

Definitions & Terms Guide



STUDENT VIP
INTERNATIONAL

WORD

DEFINITION

Anesthesia

Dental Anesthesia is a field of anesthesia that includes not only local anesthetics but sedation and general anesthesia. Local anesthetic freezes the mouth before a procedure is done to help with pain relief.

Medical Anesthesia is a field of anesthesia that includes local, sedation and general anesthesia. These are forms of medicine that freeze a spot on the body that requires medical attention to help relieve pain. General and sedation are typically a medical gas that give you the feeling of being asleep before a medical procedure is done so you do not feel pain.

Beneficiary

A person who may receive payment from your health benefits if you die while covered under an insurance policy.

Benefit Period

The period of time that an Insured Person is insured (covered) under the insurance policy. Starting from 12:01 a.m. on the effective date of coverage and ending at 12:00 midnight on the termination date.

Calendar Year

The 12-consecutive-month period that begins on January 1 and ends on December 31. Sometimes your insurance policy will indicate that some benefits are in force per calendar year versus policy year.

Campus Health Clinic

The on-campus medical centre that provides different health care services to students such as a doctor, nurse, and some mental health services.

CanAssistance

The emergency assistance provider for the Student VIP Travel Benefits and Student VIP International Student Health Plan. CanAssistance provides travel assistance such as if you are sick and need to find a doctor.

Certificate ID or ID Number

A certification ID or your ID number is your personal identification number for the insurance company to find you under your group policy. Under a Student VIP / Student VIP International plan, a certificate ID and ID number are the same.

Claim

A claim is when you have paid out of pocket for a service and must submit your expenses to the insurance company to see if they are eligible. A claim can be for medication, dental services, doctor visits, etc. Making a claim does not mean the service will be reimbursed (paid).

Co-Insurance

Co-Insurance means you're going to pay a little bit, and the carriers are going to pay the rest. For example, if you know your plan has an 80/20 co-insurance, it means that the carrier will pay 80 percent and you'll pay the 20 percent remainder.

Co-Pay

You pay a portion of the cost of your prescriptions by paying either the same amount each time (e.g. \$5) or a percentage of the total cost (e.g. 20%). If you're paying a percentage, then you're encouraged to shop around for the best available dispensing fees and ingredient costs.

Coordination of Benefits

If you are covered by another health insurance plan in addition to your Student Benefits (e.g. through a parent's or spouse's employer, or your own employer), you may coordinate the benefits in order to increase your overall coverage, up to 100%.

Deductible

A deductible is an amount you pay for health care services before your health policy begins to pay.

Denial of Claim

When the service that you have obtained is not eligible (covered) under your insurance policy. This may be because the service is not included in the coverage, you have reached the maximum amount payable for that service, or it relates to a pre-existing condition.

Dependant

A person/family member that can be included on the student's health benefits. On the Student VIP benefits, an eligible dependent (family member) is a spouse (husband/wife), common-law partner (live-in partner for at least 2 years), or children.

Diagnostic Test

A diagnostic test can include an x-ray, a blood test, or other bodily fluid samples. It is an examination to identify a person's area of weakness and strength to determine a condition, illness or even disease. This follows the report of symptoms or other medical test results.

Direct Billing

When a practitioner, pharmacy, dental office, doctor office, or hospital sends the bill to the health insurance company for payment. This means the student does not have to pay up front and file a claim for reimbursement.

Dispensing Fees

A dispensing fee represents the charge for the professional services provided by a pharmacist when dispensing a prescription. The dispensing fee differs from pharmacy to pharmacy. Student VIP is able to offer you student-friendly dispensing fees through some of our partners.

Drug Identification Number (DIN)

A DIN is an eight-digit number that tells you if the product has been approved for use and can legally be manufactured and sold in Canada.

