

PSHCP BULLETIN

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Claim filing deadline for 1999 expenses: June 30, 2000

Please remember to file your claims no later than 6 months from the end of the calendar year in which you incurred your expenses. Claims for 1999 expenses must be submitted **no later than June 30, 2000**.

Claims will not be accepted after the six-month deadline, unless the late claim is the result of unavoidable circumstances such as medical or psychological incapacity.

Please use a personalized claim form when you submit your claim. If you don't have a personalized claim form and need to obtain a standard PSHCP claim form, please contact your Pay and Benefits or Pension Office.

You may also obtain a claim form on the Treasury Board Secretariat (TBS) web site at <http://www.tbs-sct.gc.ca>. To find the claim form, click on: *Policies and Publications / Human Resources Management / Insurance and Related Benefits / Health Care*.

Once in the Health Care section, click on "Public Service Health Care Plan (PSHCP) Claim Forms are now available on-line". Then scroll down to the first paragraph of the memo where there are hypertext links that take you directly to the claim forms. Click on either "the standard PSHCP claim form (TBS-006482)" or the "PSHCP claim form for Comprehensive Coverage (TBS-006483)" and follow the downloading instructions.

Prolotherapy treatment not covered effective June 1, 2000

Following a review of this procedure, the Board of Management has determined that Prolotherapy treatment does not qualify for reimbursement under the PSHCP. As a result, the PSHCP will no longer provide reimbursement for Prolotherapy treatment **effective June 1, 2000**.

Prolotherapy, also known as non-surgical joint reconstruction therapy, is considered experimental. The PSHCP does not cover costs relating to experimental products or treatments.

In addition, none of the provincial health plans covers this particular treatment. The PSHCP only provides reimbursement for the cost of physician services if your provincial health plan does not cover the expense, but **one or more other** provincial health plan(s) does.

The PSHCP will cover expenses for Prolotherapy treatments received up to May 31, 2000 only. Effective June 1, 2000 the PSHCP will no longer reimburse these expenses. Ineligible expenses include both the cost of the injectable solution and the related physician's fee.

The PSHCP Dental Benefit

The Board of Management has received a number of inquiries concerning the Public Service Health Care Plan (PSHCP) Dental Benefit. The Board provides this article in an effort to clarify this aspect of your coverage.

The PSHCP Dental Benefit provides reimbursement for two specific types of dental services only:

- accidental injury treatments to natural teeth, and;
- **specific** oral surgical procedures.

The PSHCP does not provide reimbursement for other dental claims (e.g. cleanings, scaling, routine restorations etc.). Please submit these claims to **your dental care plan** if you belong to one.

Accidental injury treatments:

The PSHCP reimburses dental surgeon services and supplies required for the treatment of a fractured jaw or accidental injuries to natural teeth. The fracture or injury must be caused by an external and violent blow to the mouth – not associated with normal acts such as cleaning, chewing, and eating. Please note that the treatment must occur within 12 months following the accident, or in the case of a child under age 17, before their 18th birthday.

The PSHCP Administrator, Sun Life, requires a completed claim form that includes information regarding the date and details of the accident. Once the PSHCP has processed your claim, you may then submit a claim for the balance remaining to either the Public Service Dental Care Plan, the RCMP Dependents Dental Care Plan, or the Canadian Forces Dependents Dental Care Plan if you are covered by one of these plans.

Specific oral surgical procedures:

The PSHCP reimburses a list of **specific** oral surgical procedures performed by a dentist. To consult the list, please refer to either the paper or on-line version of the PSHCP Booklet. Some of the most common eligible procedures include osteoplasty, gingivectomy, removal of impacted teeth (when teeth are prevented from erupting normally because of hard tissue or bone), biopsy, apicoectomy, etc.

To determine the eligibility of a specific oral surgical procedure please obtain the appropriate dental procedure code from your dentist before calling the PSHCP Administrator.

Please note that **you must first submit claims for oral surgical procedures** to either the Public Service Dental Care Plan, the RCMP Dependents Dental Care Plan, or the Canadian Forces Dependents Dental Care Plan if you are covered by one of these plans.

Once the dental care plan has processed your claim, you may then submit a claim to the PSHCP for the balance remaining. The PSHCP Administrator, Sun Life, requires a completed claim form and a copy of the applicable Explanation of Benefits (EoB) form showing the processing of the claim by your dental plan.

Eligible expenses under the PSHCP Dental Benefit are reimbursed at 80%, after the plan's annual deductible amount is satisfied.

Reminder: when to contact the Administrator before incurring an expense

This is a reminder that in some cases it is advisable that you first contact the Administrator, Sun Life, before purchasing certain expensive medical equipment or treatments. In these cases, Sun Life may confirm the eligibility of the expense, or explain the specific information required to later process the claim.

Please find below a list of PSHCP benefits where you should consider first contacting Sun Life before incurring any expense:

- private duty nursing services;
- durable equipment such as hospital beds, mechanical lifts, etc.;
- wheelchairs;
- out-of-province referral benefit;
- temporary and permanent artificial limbs;
- invitro-fertilization (IVF);

The *PSHCP Bulletin* is produced by the Public Service Health Care Plan (PSHCP)
Board of Management to provide you with benefit
and administrative information about your health care plan.