



AMS HEALTH & DENTAL PLANS

REFERENCE GUIDE

2009-2010

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ABOUT THIS REFERENCE GUIDE

This guide has been prepared by the AMS as a brief outline of the benefits available to you under the AMS Student Health and Dental Plans. This material summarizes the important features of your plan(s), is prepared as information only, and does not in itself constitute a contract. The Master Policies have been issued to the Alma Mater Society of Queen's University and if there is a case in which the terms of this guide appear to be different, the terms of the Master Policies will govern. For more exact terms and conditions of the coverage available, please see the contact information on the back cover of this guide.

The AMS Student Health and Dental Plans are administered by the Alma Mater Society of Queen's University. The Plans were approved by the AMS Assembly and established by majority votes in campus wide referenda. Students (or their parents in the case of minors) are responsible for familiarizing themselves with the contents of this reference guide before modifying their coverage. Students who opt out absolve the insurance company(s), the AMS, studentcare.net/works, Queen's University, and any other involved party of all liability whatsoever for any loss suffered by the student. Opt outs are in effect from September 1, 2009 to August 31, 2010.

Why a Health & Dental Plan?

A growing number of important health-care services are not covered by provincial medicare (i.e. OHIP). For many students, paying for these services can lead to financial hardship, while others can't afford them at all. To help students pay for the health services they need, student health and dental plans were put in place by your student government. Not only do these Plans provide confidential and comprehensive benefits while at school, but they also provide out of country coverage for 120 per trip for an unlimited number of trips during the entire time that you are an eligible Queen's student (Sept. 1 to Aug. 31) This is including the time that you are not at the University (even if you are travelling overseas during the summer after your academic year) and you are covered for more than 120 days if you are travelling for academic purpose. The AMS Health & Dental Plans do not replace, but supplement your provincial medicare (or UHIP) and may be used to co-ordinate benefit coverage with other supplementary health and dental coverage that you may have, thereby further reducing your costs.

The Basics

Group Name: AMS Health & Dental Plans

Extended Health, Accident & Dental Benefits: insured by Sun Life Assurance Company of Canada (Sun Life), policy # 22275

Accidental Death and Dismemberment (AD&D) Benefits: insured by Sun Life policy #22275

Travel Health coverage: insured by Blue Cross, policy # 7488

Coverage Period/ Policy Year: Sept. 1, 2009 - Aug. 31, 2010

For Help & Information: Visit the AMS Front Desk in the JDUC or www.myams.org/health, or contact studentcare.net/works at 1-877-795-4420 or through ihaveaplan.ca

PLEASE SEE BACK COVER OF THIS GUIDE FOR HELP, INFORMATION, AND CLAIMS REIMBURSEMENT CONTACTS

Administrative Support

AMS Health and Dental Plans' consulting, call centre, and provider network services are provided to the AMS under contract by:

**studentcare.net/works
1134 Ste-Catherine Street W., Suite 700, Montreal, Quebec, Canada, H3B 1H4
1-877-795-4420, ihaveaplan.ca**

ENROLMENT

Who is covered?

- All full-time (see glossary) undergraduate students at Queen’s.
- MBA students who start their 16 month program in May (coverage begins May 1).
- Full-time international students paying Queen’s fees and on UHIP.

Note: These eligible students are automatically enrolled by being assessed for the AMS Health and Dental Plans activity fees when they register (See the University “Blue Book”).

Who is not covered?

- Part-time (see glossary) students*
- Students who come to Queen’s on exchange and who pay their home university’s fees*
- Students 65 years or older who are AMS members*
- Students registered exclusively in correspondence, off-campus or evening courses*
- Undergraduate Law students and Education Students*
- Graduate students and Theology students

*Note: These students are not automatically enrolled in the Plan, but may enrol before October 31, 2009. Please note that the AD&D benefit (insured by Sun Life) only covers students that are under age 70 and that the Travel benefit (provided by Blue Cross) only covers students that are under age 65.

Fees

Plan	Basic Single	Couple Only*	Family* (Spouse and/or Dependants)
Health	\$110.00	Not available	\$220.00
Dental	\$89.76	\$179.52	\$269.28

*Note: These amounts are inclusive of the basic single student activity fee assessed.