Emergency

"Unexpected and unforeseen sickness or injury that requires immediate medical treatment for the relief of pain or suffering which cannot be delayed. "

Emergent Care Centre also known as an ER

An emergent care center is a 24 hour/7 day a week service that is at a hospital. It has all of the necessary tools for assessment and care. Emergent care means services provided for a person that, if not provided, would likely result in the need for crisis intervention or hospital evaluation.

Endodontic

An Endodontist is a dentist who specializes in maintaining teeth through endodontic therapy - procedures, involving the soft inner tissue of the teeth, called the pulp. Endodontists perform a variety of procedures including root canal therapy, endodontic retreatment, treating cracked teeth, and treating dental trauma. Root canal therapy is one of the most common procedures performed by Endodontists.

Enrollment

Enrollment means that you have been signed up for the health insurance benefits either by your school automatically, or having purchased the health benefits on your own.

Exclusion

A service or expense that is not covered under the insurance policy.

Excursion Any type of travel outside of the province that you are attending school. An excursion can be for academic purposes such as study abroad or leisure such as a trip during reading week.

Explanation of Benefits (EOB) An explanation of benefits (commonly referred to as an EOB) is a statement sent by a health insurance company to covered individuals explaining what medical treatments and/or services were paid for on their behalf. The EOB is not a bill. It simply explains how your benefits were applied to that particular claim. It includes the date you received the service, the amount billed, the amount covered, the amount that the insurance company paid, and any balance you're responsible for paying the provider.

Extended Health Benefits A type of coverage included in health insurance benefits. Extended health benefits usually include paramedical practitioners, medical equipment and supplies, ambulance and more.

Health Benefits Card The card you must show when visiting the pharmacy, dental office, doctor office, or hospital. This card usually has your name and ID on it and the insurance company information so health care providers can directly bill the insurance company.

Home Country Home Country means the country that you maintain your permanent residence. For example, if you are a student that has come to Canada from China to study, your home country would be considered China.

Injury Harm or damage to your body.

Insurance Coverage that may pay for drug, dental, vision, medical, surgical expenses. Health and Dental benefits are subject to maximums, conditions and limitations and should be reviewed in full before use.

Insurance Provider The company responsible for processing and or paying claims, managing the contact centre for coverage questions and claims assistance. The insurance provider is sometimes known as the plan administrator.

Insured Person The person who is listed as having active coverage under an insurance policy.

Invoice A document issued by the health care provider that indicates the services you received. This document is needed by the insurance company to review and process claims.

Major Restorative Major Restorative Dental Services typically include procedures and treatments that are relatively more complex in nature. Major Restorative Services can include Dental Crowns, Dentures, Bridges, etc.

Mandatory Product Selection MPS, quite simply, pays for the cost of a prescription up to the equivalent generic price.

Medically Necessary Services or supplies provided by a Hospital or Physician, licensed Dentist or other licensed provider that are required to identify or treat an Insured Person's Sickness or Injury.

Mental Health A person's condition in terms of psychological, social and emotional well being. It affects how we think, feel and act. It also helps determine how we handle scenarios, relationships and other feelings or situations.

Minor Restorative Minor Restorative Dental Services typically include types of treatments and procedures that are relatively straightforward in nature. Minor Restorative Services can include Composite Fillings, Recementing Dental Crowns, Stainless Steel Crowns, etc.

Monitored Medication A Monitored Medication, or controlled substance, is generally a drug or chemical whose manufacture, possession, or use is regulated by a government, such as illicitly used drugs or prescription medications that are designated a Controlled Drug by the Controlled Drug and Substance Act. Examples include Dilaudid, Methadone, Demerol, OxyContin, Percocet, Morphine, Opium, Codeine, Amphetamine (Dexedrine, Adderall), and Methamphetamine. Schedule III - These are substances that can still lead to moderate or low physical dependence and high psychological dependence.

MSW A Master of Social Work - a Master's Degree in the field of Social Work. A provider who has an MSW provides mental health care to individuals such as counselling.

