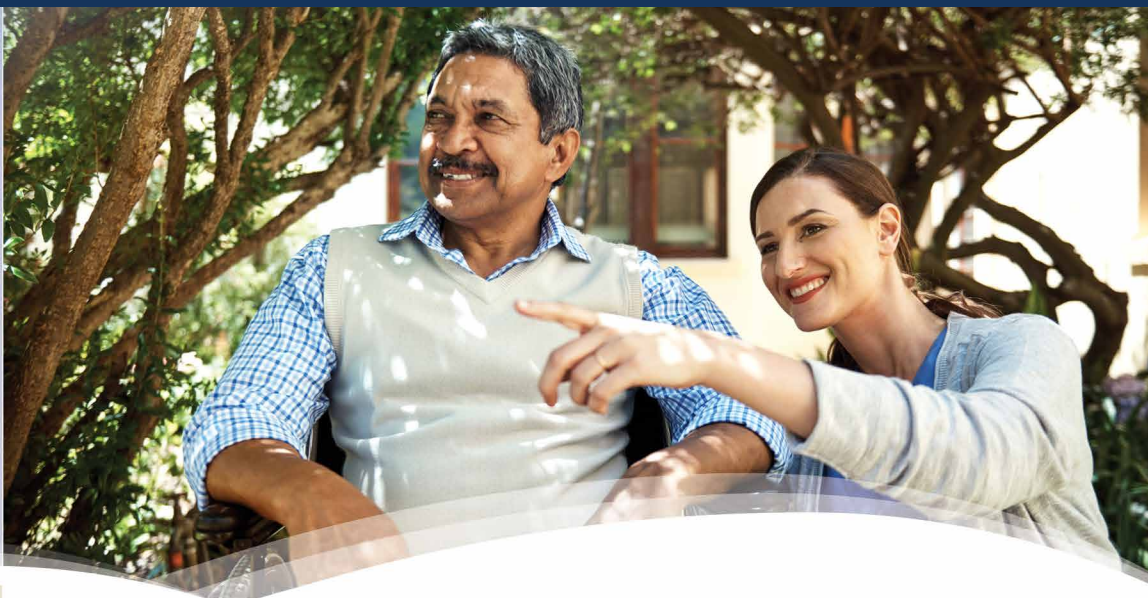


## The Public Service Health Care Plan



### CONTENTS

NURSING SERVICES IN  
RETIREMENT FACILITIES AND  
SENIOR RESIDENCES

**P1-P2**

PARAMEDICAL  
PRACTITIONERS

**P2-P3**

REQUEST AN INCREASE TO  
THE DAY SUPPLY LIMIT FOR  
PRESCRIPTION MEDICATION

**P3**

UPDATE  
– DIGITAL SERVICES

**P4**

OUT-OF-PROVINCE  
BENEFIT

**P4**

# Bulletin.

KEEPING YOU UP TO DATE

## Nursing services in retirement facilities and senior residences

To be eligible for reimbursement under the PSHCP, nursing services provided in retirement facilities and senior residences must be performed by a private duty nurse especially hired to give their full care and attention to a patient.

To be reimbursed for these nursing services, your physician must fill out a questionnaire providing information about the person's medical condition, the nurse's duties, and the length of time nursing care will be needed. Once completed, the questionnaire must be sent to Sun Life to determine coverage eligibility on a case-by-case basis. To obtain the questionnaire, log into your Sun Life Plan Member Services account at [www.sunlife.ca/pshcp](http://www.sunlife.ca/pshcp). You can also contact the PSHCP Call Centre at 1-888-757-7427 toll free from anywhere in North America or 613-247-5100 in the National Capital Region.

A reasonable and customary amount of \$60 per hour applies for nursing services covered under the PSHCP. The maximum expense per plan participant is \$15,000 per calendar year, reimbursed at 80%. Coverage must be effective at the time the expenses are incurred and the services are rendered.

