Travelling Outside Canada

What does it mean to be “eligible” for continuous OHIP coverage?

It means that while you are away and upon your return to Canada, there will be no interruption to your insured status with OHIP.

When I travel outside of Canada, will OHIP pay the same medical expenses that are covered in Ontario?

No. If you are a resident of Ontario and you are insured under OHIP, you are entitled to very limited funding for a certain range of medical services when you are travelling outside of Canada. For this reason, you are strongly advised to purchase additional health insurance every time you leave Canada and ensure that the supplementary insurance you have purchased provides adequate coverage.

What does OHIP cover while I’m out of the country?

OHIP will pay very limited amounts for physician services and hospital/health facility services, and only if certain conditions are satisfied (refer to section below “What is not covered by OHIP?”). Under Ontario’s Health Insurance Act and regulations, physician services are subject to different conditions than hospital services.

OHIP will pay only for insured, emergency out-of-country health services that are rendered to an insured person. To qualify as an ‘emergency’ there are a number of criteria that must be satisfied. These criteria are set by regulation and include the conditions listed below that must be met:

- the treatment must be medically necessary, and
- the treatment must be performed at a licensed hospital or licensed health facility, and
- the treatment must be rendered in relation to an illness, disease, condition or injury that:

…/2
is acute and unexpected, and
arose outside of Canada, and
requires immediate treatment.

These provisions are intended and designed to provide a very limited amount of funding for the medical treatment of insured residents of Ontario if they incur an unexpected illness, disease, condition or injury while they are outside of Canada. If the illness, disease, condition or injury arises before you leave Canada, or if it is not acute or unexpected, no payment can be made.

What is not covered by OHIP?

OHIP does not cover:

• treatment that is medically unnecessary
• health services that are rendered at a facility that is not a licensed hospital or licensed health facility
• treatment that is generally accepted by the medical profession in Ontario, as being experimental, or
• for research or for part of a study
• treatment rendered for an illness, disease condition or injury that arose inside Canada
• ambulance services or transportation costs
• other services specifically set out in the regulations as uninsured or otherwise not listed as insured.

How much will OHIP pay?

• The amount that OHIP pays is set by regulation. The amount paid for out-of-country health services is very limited and usually will not be sufficient to cover the full cost of the services rendered. OHIP covers only very limited amounts for hospital, health facility and physician services. You are strongly advised to purchase additional health insurance every time you leave Canada to cover any expenses in excess of the limited funding provided by OHIP. You should also ensure that you understand the amount of protection provided by your supplementary health insurance provider because the amount of coverage may vary significantly from one insurance carrier to another. You should also check with your supplementary health insurance provider to determine if there are restrictions relating to pre-existing health conditions if these health conditions were not disclosed at the time your policy was purchased.
- For physician services, OHIP will pay the actual cost billed by the out-of-country physician(s) or the cost of the same physician service(s) in Ontario, **whichever is less**. Physician services in Ontario are usually rendered at a significantly lower cost than those billed at out-of-country health facilities. Please note that out-of-country health facilities and physicians usually bill separately.

- For outpatient emergency room services, OHIP will pay $50 Canadian (CDN) per day.

- For inpatient services, OHIP will pay $200 CDN per day. If the services are inpatient services rendered in an operating room, coronary care unit, intensive care unit, neonatal or pediatric special care unit, then OHIP will pay at the higher rate of $400 CDN per day for hospital services.

- For outpatient dialysis services, OHIP will pay $210 CDN per day.

The “per day” rates listed above cover all hospital inpatient services including, but not limited to, accommodation, meals, prescription drugs, surgically implanted devices and nursing services.

**Note:** *OHIP does not pay for ambulance services, transportation costs, or out-of-hospital food/accommodation/drugs or prescriptions.*

**Should I obtain additional insurance coverage for my absence from Canada?**

Yes. The ministry strongly recommends that you do, whether you are absent from Canada for a few minutes or for an extended time. OHIP does not insure or pay for all out-of-country medical services. Also, the amount of funding provided by OHIP will not usually cover the full cost of any health services that you do obtain outside of Canada. You should therefore, obtain supplementary health insurance from a private insurance company to provide you with additional coverage during your absence. It is also recommended that you understand the terms and conditions of the additional insurance coverage you have purchased and the implications of any pre-existing health conditions on your insurance coverage. To obtain private insurance contact a private insurance company of your choice.

**How long can I be absent from Canada and still maintain my OHIP coverage?**

You may be temporarily outside of Canada for a total of 212 days in any 12 month period and still maintain your OHIP coverage as long as your primary place of residence is still in Ontario. However, the ministry does have extended absence provisions which are outlined below.
Absences Outside Canada

You may be eligible for continuous OHIP coverage during a longer absence when you are away for one of the following reasons:

- Study outside of Canada
- Work outside of Canada
- Charitable work outside of Canada

To be eligible for continuous OHIP coverage during one of these absences, you must first have been physically present in Ontario for at least 153 days in each of the 12-month periods for 2 consecutive years immediately before the absence. Different physical presence requirements may apply if you are an Ontario student studying full-time outside of Ontario but within Canada, and you choose to continue your studies at an educational institution outside of Canada.