Couple and Family

The AMS Health & Dental Plans give you the option to enrol your family (spouse and/or dependants) by completing the AMS Enrolment Form and paying an additional fee, over and above your student activity fee as a member of the AMS. Common law and same-sex couples are eligible. Coverage is only for the current policy year. If you want to cover your dependants in subsequent policy years, you must renew your couple/family coverage by the enrolment deadline at the beginning of each school year. Please note that the AD&D benefit (insured by Sun Life) only covers students that are under age 70 and that the Travel benefit (provided by Blue Cross) only covers students that are under age 65.

Other Enrolments

Part-time AMS students, students who come to Queen's on exchange and who pay their home university's fees, AMS students who are 65 years or older and AMS students registered exclusively in correspondence, off-campus or evening courses are not automatically enrolled in the Plan, but can enrol themselves and their spouse/dependants by following the same procedure as with couple and family enrolments. If you lose your equivalent coverage after opting out of the AMS Health and/or Dental Plans, you may re-enrol in the Plans for coverage from the time of enrolment until August 31, 2010.

Effective Date

All enrolments must be completed before October 31, 2009 (for full-year coverage). New students in January can enrol themselves and their spouse/dependants between January 4 - 30, 2010 for coverage from Jan. 1 - Aug. 31, 2010. Complete the enrolment form at the **AMS Front Desk**. Enrolments cannot be processed after the deadline. Contact the **AMS Front Desk** for more information on enrolments.

Opt Outs

The deadline for opting out is **September 25, 2009**. No extensions will be granted. Should your coverage status change, you may pay the full fee and enrol yourself in the Plans at any time. The procedures and requirements for opting out are outlined at www.myams.org and at the end of this Reference Guide.

EXTENDED HEALTH BENEFITS

(insured by Sun Life Assurance Co. of Can., policy #22275)

Prescription Drugs & Vaccinations

Prescription Drugs

Your Health Plan will cover your eligible prescription drug costs up to 80% (**including Accutane**), up to a maximum of \$2,000 per person, per benefit year. The Plan covers most medications legally requiring a prescription, either the generic equivalent or the lowest actual cost. The AMS Health Plan only covers those medications listed in the National Formulary or in the Special Authorization Formulary (NASA), including most oral contraceptives, insulin, and diabetic supplies. Certain brand name drugs are covered only if your doctor indicates on the prescription "no substitution". Vaccinations, **including HPV vaccinations**, that require a prescription and are listed in the NASA Formulary are also covered at 80%. See www.myams.org/health for the listing of medications on the NASA Formulary.

Smoking cessation devices are covered at 80%, up to a maximum of \$500 per policy year. You need a prescription for smoking cessation devices – you must send in a copy of your prescription in order for Sun Life to process the claim. A detailed pharmacy receipt is also required, clearly indicating the device purchased. Over the counter smoking cessation devices are not covered.

Please note the following medications are not covered whether or not prescribed by a physician: vitamin products, patent medicines, blood and blood plasma, contraceptive devices other than oral contraceptives and IUDs, sexual dysfunction medications, antacids, smoking cessation drugs and experimental drugs that have not been approved by Health Canada.

Dispensing Fee

Eligible expenses for the dispensing fee are limited to \$5 for each prescription or refill. This means that you will have to pay 100% of that portion of the dispensing fee above \$5. If your prescription permits, you are entitled to be dispensed up to a 120-day supply of your medication for a single dispensing fee. Note: not all pharmacists charge the same amount; see www.myams.org/health for a listing of local pharmacists' dispensing fees.

Payments for any single purchase are limited to quantities that can reasonably be used in a 34-day period, or, in the case of certain maintenance drugs, in a 100-day period as ordered by a doctor. For oral contraceptives, payments for any single purchase are limited to the cost of a supply that can reasonably be used in a 120-day period.

Exception Process

In the event that the drugs covered are not effective in treating the condition, an exception process is in place. Visit ihaveaplan.ca or call **1-877-795-4420** for any additional information concerning prescription drugs, or visit the **AMS Front Desk** or www.myams.org/health for more information and to obtain an **Application For Exception**.