This benefit excludes such services as:

- Services that do not require the specific skills and qualifications of a nurse, such as patient transfers, incontinence care, safety monitoring, repositioning, and assistance with daily activities such as feeding, bathing, and performing household chores.
- Nursing and foot care services provided by salaried employees of retirement facilities and senior residences as these nurses already receive a salary from the establishment for the services provided.
- Nursing services rendered by a registered nurse who is employed by a company under contract with a condominium corporation.
- Nursing services that are not billed directly to the member by the practitioner. 📍

## Paramedical practitioners

Under the Medical Practitioners Benefit, the PSHCP covers services rendered by paramedical practitioners such as massage therapists and physiotherapists. These paramedical practitioners must be registered, licensed or certified to practice in the province or territory where they work and follow provincial/territorial regulations accordingly. All services and treatments provided must be within the practitioner’s area of expertise and skill.

To be eligible, some services require a prescription from your physician. These prescriptions are valid for one year unless otherwise indicated. Services are reimbursed at 80% and reasonable and customary amounts per visit apply. Coverage must be effective at the time the expenses are incurred and the services are rendered. For treatments lasting more than one hour, your practitioner must indicate the duration of the treatment on the receipt.



The following services provided by paramedical practitioners are eligible under the terms of the PSHCP:

PARAMEDICAL PRACTITIONER	REQUIREMENTS AND MAXIMUM ELIGIBLE EXPENSES
<b>Acupuncture</b>	Acupuncture treatments must be performed by a physician (medical doctor) licensed to practice medicine in Canada.  Note: Services are not eligible for reimbursement if they are performed by an acupuncturist or doctor of Chinese medicine.
<b>Chiropractor</b>	Maximum eligible expense of \$500 per participant, per calendar year. A physician’s prescription is not required.
<b>Electrologist (or physician when performing electrolysis treatments)</b>	Treatment for the permanent removal of excessive hair from exposed areas of the face and neck when the patient suffers from severe emotional trauma as a result of this condition.  Severe emotional trauma must be certified by a psychiatrist or a psychologist to be eligible.  The prescription is valid for three years. The maximum eligible expense is \$20 per visit.
<b>Massage Therapist</b>	Maximum eligible expense of \$300 per participant, per calendar year. A physician’s prescription is required.
<b>Naturopath</b>	Maximum eligible expense of \$300 per participant, per calendar year. A physician’s prescription is not required.

<b>Osteopath</b>	Maximum eligible expense of \$300 per participant, per calendar year. A physician's prescription is not required.
<b>Physiotherapist</b>	Maximum eligible expense of up to \$500 and over \$1,000 per participant, per calendar year. Reimbursement is divided into three parts, for each participant: <ul style="list-style-type: none"> <li>• 80% for the first \$500</li> <li>• 0% for the next \$500 to \$1,000 (expenses should still be submitted to Sun Life)</li> <li>• 80% for expenses over \$1,000, incurred in the same calendar year.</li> </ul> A physician's prescription is required.
<b>Podiatrist / Chiropodist</b>	Maximum eligible expense of \$300 per participant, per calendar year. A physician's prescription is not required.
<b>Psychologist</b>	Maximum eligible expense of \$2,000 per participant, per calendar year. A physician's prescription is required
<b>Social Worker</b>	Eligible when: <ul style="list-style-type: none"> <li>• A member resides in an isolated post (refer to Appendix A of the National Joint Council's Isolated Posts and Government Housing Directive); and</li> <li>• The isolated post does not have a practicing psychologist.</li> </ul> Maximum eligible expense of \$2,000 per participant, per calendar year. A physician's prescription is required.
<b>Speech language pathologist</b>	Maximum eligible expense of \$500 per participant, per calendar year. A physician's prescription is required.

Please note, Sun Life maintains a national list of delisted service providers. Providers and facilities are added to the list when evidence of fraud is obtained after a thorough investigation. Products and services received from delisted providers will not be processed or reimbursed under the plan. For the full list of delisted service providers, log into your Sun life Plan Member Services account at [www.sunlife.ca/pshcp](http://www.sunlife.ca/pshcp). We encourage you to check the list periodically so that you do not unknowingly use the services of a delisted provider.

