincial health care benefits have been exhausted. This plan does not cover user fees.

How do I enrol for coverage?

You are automatically enrolled provided you meet the eligibility enrolment criteria:

- 1) you are a member of the Legal & Literary Society,
- 2) you are a full-time Osgoode LLB student,
- 3) you are residing in Canada, and
- 4) you are under the age of 60.

How do I pay the fee?

The fees for the health and dental plans will be assessed automatically by the institution at registration if you meet the eligibility criteria previously listed.

When does my coverage begin and end?

For eligible students starting in the fall semester, coverage begins September 1st and ends August 31st.

How can I access my coverage once I'm at the pharmacy or dental office?

Your **Osgoode Care Card** can be downloaded from www.gallivan.ca/studentnetworks/members/osgoode or picked up at the **Legal & Literary Society Office** (during regular office hours) at any time during your coverage year. The **Care Card** provides the correct information needed for pay direct transactions at pharmacies and processing of electronic claims at dental offices registered with the insurer's direct payment system. Simply sign your card and fill in your applicable student ID number in the space provided on the front of the card. Please contact your **Health Plan Administrator** at the **Legal & Literary Society Office** if you have any questions regarding your applicable student ID number.

Important! *New eligible students please refer to your Benefits Handbook or contact the Legal & Literary Society Office for information on your "Enrolment Period."*

What if I already have coverage?

Co-ordination of Benefits

Benefits under the two plans can be co-ordinated to increase your coverage up to a total of 100% of the actual expense(s) incurred. For example, following payment under this plan you can submit outstanding balances to the other plan for consideration.

Waiving the Student Benefits

If you are an eligible student and have comparable health and dental coverage you may apply to waive benefits. Each student is given one opportunity to waive benefits under the health and dental plans each year. All waiver forms must be completed through the **Legal & Literary Society Office** and must be received by the **applicable deadline** for the **semester period of enrolment**.

Approval of waiver forms will result in the plan fee being credited.

There will be no exceptions or extensions for students who fail to submit their completed waiver form to the Legal & Literary Society Office prior to the applicable deadline.

If comparable coverage used to waive the student plans terminates, you have 30 days from loss of coverage to notify the **Legal & Literary Society Office** in order to be covered under the benefit plans. Confirmation of loss of coverage is also required on re-application for coverage.

If comparable coverage for your family terminates, you have 30 days from the loss of coverage to notify the **Legal & Literary Society Office** in

order for your family to be covered under the benefit plans. It is your responsibility to apply for benefits and provide payment of the family coverage fee prior to the 30-day deadline.

Only the Legal & Literary Society Office can process your waiver.

Can I add my family to the plans?

Each year, you are given one opportunity to purchase coverage for your spouse and/or dependant(s) by completing an application form at the **Legal & Literary Society Office** and paying the applicable fee. All family add-on forms and applicable fees must be received by the **applicable deadline** for the **semester period of enrolment**. Your family is covered as long as you remain covered under the plans.

Please note: Your optional family add-on is not automatically renewed. In order for your family add-on to continue, you must purchase the coverage each benefit year before the applicable deadline. **FAMILY ADD-ON FEES ARE NON-REFUNDABLE.**

Spouse:

Spouse means the person who is a resident of Canada, and who is married to the student, or a person of either sex who has continuously co-habitated with the student for a period of at least one year and who is publicly represented as the student's wife or husband.

Dependant(s):

Dependant means an unmarried child who is a resident of Canada, and entirely dependent on the student for maintenance and support, and who is:

- 1) under 21 years of age,
- 2) under 25 years of age and attending a college or university full-time, or
- 3) physically or mentally incapable of self-support and became incapable to that extent while entirely dependent on the student for maintenance and support and while eligible under 1) or 2) above.