Opt-in To sign up, register, or enroll in an insurance policy.

Opt-out To cancel, withdraw, or leave a health insurance policy. At your school, you are required to have insurance. You may be able to cancel if you have other insurance already in place that is comparable to the school provided insurance before you can cancel.

Orientation It is a session or event where information is provided to students regarding their health benefits, benefits package, service and coverage details. Orientations can be held at different times of the year and students should attend.

Over the Counter Medicine Also known as (OTC) are health aids or medicine that do not need a prescription. They can be purchased at places like a pharmacy. OTC's can include items like Advil, Tylenol, cold medicine, cough drops, etc.

Paramedical Practitioner A type of health care provider that offers care such as a physiotherapist, chiropractor, massage therapist, naturopath, chiropodist, nutritionist.

Periodontics Periodontic dental care ranges from routine treatment of gums to assisting those diagnosed with gum disease, and can include the removal of calcium deposits (plaque, tartar, calculus, and stone) from around the tooth above and below the gum.

Plan Administrator The person that manages or takes care of the health and dental benefits for students. The administrator works with the plan provider (Student VIP International) to make sure the plan meets all the rules. Students can go to their health plan administrator with questions regarding their health coverage.

Policy Number or Group Number A policy number or group number is a way to identify what health insurance policy you are covered under. A policy number is assigned to each insurance policy. Under a Student VIP / Student VIP International plan, a policy number and group number are the same.

Practitioner An individual licensed under Canadian law to provide health services to individuals. Examples include a physician, psychiatrist, dentist, nurse, etc.

Pre-existing Condition Any condition known or unknown for which you have already received medical advice or treatment before enrollment on the health insurance benefits. Common pre-existing conditions include diabetes, a heart condition, a broken bone for which you need follow up treatment, etc.

Predetermination-Dental A dental predetermination is an estimate of what your dental benefits will cover and what you will be responsible for. Your dental office can submit an outline of the proposed treatment to Medavie Blue Cross™ prior to proceeding with treatment. The predetermination is only an estimate, and does not guarantee the final costs you will be responsible for paying.

Predetermination-Medical A medical pre-determination is used when you want to confirm if the medical procedure you need to get is covered by your insurance. You have to complete a form and submit it to the insurance company. They will review the form and your policy and send you a letter to confirm if you have coverage for the procedure or not. It is important to do a pre-determination before expensive medical procedures such as surgery, x-rays or if you know you need to be admitted to the hospital.

Preferred Provider A health care provider that is part of our network that usually offers a discount for services or direct billing to the insurance company so you do not have to pay the full cost out of pocket.

Premium The price that you pay for your health insurance.

Prescription A formal written document issued by a medical professional for a patient to be provided medicine or treatment. A drug prescription is used to get medication from a pharmacy. A prescription is not needed for over the counter health aids.

Provincial Health Care - also known as Government Health Insurance Plan The health care coverage Canadians automatically qualify for, to cover visits to the doctor or hospital. International students may qualify for this coverage if certain eligibility is met.

Psychiatry / Psychiatric care

A medical specialty for mental health. This medical practice is to diagnose, prevent and treat mental health conditions, illnesses or disorders. This includes trouble with mood, behavior, and perception. Psychiatric care can include medical evaluations, care or treatment by a professional.

Radiographs

A radiograph (x-ray) helps dentists diagnose and treat dental problems, including cavities, gum disease, infections, and more. Radiographs allow dentists to see inside a tooth and beneath the gums to assess the health of the bone and supporting tissues that hold teeth in place.

Reasonable and Customary

Reasonable & Customary limits are the range of usual fees for comparable medical services in a geographical area. Like other benefit providers, Medavie Blue Cross™ uses these limits to determine the maximum eligible amounts for health care services and supplies covered by your benefits. We review reasonable and customary limits on a continual basis and make changes periodically to ensure our allowed amounts are representative of the current standard charges in the health care environment.

