



December 10, 2004

Dear Plan Administrator:

Re: Effects on Group Coverage through De-listing of OHIP Services

Recently the Ontario Government implemented two of the proposed de-listing of services announced earlier this year. Specifically, routine eye exams performed by a licenced Optometrist or Ophthalmologist were de-listed effective November 1, 2004, and Chiropractic services were de-listed effective December 1, 2004.

De-listing of Physiotherapy service paid by OHIP will become effective as of March 1, 2005. The de-listing of Physiotherapy service should have no effect on your group plan, as currently, Physiotherapy services are rarely covered by OHIP.

Optometric Exams

Effective November 1, 2004, eye exams were de-listed for citizens between the ages of 20 and 64. Seniors aged 65 and older, and citizens under the age of 20 will not be affected by this de-listing and will continue to receive OHIP coverage for eye exams once every 12 months.

Further to the original announcement regarding the de-listing of eye exams, the Ministry of Health and Long Term Care announced the following updates to the de-listing effective November 1, 2004.

Citizens aged 20 to 64 with the following medical conditions affecting their eye site will be eligible for a regular eye exam once every 12 months through OHIP:

- Diabetes mellitus
- Glaucoma
- Cataract
- Retinal disease
- Amblyopia
- Visual Field defects
- Corneal disease
- Strabismus



Prior to November 1, 2004, eye exams were only covered once every two years through OHIP for those with medical conditions affecting their eyesight.

Please note, the Optometrist may request proof of any of the aforementioned medical condition during the first visit after November 1, 2004 (i.e.) pharmacy print out of drugs prescribed for medical condition, or physician's letter.

Persons receiving assistance under the Ontario Disability Support Program, Ontario Works or the Family Benefit Program will continue to receive OHIP coverage once every two years for routine eye exams.

Chiropractic Services

Effective December 1, 2004, Chiropractic services have been de-listed through OHIP, as confirmed by the Ontario Ministry of Health and the Ontario Chiropractic Association.

By default, your group insurance plan will now become first payor for Chiropractic benefits. For example, prior to December 1, 2004, OHIP covered \$11.75 for the initial visit, and \$9.65 for each visit thereafter. The annual maximum of \$150 renewed April 1st of each year. The additional cost of the appointment was the responsibility of the employee. The \$150 OHIP maximum had to be exhausted for any Chiropractic claims to become eligible for reimbursement through a group plan. With the removal of OHIP coverage effective December 1, 2004, employees are now eligible to submit the full expense of the visit to the group plan.

Cost Containment Strategies - Chiropractic

Effectively, where your group plan may not have experienced any Chiropractic claims in the past, you may notice a dramatic increase in claims under the "Health Care Practitioner" benefits.

Examples of some recommended cost containment strategies, which may help alleviate expenses that may be incurred, are as follows:

Plan Design Alternate 1

Implement a per visit maximum for Chiropractic visits only. This will not affect the remaining Health Care Practitioner benefits. (i.e.) The group plan will reimburse a maximum of \$15 per visit, up to the over all annual max.

Plan Design Alternate 2

Decrease the over all annual maximum for Chiropractic services only (i.e.) Annual Health Care Practitioner Maximum for Chiropractic \$300. Annual maximum for all other Health Care Practitioners \$500.



Plan Design Alternate 3

Implement an annual employee deductible that must be exhausted prior to submission of Chiropractic claims to the group plan. (i.e.) Annual employee deductible of \$150.00 for Chiropractic benefits only. No employee deductible for all other Health Care Practitioners.

Please note, as each group plan is unique, the above cost containment strategies are of suggestive nature only, and do not necessarily reflect the best needs of your organization.

Addition of Child Vaccination to OHIP coverage

Beginning July 2004, the Ontario Government has phased in the new vaccination program for chicken pox, meningitis and pneumococcal disease. As of January 1, 2005, all children born in Ontario on or after January 1, 2004 will have access to the above-mentioned vaccines as part of their routine immunization. Please refer to the attached chart, which outlines the availability of these vaccines through OHIP for various age groups of children and high-risk patients.

As the Ontario Government has added the above-mentioned vaccines to OHIP coverage, group plans may experience a decrease in drug claims for those groups with employees claiming such vaccination coverage through the plan. OHIP will become first payor effective January 1, 2005.

A representative from our office will be in contact with you to discuss the specific impact of the OHIP de-listings to your organization. Should you have any questions in the interim, please do not hesitate to contact me toll free at 1-800-561-7551 or via email at vmoore@integratis.ca

Thank you for your time and attention to this matter.

Best regards,

Vanessa Moore
Group Service Consultant
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Vaccine	Who Qualifies	Availability	Diseases Prevented
Varicella	All children one year of age on or after September 1, 2004	September 2004	Chicken Pox and related complications (i.e.) bacterial skin infections
	Five year old children who have not been affected by Chicken Pox	January 2005	
	High-risk people of all ages	January 2005	
Conjugate Pneumococcal	High-risk children aged two to four years	July 2004	Invasive pneumococcal disease (i.e.) meningitis, pneumonia and infection of the bloodstream
	All children born on or after January 1, 2004	January 2005	
	High-risk children under age two	Currently Available	
Meningococcal Conjugate C	All children one year of age on or after September 1, 2004	September 2004	Invasive Meningococcal Disease (IMD), including Meningitis and meningococemia (meningococcal infection of the blood)
	Children 12 years of age, youths aged 15-19 and all high-risk people of any age	January 2005	
	People in close contact with patients who have Meningococcal disease that is treatable by vaccination.	Currently Available	
	Outbreak control measure	Currently Available	