Vaccinations

Vaccinations that require a prescription and are listed in the NASA Formulary and non-prescription vaccinations not covered by provincial healthcare are also covered at 80%.

Vision Care

Eyeglasses and Contact Lenses

The Plan covers the cost of new or replacement eyeglasses or contact lenses. The maximum allowed is \$75 per 24 months (eligible 24 months after the full amount has been claimed). One pair of eyeglasses following cataract surgery is covered, up to a maximum of \$200 per person per surgery.

Eye Examinations

Eye Examinations not covered by your provincial medicare are covered under the AMS Health Plan. The maximum allowed is \$50 per two (2) policy years.

Laser Eye Surgery

Laser eye surgery is covered to a maximum of \$150 per policy year.

The Studentcare Vision Network

Independent Specialists

The Studentcare Vision Network includes an exclusive network of specialists – optometrists and opticians – who provide Plan members with an additional reduction off the cost of eye exams, prescription eyeglasses, and contact lenses. For a list of Network members in your region and for a detailed explanation of the reduction they offer, visit ihaveaplan.ca.

Online Low-Cost Contact Lenses – Clearly Contacts

Clearly Contacts is Canada's largest online retailer of contact lenses, offering large savings off traditional retail prices. As a Health Plan member, you can benefit from a 10% reduction off selling prices – just visit www.ClearlyContacts.ca and enter coupon code STUDENTCARE at checkout. For more information, visit ihaveaplan.ca.

Laser eye surgery – LASIK MD

LASIK MD, a leading provider of laser eye surgery, is also a member of the Studentcare Vision Network. LASIK MD offers an additional \$150 off laser eye surgery, so that students covered by the Health Plan can get double the coverage. For more information, contact LASIK MD at **1-866-366-2020**.

Health Practitioners

The AMS Health Plan covers the cost of a physiotherapist, chiropractor, psychologist, naturopath, osteopath, registered dietician, podiatrist/chiropractist, athletic therapist, speech therapist and massage therapist for a **maximum of \$30 per visit** and **\$400** per category of practitioner per policy year. You need a referral by a medical doctor to be covered for visits to a registered dietician and a massage therapist. The AMS Health plan provides the **Studentcare Physiotherapy and Chiropractic Network** - networks of practitioners who have reduced their professional fees for members of the AMS Health Plan. Visit ihaveaplan.ca for details and a directory of network practitioners.

Tutorial Benefit

Covers the cost of private tutorial service by a qualified teacher if an accident or illness causes disability and confinement to a home or hospital for fifteen consecutive days within 100 days of the date of the accident. The benefit will be paid from the first day of confinement, up to a maximum of \$10 per hour, to a maximum of \$300 per accident or illness. This benefit is payable to the insured student only, and not to his or her spouse and/or dependants.

Diagnostic Services

Lab tests (including blood sampling), x-rays and ultrasounds used to diagnose an illness are covered only if your provincial health care doesn't cover these services. They must be performed in a commercial lab. Ultrasounds for pregnancy and the monitoring of an illness are not covered.

ACCIDENT INSURANCE BENEFITS

(insured by Sun Life Assurance Company of Canada, policy #22275)

Medical Equipment and Services

Medical Equipment

Covers the cost of stipulated medical equipment and services which are required as a result of an accident, including crutches, splints, trusses, braces, prosthetic appliances, rental of wheelchair or hospital type bed. Orthotics are covered at 100% to a maximum of \$350 per policy year when prescribed by a physician, podiatrist or chiropractist and when required as the result of an accident. Orthopaedic shoes and orthopaedic modifications to shoes are covered at 100% to a maximum of \$500 per policy year when prescribed by a physician, podiatrist or chiropractist and when required as the result of an accident. Before incurring any medical equipment expense, you should contact the AMS for eligibility information and any applicable maximums on all equipment. A medical doctor's authorization is required for most of these claims.

