## Coverage

<table>
<thead>
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<th>Coverage</th>
<th>Benefit Description</th>
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| **Hospital**        | ● Semi-private hospital room accommodation in Alberta.  
                      | ● Charges for hospital room accommodation outside Alberta will be paid at the lower of semi-private ward rate or $40 per day. |
| **Drugs**           | ● Drugs that require a prescription under Provincial or Federal law, prescribed by a physician or dentist and dispensed by a licensed pharmacist and included in the drug formulary (drug benefit list).  
                      | ● Drugs not requiring a prescription by law but are prescribed by a physician or dentist and are only available for sales under the direct supervision of a pharmacist.  
                      | ● New drugs that meet the criteria above will be reviewed to determine if the new drug product will be added to formulary.  
                      | ● Drugs that can be purchased over-the-counter are not eligible under the plan.  
                      | ● Reimbursement is based on the Least Cost Alternative (LCA) drug. LCA drugs have the same active ingredients as other drug products (e.g. brand name) but are less costly. |
| **Ambulance**       | ● 80% coverage  
                      | ● Charges incurred in Canada for professional ambulance services to an active treatment hospital when required due to illness or injury. |
| **Artificial Limbs/Breast Prosthesis** | ● 80% coverage  
                      | ● $2000 Maximum*  
                      | ● Physician written order required  
                      | ● Artificial limbs (excluding myoelectric-controlled prosthesis)  
                      | ● Artificial eyes  
                      | ● Braces which incorporate a rigid support of metal or plastic  
                      | ● Trusses  
                      | ● Cervical collars  
                      | ● Breast prosthesis as a result of a mastectomy  
                      | ● All appliances must be required to treat an existing medical condition.  
                      | ● The repair or replacement of a breast prosthesis does not require the written order of a physician, however such replacement or repair shall be limited to once in twenty-four (24) months. |
| **Orthopedic Appliances** | ● 100% coverage  
                      | ● $350 maximum  
                      | ● Physician written order required  
                      | ● Reimbursement is limited to $350.00 once in twenty-four (24) months.  
                      | ● All appliances must be custom made and required to treat an existing medical condition.  
                      | ● Over the counter footwear is excluded. |

* Per calendar year per single or family coverage
**Home Nursing**
- 80% coverage
- Maximum of $2000 *
- Physician written order required
- Nursing care provided in the home by a practical or registered nurse where the covered person is suffering a chronic or debilitating condition.
- Home-making services are not eligible.

**Clinical Psychology/Masters Social Work**
- 80% of the cost of a treatment session
- Maximum of $1000 *
- Treatment must be provided by a psychologist registered with the Psychology Association of Alberta or a Masters in Social Work.
- Coverage is not provided for counselling sessions provided by practitioners who are not registered with PAA or who do not hold a Masters in Social Work.
- Coverage is not provided for assessments.

**Respiratory/Medical Equipment**
- 80% coverage
- Maximum of $2500 *
- Oxygen and related supplies (including compressors, nebulizers, masks, aerochambers, and tubing).
- Inhalation devices for delivery of inhaled asthmatic medication
- Reimbursement is limited to 80% for blood glucose monitors.
- Reimbursement is also limited to one machine per covered member in each five-year period.

**Colostomy/Ileostomy Supplies**
- 80% coverage
- Physician written order required
- Colostomy Supplies
- Ileostomy Supplies
- Urostomy Supplies
- Adult Incontinence Supplies

**Diabetes Supplies**
- 80% coverage
- Physician written order required
- Lancets/Penlets
- Lancing Devices
- Blood Glucose Test Strips
- Insulin Pump (1 per participant every 5 years, coverage limit: $5,000)
- Urine Test Strips
- Syringes
- Insulin Pen Needles
- Insulin Pump Supplies (excluding transmitters and sensors)

**Physiotherapy**
- 80% coverage
- Maximum of $1000 *
- Services of a qualified physiotherapist in excess of those paid by the Regional Health Authority’s Community Rehabilitation Program (CRP).

**Chiropractor**
- 75% of the cost of a treatment session
- Maximum of $2000 *
- The plan will pay for chiropractic services once all allowable limits have been reached under Alberta Health Care.
- A letter from Alberta Health Care stating the date the maximum was reached must be submitted with the claim.

**Podiatry**
- 80% coverage
- Maximum of $500 *
- The plan will pay for podiatry services once all allowable limits have been reached under Alberta Health Care.
- A letter from Alberta Health Care stating the date the maximum was reached must be submitted with the claim.

**Acupuncture**
- 50% of the cost of a treatment session
- Maximum of $500 *
- Reason for treatment must be noted on the receipt.
- Acupuncture administered by a registered acupuncturist as a pain reliever or anesthetic.

**Accidental Dental**
- 100% reimbursement of usual and customary charges
- Repair, extraction and/or replacement of natural or permanently attached artificial teeth damaged by a direct accidental external blow to the mouth.

* Per calendar year per single or family coverage
● Repair, extraction and/or replacement must be completed within 12 months of the date of the accidental injury.

Hearing Aids
● 50% coverage
● Maximum of $2500 * in any 5 consecutive calendar years
● Physician written order required
● Purchase and repair of hearing aids.
● Maintenance, batteries and recharging devices are not covered.

Speech Therapy
● 100% coverage
● $500 Maximum
● Services provided by a speech therapist for dependents 18 years of age or younger.
● Excludes services provided to members, their spouses, or dependents over 18 years of age.
● All government funding must be fully accessed first.

Eye Exams
● 80% coverage to a maximum of $50 per covered person in any two consecutive calendar years.
● Reimbursement in excess of amounts not paid by Alberta Health Care.

For some benefits the first payer will be a government program or another plan. For further information please call Alberta Blue Cross Customer Service at 780-798-8000 within Edmonton area or toll-free at 1-800-661-6995.

The Supplementary Health Care Plan is not provided through a contract of insurance. For this Plan, the benefits are payable from premiums, interest or investment earnings and an excess of revenue over expenditures.

This summary provides general information only. The terms and conditions of the collective agreement take precedence.

December 19, 2018

* Per calendar year per single or family coverage