



Coronavirus disease (COVID-19) -**Temporary measures: Public Service Health** Care Plan (PSHCP)

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Note to readers

The below PSHCP COVID temporary extension of emergency travel benefits measure that expands trip duration coverage only applies to members and their eligible dependants who left their home province/ territory between January 17 and March 16, 2020, and are unable to return home. The standard <u>Out-of-Province Benefit</u> trip duration of 40 days, along with the normal plan maximum of \$500,000 (CAD) in eligible medical expenses incurred as a result of an emergency while traveling, applies to any member and eligible dependant who travel out of their province/ territory of residence after March 17, 2020.

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- Original notice: March 24, 2020

Update: COVID-19 Temporary Measures: Public Service Health Care Plan (PSHCP)

Date: April 24, 2020

To: The Public Service Pay Centre, Compensation Managers, Heads of Human Resources, Participating Separate Employers and Deputy Ministers

In response to the COVID-19 pandemic, the Government of Canada implemented **temporary** changes to the Public Service Health Care Plan (PSHCP), effective March 24, 2020. These changes were designed to help PSHCP members and eligible dependants access health care benefits while at the same time minimizing social interaction with health care professionals. The flexibilities outlined below will remain in effect until non-critical business is authorized to resume or as indicated otherwise.

Note: All other PSHCP provisions and coverage for members and eligible dependants remain the same during the COVID-19 pandemic. For additional information, consult the <u>Public Service Health Care Plan</u> page on Canada.ca/pension-benefits.

Temporary extension of emergency travel benefits

The temporary extension to the emergency travel limit is extended for members and their eligible dependants who left Canada between January 17, 2020, and March 16, 2020. This extension will be in effect until non-critical business is authorized to resume or as indicated otherwise. Members and their eligible dependants who left their home province **before** January 17, 2020, or on or **after** March 17, 2020, are **not** covered by this extension.

The following are **not** reimbursed under the PSHCP:

travel expenses as a result of trip cancellations or changes

- expenses incurred as a result of a quarantine if the member or eligible dependant does not contract COVID-19
- transportation expenses arranged by Canada back to a quarantine location

For assistance with travel-related medical emergencies, PSHCP members travelling in Canada or the United States can call Allianz toll-free at 1-800-667-2883. Plan members in all other countries should call Allianz collect at 519-742-1342.

Temporary relaxing of early prescription refills at the professional discretion of the pharmacist and provincial and territorial regulations

On March 24, 2020, the PSHCP's normal administrative practice of restricting the dispensing of maintenance medication to a 100-day supply was temporarily relaxed. Since March 24, 2020, provincial and territorial governments, and professional associations have restricted the dispensing of prescription medication to a maximum of 30 days. As such, the PSHCP will **no longer** reimburse maintenance prescription drugs beyond the 100-day limit.

The PSHCP continues to cover members and their eligible dependants for up to a 100-day supply of prescription medication. Members are encouraged to speak with their pharmacist to discuss the amount of medication that can be dispensed.

Note: The provincial and territorial restrictions take precedent over the PSHCP rules.

In order to continue to support the recommendations of public health authorities and minimize social interaction with health care professionals, if a member has multiple prescriptions, they are encouraged to speak with their pharmacist to discuss:

- the possibility of coordinating prescription refill dates
- whether prescriptions can be delivered to reduce the number of visits to the pharmacy

Temporary changes to accepted mental health practitioners

Social workers in all areas across the country and psychotherapists / **counsellors** New! working directly with plan participants are temporarily accepted as mental health practitioners under the PSHCP.

Temporary changes to prescription requirements

The requirement to have a prescription for mental health or physiotherapy services under the PSHCP is temporarily suspended until non-critical business is authorized to resume or as indicated otherwise.

In addition, existing prescriptions for paramedical services that expired on or after March 20, 2020, will continue to be honoured during the COVID-19 pandemic period. This means that when a member makes a claim for a paramedical service during this period, they will not be asked by Sun Life for a new prescription, even if their previous prescription has expired.

Coverage for virtual paramedical services

The PSHCP continues to cover you and your eligible dependants when you receive virtual services provided by practitioners that are registered in the province or territory where they practice.

Paramedical service providers covered under the PSHCP virtually are:

- Chiropodists
- Chiropractors

- Naturopaths
- Osteopaths
- Podiatrists
- Psychologists
- Physiotherapists
- Social Workers, Psychotherapists or counsellors New!
- Speech Therapists

Claims for services received virtually must be sent to Sun Life according to the normal process. Members are encouraged to keep copies of receipts, completed claim forms and any other documentation.

Before consulting any service provider, refer to <u>Sun Life's list of delisted</u> <u>providers</u>.