## Request an increase to the Day Supply Limit for prescription medication

The Day Supply Limit for drugs under the PSHCP is 100 days for both acute and maintenance drugs. If you will be traveling for an extended period or will be transitioning to coverage as a retired member under the plan, follow these steps to request an increase to your Day Supply Limit to a maximum of 200 days:

1. Two weeks prior to your vacation or transition to retirement, prepare a list of the additional medication supply you may require. Include the Drug Identification Number (DIN) and the name of the drug listed on your prescription. Alternatively, have your pharmacy print a list of your prescriptions including the DINs.
2. Contact Sun Life by phone or use the Secure Message and Chat features available at [www.sunlife.ca/pshcp](http://www.sunlife.ca/pshcp).

Have your contract and certificate numbers, claimant information, and medication list on hand.

3. The Sun Life representative will log your drug information and request to purchase an additional supply. Your request will be reviewed within two business days and the normal system dispensing limitation will be suspended, at which point you can request your refill at the pharmacy. 📍




## Update – Digital services

### REGISTRATION ENHANCEMENTS

Registering on Sun Life’s Plan Member Services website ([www.sunlife.ca/pshcp](http://www.sunlife.ca/pshcp)) has never been easier! Based on the feedback received from a recent member survey, the registration process has been simplified and can even be completed through the my Sun Life mobile app.

To register:

1. Go to [www.sunlife.ca/pshcp](http://www.sunlife.ca/pshcp) or download the **my Sun Life** mobile app from Google Play or the App Store.
2. Select **Register**.
3. Enter your first name, last name, and email address.
4. Create your password and select a verification question.
5. Enter your date of birth and postal code and click **Next**.
6. You will receive a temporary registration code in the mail. Sign in using your email address and password and enter the temporary code to complete your registration.

Once you are registered, use Sun Life’s Plan Member Services website or app to access all of the PSHCP online tools. 

## Out-of-Province Benefit


As a PSHCP member with Supplementary coverage, you and each of your eligible dependants have coverage under the Out-of-Province Benefit. This benefit includes the:

- Emergency Benefit While Travelling – a maximum of \$500,000 per trip for reasonable and customary emergency treatment costs incurred due to injury or illness within 40 days of departure from province/territory of residence for vacation travel. This coverage is for an unlimited time period if on official travel status for government business travel.
- Emergency Travel Assistance Services.
- Referral Benefit – coverage for certain medical services not offered in your province/territory.

Additional information on the types of eligible expenses can be found in the PSHCP Directive under the Out-of-Province Benefit at [www.njc-cnm.gc.ca](http://www.njc-cnm.gc.ca).

The emergency benefits are administered by Allianz, and provide members with a 24-hour helpline for medical, legal or other travel-related emergency assistance. Whenever you or your covered dependants travel, remember to take your PSHCP benefit card listing your Plan Certificate Number and Allianz’s Worldwide Care Helpline telephone numbers.

Please note that some provincial/territorial health care plans may cover expenses incurred out of province. You should always check the coverage available to you before leaving your province/territory as you may wish to consider purchasing additional travel insurance.

If you are a PSHCP member residing outside of Canada and are no longer covered under a provincial/territorial health care plan, you and your eligible dependants may qualify to apply for Comprehensive coverage under the PSHCP. Contact Sun Life for more information about this coverage. 

The PSHCP Bulletin is produced by the Federal Public Service Health Care Plan Administration Authority to provide benefit and administrative information about your health care plan.

If you have any questions about the content of this bulletin, please contact Sun Life at 1-888-757-7427 toll-free from anywhere in North America or 613-247-5100 in the National Capital Region. If you would like to change your mailing address for future bulletins, you may do so online at [www.sunlife.ca/pshcp](http://www.sunlife.ca/pshcp).