Dental Accident

Dental services, including braces and splints are covered for the repair/replacement of natural teeth damaged through an external accidental blow to the mouth. Coverage is based on the fee stated in the Dental Association Fee Guide for a general practitioner in the province where the service was performed. If you visit a specialist for covered services, your reimbursement will be processed according to the equivalent General Practitioner fee. Treatment must be completed within the 12 months following the accident. The maximum coverage is \$1,000 per accident.

Ambulance

Covers the reasonable and customary charges for air or land ambulance service to the nearest hospital for emergencies requiring immediate medical attention. The combined maximum is \$250 per accident.

Home Nurse

A home nurse is covered when certified in writing as medically necessary due to an accident by the attending physician and when approved by Sun Life Assurance Company of Canada.

Hospitalization

Covers 100% of the cost of an upgrade from a public ward to a semi-private hospital room when required as a result of an accident and when in the insured person's province of residence.

Accidental Death and Dismemberment

(insured by Sun Life Assurance Company of Canada, policy #22275)

Provides benefits for the loss of life or limb and for paralysis caused by an accident. Principal sum of \$2,000. Contact the **AMS Front Desk** for more information, or visit www.myams.org/health for details.

Repatriation

Covers the expense of homeward carriage of the body of the Insured for burial, subject to maximum payment of \$10,000.00, within 365 days of the accident.

Overall Maximum

The overall maximum for all expenses resulting from any one accident for all Accident Insurance benefits is \$10,000. Accidental death and dismemberment benefits are not included in this maximum.

TRAVEL HEALTH COVERAGE

Provided by **Blue Cross**, policy #7488

The Travel Health coverage provides for hospital, physician, and other services for emergency treatment of an injury or illness while travelling outside of the province in which you reside (including international travel). It covers reasonable and customary charges, which are in excess of the provincial health-care allowance.

You're covered for up to **120 days per trip**, for an **unlimited number of trips taken during the coverage/policy year**.

The maximum coverage is \$5,000,000 per incident.

Health Plan members will also be covered for trip cancellation and trip interruption in case of a medical emergency:

Trip cancellation: Up to \$1,500 per trip for pre-paid, non-refundable trip expenses.

Trip interruption: Up to \$5,000 for each trip taken during the policy year.

Students who are leaving on a recognized academic exchange or who are participating in an internship as part of their studies can benefit from travel health coverage for the duration of the exchange or internship as long as they remain members of the student society, pay fees to the University, and keep their provincial health-care coverage. The Plan also includes travel health coverage for the first 120 days of their trip and for 120 days after the end of their exchange or internship as long as they remain covered for the applicable policy years.

Please note that there are important limitations and conditions to your coverage. The complete details of your benefits, coverage, and telephone numbers for emergency assistance can be found in your **Travel Health Passport**, available at myAMS.org/health and ihaveaplan.ca. If you're planning to travel, you must bring this document with you as health-care providers outside of Canada may require this information before providing service.

To receive assistance for a medical emergency or travel assistance during your travels, contact Blue Cross - See Contact Phone Numbers listed below.

Please note that students and their dependants are not covered for out-of-province or out-of-country emergency service once they reach age 65.

What do I need to do?

- Take some time to review the travel medical benefits and take the benefit wording with you whenever you leave your home province.
- Before receiving any medical treatment, call Blue Cross-CanAssistance. If your condition renders you unable to do so, then someone else must contact Blue Cross-CanAssistance immediately on your behalf. It is your responsibility to ensure that Blue Cross-CanAssistance has been contacted prior to receiving medical treatment or as soon as reasonably possible. Some procedures and benefits must be pre-approved.
- Blue Cross-CanAssistance is available to take calls from anywhere in the world, 24 hours a day, 7 days a week at the following emergency telephone number: **1 866 601-2583 (toll-free)**

DENTAL BENEFITS

(insured by Sun Life Assurance Company of Canada, policy #22275)

Your Dental Plan consists of two elements:

- 1) an insured portion provided to you by the insurance company
- 2) an additional reduction available through the **Studentcare Dental Network**

You're covered for the insured portion regardless of the dentist you choose. By selecting a dentist on the Studentcare Dental Network, you will get additional coverage.

