

Benefit year January to December



**IAFF**

Summary only—see your booklets for details

## DRUGS

### Prescription drugs

- For drugs covered as per the current Alberta Blue Cross Drug Benefit List.
- 100 per cent coverage; direct bill—generic pricing applied.

### Contraceptive products

Oral contraceptives and intrauterine devices and diaphragms containing an active drug ingredient.

### Smoking cessation products

Covered up to \$400 maximum per participant per lifetime.

### Vaccines

Covered

### Allergy serums

Covered

### Sexual dysfunction products

Excluded, not covered

### Weight loss products

Excluded, not covered

### Fertility products

Excluded, not covered

### Aerochambers

Excluded, not covered

## DIABETIC PRODUCTS (FREQUENCY LIMITS APPLY)

### Supplies

- 100 per cent included; direct bill.
- Bloodletting lancet, lancing devices, blood glucose test strips, urine test strips, insulin syringes, insulin pen needles and blood ketone test.

### Glucose monitoring transmitter

- Covered eligible expenses for the rental or purchase (at the discretion of Alberta Blue Cross) and repair.
- Physician's written order required.

### Insulin infusion pump

- Covered eligible expenses for the rental or purchase (at the discretion of Alberta Blue Cross) and repair.
- Physician's written order required.

## OUT OF PROVINCE EMERGENCY TRAVEL

### Coverage

100 per cent; \$5 million (Cnd funds) per participant per incident.

### Period

Ninety days.

## HOSPITAL SERVICES

### Hospital

100 per cent coverage; semi-private; direct bill.

### Long-term care facility

100 per cent coverage up to \$1,000 maximum per participant per benefit year.

## DENTAL SERVICES

### Fee guide

Current usual and customary fee guide plus 5 per cent

### Pre-authorization amount

Services at \$1,000 and over must be pre-approved prior to being incurred.

### Basic

Coverage..... 100 per cent reimbursement  
 Maximum ..... \$2,000 combined maximum per participant per benefit year (basic and extensive combined).  
 Recall Services..... Exam, polishing, scaling, fluoride; covered; once in six months.

### Extensive

Coverage..... 50 per cent reimbursement  
 Maximum ..... \$2,000 combined maximum per participant per benefit year (basic and extensive combined).  
 Dentures, crowns, bridges, major restorative, etc.

### Orthodontics

Coverage..... 50 per cent reimbursement; for child and adult.  
 Maximum ..... \$2,000 maximum per participant per lifetime.

### Definition—adult

Participants 18 years of age and older.

### Definition—child

Participants under 18 years of age.

## HEALTH SERVICES

### Ambulance services

Covered (ground and air services).

### Accidental dental

Covered up to \$2,000 per participant per accident for repair, extraction and/or replacement of natural teeth.

### Appliances

Prosthetics..... Covered at 100 per cent; conventional artificial limbs and eyes and repairs; physician's written order required (excludes myoelectric controlled prosthesis).

Mastectomy bra..... Covered; including supporting brassiere.

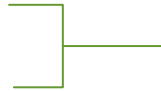
Braces..... Covered eligible expenses for custom fitted braces which incorporate a rigid support of metal or plastic and repairs; physician's written order required.

### Medical supplies

Hospital beds..... \$1,850 per lifetime maximum per participant.

### Medical durable equipment

- Dental sleep apnea appliance
- Breathing monitor (CPAP)
- Blood pressure monitor
- Blood testing monitor



Covered eligible expenses for the rental and/or purchase (at the discretion of Alberta Blue Cross) and repair. Physician's written order required.

For a full list of medical supplies covered, please refer to your benefit booklet.

### Medical aids

Casts, canes, crutches, cervical collars, splints, trusses, traction kits or walkers..... Covered; physician's written order required.

Stump socks..... Six pairs per participant per benefit year; physician's written order required.

Surgical stockings (30+mmHg)..... Two pairs per participant per benefit year; physician's written order required.

### Ileostomy, colostomy, urinary catheters and supplies

\$1,200 per participant per benefit year.

### Wigs and hairpieces

- Covered to a maximum of \$250 per lifetime.
- Physician's written order required.
- Required as a result of medical treatment.

### Home nursing

- Covered up to a \$10,000 maximum per participant per three years.
- Physician's written order required.

### Respirator equipment and supplies

- Covered for rental or purchase; physician's written order required.
- Physician's written order not required for supplies.

### Oxygen and equipment

- Covered for rental or purchase; physician's written order required.
- Physician's written order not required for supplies.

### Paramedical practitioners (per visit maximum based on usual and customary fees) [effective September 1, 2018]

Acupuncturist..... \$700 per participant per benefit year.

Audiologist..... \$700 per participant per benefit year.

Chiropractor or osteopath..... \$700 per participant per benefit year.

Dietician or nutritionist or naturopath..... 80 per cent coverage \$200 per participant per benefit year.

Massage therapy..... \$700 per participant per benefit year.

Podiatrist or chiropodist..... \$700 per participant per benefit year.

Physiotherapy or occupational therapist..... \$700 per participant per benefit year.

Psychologist or master of social work..... \$3,000 per participant per benefit year.

Speech therapist..... \$700 per participant per benefit year.

### Foot orthotics

Custom made; covered up to two pairs per participant per benefit year.

### Orthopedic shoes

- Covered up to one pair per benefit year.
- Custom made orthopedic shoes or a modified stock item (orthopedic shoes).
- Physician's written order required, please refer to booklets for details.

### Vision Care

Excluded..... Eye exams, eyeglasses, contact lenses, laser surgery, et al.

Included..... First pair of prescription eyeglasses or contact lenses following cataract surgery — once per lifetime, per participant

To submit a claim, please contact your benefits team