Reimbursement

When the claim you or a provider submits for services you have obtained is approved and paid.

Repatriation

The return of an insured student to their own country or province if they are sick, injured or have died while covered under an insurance policy.

Scaling

Scaling teeth is part of a routine professional cleaning, and it involves scaling teeth and the gum line to remove plaque and tartar. This is done to keep your teeth and gums healthy.

Sickness

Sudden and unforeseen (unexpected) presence of an illness or disease.

Stable

An existing medical condition that is not worsening and there has been no change in any medication or dosage or usage for the medical condition, and there has been no change in the medical treatment.

Urgent Care Centre

An urgent care center is not designated to receive patients who arrive in an ambulance. It can be located in a hospital facility or a building on its own. Some urgent care centers have designated hours of operations. Urgent care is provided for illnesses or injuries which require immediate attention but are not of such seriousness as to require the services of an emergency room / hospital.

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THIS OR THAT

Brand Vs Generic

Brand name - It is a prescription drug that is marketed with a specific brand name by the company that makes it. Brand name drugs are typically more expensive than generic drugs.
Generic - Contain the same active medicinal ingredients as the brand name alternative, and are therefore considered therapeutic equivalents. However, the ingredients that actually combine the active ingredients may differ. For the most part, generic products will perform the same as their brand name counterparts, cost less and can reduce the costs of your health plan.

Common Carrier vs. Carrier

Carrier means the insurance provider responsible for processing and paying your claims. Common Carrier means a method of transportation such as airplane, bus, train, etc.

Complete vs Recall Exam

A Complete Exam consists of the dentist looking inside your mouth for things that can affect your oral - and overall - health. The complete exam can catch problems early before you see or feel them and when they are easier and less expensive to treat. Some of the problems that dentists can identify include deteriorating fillings, early signs of gum disease or oral cancer, etc.

A Recall Exam is a maintenance exam performed once a year following the initial oral examination. This exam helps to prevent tooth decay, gum disease, and other dental disorders that may have developed during the year. A recall visit typically includes an exam, as well as polishing and scaling.

Hospital vs on-campus clinic vs walk-in clinic

Hospital is an institution that provides medical and surgical treatment and nursing care for sick or injured people. A hospital has enhanced capabilities and can treat serious illnesses and injuries. They have diagnostic tools and an emergency care center that you can go to in very serious situations 24/7. Hospitals should only be used when care is emergent and cannot wait for an appointment. A walk-in clinic accepts patients on a walk-in basis and with no appointment required. You can get advice, assessment and treatment for minor illnesses and injuries. They provide services including diagnosis, prescriptions and referrals. Use a walk-in clinic in a non-urgent situation. Walk in clinics are not open 24/7.

Campus Clinic - Provides care to students right on campus. Similar to a walk in clinic with designated hours of operation. Some clinics can provide mental and physical health care. If there are doctors on site, they can prescribe medication and treatments. Check if your campus clinic is appointment based or walk-in. You can visit one when you are feeling unwell or need a check-up. They are also there to help answer questions related to your health. Services are confidential.

Opt-In vs. Opt-Out

Opting into a health plans means to sign up, register, or enroll in an insurance policy. Opting out of a health plan means to cancel, withdraw, or leave a health insurance policy.

Pharmacy receipt vs. store receipt

A store receipt is a slip of paper given in person or sent online that is used to provide a record of sale. A pharmacy receipt is a record of sale slip that includes the pharmacy details, prescriber's name (doctor), and the name of the drug or treatment that was prescribed. It can allow you in some cases to claim a reimbursement or see the details of the drug plan payment details.

Student VIP International Health Plan vs Provincial Health Care (GHIP)

The Student VIP International Health Plan and Provincial Health plans provide coverage for physician-related services such as doctor visits, hospital visits, diagnostic testing, etc. The coverages are NOT the same.