1) Insured Portion

The insured portion of your Dental Plan covers a percentage of the recommended fee for covered services, according to the Provincial Dental Fee Guide for General Practitioners (the province where the service was performed), as indicated in the chart below. If you visit a specialist for covered services, your reimbursement will be processed according to the equivalent General Practitioner fee.

2) Studentcare Dental Network

The Studentcare Dental Network dentists, located in Kingston and other areas of Canada, offer members of the AMS Dental Plan a reduction of 20%- 30% off the Dental Fee Guide for General Practitioners' price of eligible dental services (refer to the chart on the next page for a breakdown of coverage). This will enable you to have up to 100% of your dental costs covered by the AMS Dental Plan.

The list of Studentcare Dental Network dentists in Kingston is available from the **AMS Front Desk** or at www.myams.org/health. Please visit ihaveaplan.ca for a complete list of Dental Network members in Ontario and across Canada.

Dental Coverage Chart

Service	Insured Portion ¹	Studentcare Dental Network Reduction	Total Coverage
Preventive Services	70%	30%	100%
checkups, cleanings ²			
Basic Services	80%	20%	100%
fillings ³ , oral surgery, endodontics (root canal), periodontics (gum treatment), extractions ⁴			
Major Restorative	Not Covered	20%	20%
crowns, bridges, posts, etc.			

- 1) Percentage of Provincial Dental Fee Guide for General Practitioners (province where service was performed)
- 2) A cleaning normally includes a recall examination (bitewing x-ray, check-up, polishing, oral hygiene instruction). Scaling and root planing are covered up to a combined maximum of 8 units per policy year. You're covered for a recall exam once every 9 months. A complete exam (sometimes called a new patient exam) is covered once per 36 months. A complete set of x-rays or panorex x-rays is covered once per 36 months.
- 3) Both fillings in amalgam (silver) and composite (tooth-coloured) fillings are covered for all teeth.
- 4) The extraction of impacted teeth and erupted wisdom teeth is considered basic services by Sun Life. There is no maximum on the number of wisdom teeth extractions.

The maximum paid by Sun Life Assurance Company of Canada per policy year (Sept. 1, 2009 - Aug. 31, 2010) on the insured portion of the Dental Plan is **\$1000**.

SUBMITTING A CLAIM

All claim forms are available at the **AMS Front Desk**, www.myams.org/health and www.ihaveaplan.ca. Photocopies of blank claim forms may also be used.

Travel Health Coverage Claims (Blue Cross, policy #7488):

Consult the Travel Health Coverage section of this brochure. Visit ihaveaplan.ca for more information.

Accidental Death and Dismemberment Claims (Sun Life, policy #22275):

Contact the **AMS Front Desk** for more information.

Vision, Extended Health, Accident benefit and Dental Claims (Sun Life, policy #22275):

You can use your health and dental benefits anywhere in the world. Reimbursements are in Canadian funds and are calculated at the exchange rate of the day the claim is processed. Reimbursement is limited to what the service would have cost if done in Canada. When applicable, claims will be co-ordinated with your provincial or UHIP medicare coverage. Please allow one to two weeks for the claim to be processed.

1) Prescription drug claims using your Student Card

By presenting your valid student ID card, you can fill your prescriptions at most Canadian pharmacies. The pharmacist will need the number on the sticker on the back of your card, and will then be able to process the claim immediately, so you won't have to pay the full amount up front and be reimbursed later. Should you have your prescription filled at a pharmacy that is not able to access the plan by computer network, you must pay the pharmacist and submit your claim to Sun Life Assurance Company of Canada for reimbursement. **A newly enrolled student's ID can't be accepted during the Blackout Period (see below), which usually ends in mid-October.**

2) Vision and other health claims (including prescription drugs if you're not using your student ID)

- a. Complete and sign the health claim form (indicate your student ID and group numbers).
- b. Attach the original receipts and documents.
- c. Keep a photocopy of all forms, receipts and documents.
- d. Mail to the insurance company at the address on the claim form.