Temporary Measures communicated March 24, 2020:

Coronavirus disease (COVID-19) -Temporary measures: Public Service Health Care Plan (PSHCP)

Date: March 24, 2020

To: The Public Service Pay Centre, Compensation Managers, Heads of Human Resources, Participating Separate Employers and Deputy Ministers

In response to the coronavirus disease (COVID-19) outbreak, the Government of Canada has implemented **temporary** changes to the Public Service Health Care Plan (PSHCP). These measures are designed to help PSHCP members and eligible dependants access health care benefits while

at the same time minimizing social interaction with health care professionals. The following temporary measures will be in effect from March 24, 2020, until April 24, 2020, with the possibility of being extended.

All other PSHCP provisions and coverage for members and eligible dependants remain the same during the coronavirus disease (COVID-19) outbreak. For additional information on the PSHCP, please consult Canada.ca/pension-benefits.

Emergency Benefit While Travelling

For PSHCP members and eligible dependants who experience a <u>medical</u> <u>emergency while travelling</u> on vacation or business, the PSHCP covers up to \$500,000 (Canadian) for eligible emergency medical expenses (such as hospitalization and hospital services) in excess of the amount payable by a province or territory to treat an injury or disease that occurs within 40 days from the date of departure.

Temporary extension of travel emergency benefits

The limit of 40 days from the date of departure from the province or territory of residence has been extended to 60 days for those who left their province or territory of residence to travel outside of Canada before March 17, 2020, in advance of the <u>Government of Canada's Travel Health Notice</u>, and are still outside of Canada after March 17, 2020.

This means that if a member or eligible dependant left their province or territory of residence before March 17, 2020, they will have their Emergency Benefit While Travelling coverage extended from 40 to 60 days.

The extension does **not** apply to those who had already exceeded the 60-day threshold on March 17, 2020.

In other words, if a member or eligible dependant left their province or territory of residence on or before January 17, 2020, they will not be covered under the new temporary 60-day extension.

The following are **not** reimbursed under the PSHCP:

- 1. travel expenses as a result of trip cancellations or changes
- 2. expenses incurred as a result of a quarantine if the member or eligible dependant does not contract COVID-19
- 3. transportation expenses arranged by Canada back to a quarantine location

For assistance with travel-related medical emergencies, PSHCP members travelling in Canada or the United States can call Allianz toll-free at <u>1-800-667-2883</u>. Plan members in all other countries should call Allianz collect at <u>519-742-1342</u>.

Drug benefit

Under the PSHCP, the dispensing limit for <u>eligible prescription drugs</u> is 100 days for both acute and maintenance drugs. A pharmacist cannot dispense another 100-day supply of medication before a member has consumed two-thirds of their current supply.

Temporary relaxing of the dispensing limit for maintenance medications that allow the pharmacist to exercise professional discretion whether to dispense the medication sooner

Until April 24, 2020, the PSHCP will allow pharmacists to exercise their professional discretion to dispense maintenance prescription drugs beyond the 100-day limit. This measure will reduce trips to pharmacies. However,

please note that prescription medications which are in limited supply may not be dispensed in large quantities to ensure those individuals with urgent needs have access to essential drugs.

Maintenance prescription drugs are medications that are commonly used for the treatment of chronic (long-term) conditions. Maintenance drugs are used to help control or manage disease rather than cure it (examples include blood pressure, diabetes and cholesterol lowering medications).

The temporary removal of the dispensing limit does **not** apply to acute medications. Acute prescription drugs refer to medications that will only be used for a short period of time (examples include antibiotics, pain medications, and medications used in an emergency like a heart attack).

Medical Practitioners Benefit

Under the <u>Medical Practitioners Benefit</u>, the PSHCP covers services rendered by practitioners such as psychologists. These practitioners must be registered, licensed or certified to practice in the province or territory where they work.

To be eligible for coverage for some services, members require a prescription from a physician.

Temporary changes to accepted mental health practitioners

Until April 24, 2020, social workers will be included as mental health professionals along with psychologists for all PSHCP members and eligible dependants, regardless of where they are located.

To be covered for services by a social worker all claims must be sent by <u>mail</u> using a completed <u>PSHCP Claim Form</u> (PDF, 614 KB) for <u>Supplementary</u> <u>Coverage</u> or a <u>PSHCP Claim Form for Out-of-Country Claims</u> for <u>Comprehensive Coverage</u>. Attach supporting documentation (original

receipts, bills, invoices, physician or practitioner statements, and/or questionnaires, etc.). Mail the form to the address indicated on the form along with the supporting documentation.

Temporary changes to prescription requirements

Until April 24, 2020, a prescription from a physician is not required for mental health or physiotherapy services.

Date modified:

2021-03-16