



Secretariat

ST/IC/1993/27/Amend.1
29 November 1993

INFORMATION CIRCULAR

To: Members of the staff at Headquarters

From: The Controller

Subject: RENEWAL OF THE HEADQUARTERS MEDICAL AND DENTAL
INSURANCE PLANS EFFECTIVE 1 JULY 1993, AND
ANNUAL ENROLMENT CAMPAIGN, 3-11 JUNE 1993*

1. The purpose of the present circular is to inform participants in the Blue Cross/Aetna plan and participants in the GHI dental plan of adjustments to the benefit provisions of the respective schemes as set out in information circular ST/IC/1993/27 dated 21 May 1993.

Blue Cross/Aetna plan

2. Under the Aetna component of the Blue Cross/Aetna plan, it was announced that, effective 1 July 1993, there would be a \$1,000 calendar year maximum relating to covered expenses for spinal disorder treatment (chiropractic treatment). In implementation of this provision, Aetna applied the limit retroactively for the calendar year commencing 1 January 1993, leading to curtailment of benefits in a number of cases in which a course of treatment had begun prior to the announcement of the measure. It has now been arranged with Aetna to commence implementation of the \$1,000 annual limit on 1 January 1994.

3. Participants in the Aetna plan who since July 1993 have submitted claims to Aetna for reimbursement of chiropractic expenses and who have either had such claim(s) rejected or have received only partial reimbursement, with the footnote indication on the Explanation of Benefits (EOB) statement that "We have paid the maximum allowed for this service", may reactivate these claims. This may be done by telephoning the Aetna claims office directly at (212) 567-6969, or by resubmitting the claim in writing to Aetna's Allentown, Pennsylvania, claims office. In either case, reference should be made to the EOB statement(s) that set out the claim rejection based on the \$1,000 calendar year limit. Aetna will reprocess and pay such claims, subject to the deductible and copayment as well

* Personnel Manual index No. 6171.

as the standard requirement that the claimed expenses fall within "reasonable and customary" cost levels for the services provided.

4. The \$1,000 calendar year limit on reimbursement for spinal disorder treatment, now to come into effect on 1 January 1994, applies to treatment rendered by any licensed medical practitioner, whether a chiropractor, physical therapist or medical doctor. The \$1,000 limit does not apply, however, to treatment rendered in the following circumstances:

- (a) While a covered individual is a full-time inpatient in a hospital;
- (b) For treatment of scoliosis (curvature of the spine);
- (c) For care of a fracture;
- (d) For pre- and post-surgical care.

In cases in which treatment goes beyond the spinal disorder treatment subject to the \$1,000 calendar year maximum, it is important that the provider of the service furnish Aetna with all relevant details of such treatment. If such information is not provided, the calendar year benefit will be limited to \$1,000.

GHI Dental plan

5. Annex IX to circular ST/IC/1993/27 sets out the maximum allowances payable under the GHI Dental "Preferred" plan. The maximum allowances for a number of dental procedures have been increased as of 1 August 1993, while for another group of procedures, the maximum allowances have been increased as of 1 October 1993. The revised schedule of allowances, which involves no change in premium or contribution rate from participants, has been implemented by GHI with effect from the above dates. Details of the procedures and revised allowances concerned are set out in the annex to the present circular.

Annex

GHI PREFERRED DENTAL PLAN: SCHEDULE OF REVISED ALLOWANCES
EFFECTIVE 1 AUGUST AND 1 OCTOBER 1993

<u>Procedure</u>	<u>Current allowance</u> \$	<u>Allowance effective 1 August 1993</u> \$
Extractions		
Single tooth	25	30
Each additional tooth	25	30
Pulpotomy		
One tooth, one canal filled	150	175
One tooth, two canals filled	200	225
Maximum per tooth, more than two canals filled	250	275
Periodontics		
Maximum per treatment (visit)	30	40
Maximum five treatments per year	150	200
Oral surgery		
Difficult extraction	47	50
Removal of impacted tooth		
Completely covered by bone	135	150
Soft tissue impaction	80	100
Partial bony impaction	100	125
Complete dentures		
Upper jaw	370	400
Lower jaw	370	400
Partial dentures		
Upper jaw	400	425
Lower jaw	400	425
Bridge pontics		
Porcelain fused to metal	190	200
Crowns as abutments		
Full cast crown with porcelain veneer and gold backing	320	375
Full cast crown with acrylic or vinyl veneer	280	325
Full cast gold crown	240	300

<u>Procedure</u>	<u>Current allowance</u> \$	<u>Allowance effective 1 August 1993</u> \$
Crowns		
Full cast crown	285	300
With acrylic veneer	310	325
With porcelain veneer	335	375

<u>Procedure</u>	<u>Current allowance</u> \$	<u>Allowance effective 1 October 1993</u> \$
Prophylaxis		
12 years of age or over	25	30
Oral examinations		
Initial oral examination	15	20
Amalgam restorations		
One surface	22	30
Two surfaces, one tooth	30	40
Three or more surfaces, one tooth	40	50
Composite filling	30	35