3) Dental claims

- a. You and your dentist must complete the dental claim form.
- b. Forms can be submitted either manually on a dental claim form or electronically by the dentist.
- c. If you're using a standard claim form, be sure to indicate your group number ("22275") in the space for "Group Policy Number", and use your student ID as your individual ID number.
- d. You can assign benefits to your dentist. Sign the box on the form giving authorization to assign benefits, and the reimbursement will be sent directly to the dentist. You'll only have to pay the portion not covered by the insurance reduction. Consult your dentist to find out if he or she accepts assignment of benefits.

Deadlines for 2009-2010 Claims Submissions

All health and dental claims must be received by Sun Life Assurance Company of Canada no later than 90 days after the end of the policy year in which the claims were incurred, or 90 days after the end of your coverage, whichever is sooner. Your 2009-2010 policy full-year coverage ends Aug. 31, 2010.

Where to Send Health and Dental Claims?

Send Vision, Extended Health, Accident and Dental claims to:

Sun Life Assurance Company of Canada
Group Claims Department
PO Box 11805, Stn. CV
Montréal, Québec H3C 0H3

Where to Send Travel Claims Incurred After Sept. 1, 2009?

Travel health coverage is provided by Blue Cross. If you use any of your travel benefits, you must call Blue Cross-CanAssistance immediately to find out how and when to submit your claims. For more information, consult your Travel Health Passport.

Where to Send Travel Claims Incurred Before Sept. 1, 2009?

Contact Mondial Assistance: 1 866 759-2882 (toll-free)

Online Claims Information

You can access your claims information online. You can view or print details of your claims and have claim payments deposited directly into your bank account. Once you've had a claim processed by Sun Life, please visit www.sunlife.ca/member where you can register for an Access ID and a Password in the Plan Member section.

Are You Covered by Another Plan?

If you're covered by another plan (i.e. a parent or spouse's employee benefit plan), you can combine this plan with the AMS Health & Dental Plans to maximize your overall coverage and eliminate out-of-pocket costs. By doing so, you may be able to claim deductibles or co-payments that you would otherwise have had to pay.

Blackout Period

There is no Blackout Period for returning eligible students. If you were covered by the plan(s) last year, and you continue to be a member of the plan(s), you will continue to be reimbursed without any blackout period delay and practitioners and pharmacists will be able to continue to accept your student ID or assignment of benefits. **All other students will have a Blackout Period during the first two months of the Fall semester.** New Winter semester students who self-enrol for coverage will experience a Blackout Period in the 2010 Winter semester.

Claims processing for new enrolled members will be delayed until mid-October 2009, until all the opt outs and enrolments have been processed. During this time, you may submit claims, but reimbursement cheques will only be mailed once the Blackout Period ends. Practitioners and pharmacists can't accept your student ID or assignment of benefits during the Blackout Period.

OPT-OUT

If you are already covered under another Plan (not including basic provincial medicare or UHIP), you may opt out of the AMS Health and/or Dental Plans and have the fee removed from your fee assessment. You may opt out of the Health Plan only upon showing proof of other equivalent health coverage. Similarly, you may opt out of the Dental Plan only upon showing proof of other equivalent dental coverage. You can opt out of both the Health and Dental Plans upon showing proof of other equivalent health **and** dental coverage.

How to Opt Out

First-time Opt Outs – i.e. First years/incoming students, or students who have not previously opted out of the Health or Dental Plans must complete the opt-out form (downloadable from www.myams.org/health) and attach ***Proof of Coverage**** to the form. To opt out, the form and proof must be delivered to the AMS office in person, or by mail or fax, no later than September 25, 2009.

Returning Students Who Opted Out Last Year: Even if you opted out last year, you will be automatically re-enrolled in both Plans this year. If you wish to opt-out again and you still have equivalent coverage(s), you may use the AMS Health and Dental online opt-out (www.myams.org) to renew your opt out. Simply update your coverage information by completing the online opt-out steps. You do not need to re-submit proof of equivalent coverage unless that coverage has changed. If you are unable to opt-out online, you may do so in person at the AMS Office.

NOTE: You can only opt out in person during the Change-Of-Coverage Period from September 1 – 25, 2009. The deadline for opting out (in person or online) is September 25, 2009. NO extensions will be granted beyond September 25, 2009.