Health Plan Schedule of Benefits

BENEFIT	REIMBURSEMENT	MAXIMUM BENEFIT
Drug - Based on the National Formulary with a generic rider Dispensing Fee Limit: \$7 Deductible: \$10 per prescription	80% if on National Formulary 50% if not on National Formulary	\$240 each benefit year for oral contraceptives.
Vision	100%	\$60 every 24 months for one eye exam \$100 every 24 months for eye glasses or contact lenses
Private Duty Nursing	80%	\$5,000 for a maximum of 12 months per condition
SUPPLEMENTARY HEALTH CARE		
Chiropractor, Physiotherapist*, Podiatrist, Naturopath, Osteopath, Psychologist/Social Worker, Speech Therapist or Massage Therapist* (* physician's prescription required)	100%	\$300 combined per benefit year
Ambulance	80%	
Custom fitted Orthopedic Shoes and Orthotics (physician's prescription required)	80%	\$150 combined per benefit year
Myoelectric Arms	80%	\$10,000 per prosthesis
External Breast Prosthesis	80%	1 each benefit year
Surgical Brassieres	80%	2 each benefit year
Mechanical or Hydraulic Patient Lifters	80%	\$2,000 per lifter once every 5 benefit years
Outdoor Wheelchair Ramps	80%	\$2,000 in a lifetime
Blood Glucose Monitoring Machines	80%	1 every 4 benefit years
Transcutaneous Nerve Stimulators	80%	\$700 in a lifetime
Extremity Pumps for Lymphedema	80%	\$1,500 in a lifetime
Wigs for Cancer Patients	80%	\$200 in a lifetime
Out-of-Country Emergency Care & Global Medical Assistance	100%	\$1,000,000 in a lifetime.

Dental Plan Schedule of Benefits

BENEFIT	REIMBURSEMENT	MAXIMUM BENEFIT
ANNUAL MAXIMUM	Based on the Ontario Dental Association Fee Guide of 2 years prior.	\$600 per benefit year
Diagnostic & Preventive (recall exam, scaling, polishing & fluoride)	70%	Once per benefit year. Includes 1 unit of scaling, polishing and fluoride. One complete oral exam every 3 benefit years.
Minor Restorative (fillings)	70%	
Endodontic (root canal)	50%	
Periodontic	50%	Up to 5 additional units of root planing per benefit year.
Oral Surgery (extractions)	50%	
Dental Accident (\$600 Annual Maximum not applicable to Dental Accident)	100%	Treatment must start within 60 days and be completed within 12 months.



IMPORTANT! Please submit a pre-determination/pre-authorization to the insurance carrier prior to treatment of specialist services and any dental treatment plan exceeding \$300.

NOTE: In the event of any discrepancy between the information herein and our contract with the insurer, the terms of the contract will apply.

Where do I go for help?

Please feel free to contact the Health Plan Administrator at the **Legal & Literary Society Office** on any matter in which you require personal attention:

Osgoode Hall Law School
Legal and Literary Society
Health Plan Administrator
York University
4700 Keele Street
Toronto, Ontario
M3J 1P3

Phone: 416-736-5027

Fax: 416-736-5618

Email: healthplan@osgoode.yorku.ca

Website: www.gallivan.ca/studentnetworks/members/osgoode

The following is a partial list of services that are available from the **Legal & Literary Society Office**:

- pick up your Osgoode Care Card
- pick up forms
- purchase coverage for your spouse and/or dependant(s)
- opt-out of the plans, with comparable coverage
- inquiries

Where do I send my claims?

The Great-West Life Assurance Company

Policy Number 157133

London Benefit Payments

255 Dufferin Avenue

London, Ontario N6A 4K1

1-800-263-5742

www.greatwestlife.com

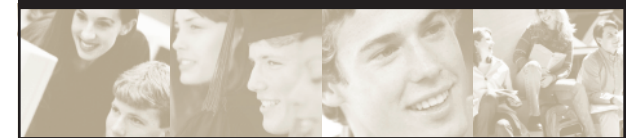


The Integrated Care Solution

Legal & Literary Society is a member of
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OSGOODE HALL LAW SCHOOL

**The Legal & Literary Society
Benefits Plan**