*Proof of Coverage

To complete your opt out, you'll need to provide proof of coverage by an equivalent extended health and/or dental plan. Acceptable proof must consist of ONE of the following:

- a photocopy of a certificate or card clearly indicating YOUR name, your coverage for extended health and/or dental care, the insurance company name, and the policy number, OR
- a letter from the plan sponsor (usually the employer) or the insurance company attesting that YOU are covered for supplemental health and/or dental care, OR
- a photocopy of a receipt from a recent claim that clearly indicates current coverage for YOU.

If you opt out, you will still be automatically re-enrolled in the Plan the following year. If you wish to opt out again, you will need to renew your opt out, but you will not be required to re-submit proof of equivalent coverage.

If you lose your equivalent coverage after opting out of the AMS Health and/or Dental Plan, you may re-enrol in the Plan within 30 days of losing your other coverage. You will have to provide proof of the loss of coverage.

NOTE: Students who opt out absolve the AMS, insurance company(s), Queen's University, studentcare.net/works and any other involved party of all liability whatsoever for any loss suffered by the student. Students (or their parents in the case of minors) are responsible for familiarizing themselves with the contents of this Reference Guide before they opt out.

GLOSSARY

Accident: a bodily injury that occurs solely as a direct result of a violent, sudden and unexpected action from an outside source.

Dependent children: your children and your spouse's children (other than foster children) are eligible dependants if they are not married or in any other formal union recognized by law, and are under age 22. A child who is a full-time student attending an educational institution recognized under the Income Tax Act (Canada) is also considered an eligible dependant until the age of 26 as long as the child is entirely dependent on you for financial support.

Full-time student: an undergraduate student who is either a) registered for both Fall and Winter courses and taking a minimum of 3.0 credits spread out over the Fall and Winter semesters, or b) registered for only the Fall semester (and not the Winter semester) and taking 1.5 or more credits in the Fall semester. Please note that the AD&D benefit (insured by Sun Life) only covers students that are under age 70 and that the Travel benefit (provided by Blue Cross) only covers students that are under age 65.

Part-time student: Any student enrolled in a credit course at Queen's. Please note that the AD&D benefit (insured by Sun Life) only covers students that are under age 70 and that the Travel benefit (provided by Blue Cross) only covers students that are under age 65.

Change-of-Coverage Period: the period at the beginning of the semester when you can either enrol or opt out of the AMS Health and/or Dental Plan. If you start school in September, the Change-of-Coverage Period is from September 1 - 25, 2009. If you're a new student starting in January, you can enrol yourself and your spouse/dependants between January 4 – 30, 2010.

Policy year/coverage period: September 1, 2009 to August 31, 2010.

Spouse: the person who is your spouse by marriage or under any other formal union recognized by law, or your partner of the opposite sex or of the same sex who has been publicly represented as your spouse for at least the last year. Please note that the AD&D benefit (insured by Sun Life) only covers students that are under age 70 and that the Travel benefit (provided by Blue Cross) only covers students that are under age 65.



Contact Information:

**For Information regarding details of your AMS Health and Dental Plans, contact:
the Alma Mater Society of Queen's University**

AMS - Front Desk

www.myams.org/health

Phone: 1-613-533-3001

Fax: 1-613-533-3002

Email: frontdesk@ams.queensu.ca

Alma Mater Society of Queen's University
John Deutsch University Centre
Queen's University
Kingston, ON
K7L 3N6

For Claims Status Contact:

studentcare.net/works

1134 St. Catherine Street West, Suite 700
Montreal, Quebec H3B 1H4

Phone 1-877-795-4420 (Toll Free)

ihaveaplan.ca

or www.sunlife.ca/member

Register for your Access ID and Password in the Plan Member section.

View or print details of your claims and have claim payments deposited directly into your bank account.

All inquiries are treated with complete confidentiality.

The AMS provides full service support for you –the AMS Queen's University Student – helping you maximize your overall benefit under your AMS Health & Dental Plans. We value your input to make these plans serve you better—Please, if you have any concerns, comments or suggestions, contact the AMS VP Operations by:

Mail see address above),

phone 613-533-2728

e-mail vpops@ams.queensu.ca