To confirm continuous OHIP coverage during any longer absence from Ontario, you should contact your local ServiceOntario centre before you leave the province. You will need to show a document explaining the reason for your absence as required; for example, a letter from your school, employer or sponsoring charitable organization.

Other Types of Absences

You may also be eligible for continuous OHIP coverage during an absence when you are away from Ontario for any reasons.

To be entitled to continuous OHIP coverage during your first of these absences, you must have been physically present in Ontario for at least 153 days in the 12-month periods for 2 consecutive years before the absence.

Further absences of this nature will be permitted provided you are physically present in Ontario for at least 153 days in the 12-month periods for 5 consecutive years before each subsequent absence.

You should contact your local ServiceOntario centre to confirm your eligibility for continuous OHIP coverage during any absence before you leave Ontario.

How do I ensure continuous OHIP coverage during my temporary absence from Ontario?

To confirm your continuous OHIP coverage during your temporary absence from Ontario, contact your local ServiceOntario centre before you leave Ontario in order to apply for an absence.
You may need to show a document explaining the reason for your absence; for example, a letter from your school, employer or sponsoring charitable organization. You must also continue to maintain your primary place of residence in Ontario during any such temporary absence.

**How long will OHIP provide me with continuous coverage during a temporary extended absence?**

OHIP coverage during extended absences can vary depending on the reason for the absence.

<table>
<thead>
<tr>
<th>Reason</th>
<th>Continuous OHIP Coverage</th>
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<tbody>
<tr>
<td>Study Outside Canada</td>
<td>Duration of a full-time academic program (unlimited)</td>
</tr>
<tr>
<td>Work Outside Canada</td>
<td>Five-year terms (specific residency requirements must be met for 2 years between absences)</td>
</tr>
<tr>
<td>Charitable Work Outside Canada</td>
<td>Five-year terms (specific residency requirements must be met for 2 years between absences)</td>
</tr>
<tr>
<td>Any Reason</td>
<td>Two-year terms (specific residency requirements must be met for 5 years between absences)</td>
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</table>

Extended absences are processed by the ministry for minimum periods of one year at a time.

If you are away for more than 212 days in any 12-month period but do not use the full year provided for your extended absence, the ministry will not add the remaining time to another absence. If, however, you are away from Ontario on an approved absence, you may be eligible to remain away for a longer period and still maintain continuous OHIP eligibility. For more information, contact your local ServiceOntario centre.

**Are longer absences permitted for my family?**

In most cases, your spouse and/or dependent children under 22 years of age or over 22 but a dependent due to a mental or physical disability are also provided with continuous OHIP coverage if they accompany you on your extended absence for study, work or on a charitable assignment. They should, however, notify ServiceOntario separately if their absence is for any other reason.
If I must be away frequently because of my job or studies, am I eligible for OHIP coverage?

If your job or studies require you to leave Ontario frequently and you are unable to be present for 153 days in any 12-month period, you may still be eligible for continuous OHIP coverage as a mobile worker or mobile student. To maintain your OHIP coverage, you should:

- be able to provide acceptable documents that show that your work requires frequent travel in and out of Ontario or that your full-time academic program in Ontario requires travel outside of Ontario; and
- be able to provide acceptable documents to show how you make your primary place of residence in Ontario (refer to Ontario Health Insurance Coverage Document List).

New or returning residents to Ontario who qualify as a mobile worker or mobile student are exempt from having to meet the 153-day in the first 183-day physical presence requirement immediately after establishing residence in Ontario.

How long do I have to stay in Ontario immediately after I establish residency in Ontario?

Generally, if you have moved to Ontario from outside Canada, or if you have moved from another Canadian province or territory and were not insured by that province or territory’s public health insurance plan, you must be present for 153 days in the first 183 days immediately following the date you establish residency in Ontario (i.e. you cannot be absent for more than 30 days during the first 6 months of residency in Ontario).

How do I make a claim to OHIP?

If you receive insured emergency out-of-country health services that meet the criteria established above (refer to section “When I travel outside of Canada will OHIP pay the same medical expenses that are covered in Ontario?”) you should:

- Contact your supplemental insurance provider if you have purchased additional health insurance. Some supplementary insurance providers will contact and make claims to OHIP on behalf of their clients.
- Submit a claim to your local OHIP office. All claims must be submitted to OHIP within 12 months of the out-of-country health services being rendered. To make a claim, you must submit a fully itemized bill to OHIP that includes all of the following:
  - an original, detailed statement, itemizing the fee for each service, and
• your original receipt for payment for physician accounts, and
• your original receipt for payment for health facility accounts or a completed and signed Authorization and Direction section of the Out-of-Province/Country Claims Submission form for reimbursement of the maximum daily amount (refer to section “What is not covered by OHIP?”) to the out-of-country facility, and
• your name and current address in Ontario, and
• your health number including version code if applicable, and
• a completed Out-of-Province/Country Claims Submission form (0951-84).

Note: Before submitting original documents, please make photocopies for your records.

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For More Information

Call the ServiceOntario INFOline
Toll-free: 1-866-532-3161, 416-314-5518 (Toronto only)
TTY toll-free: 1-800-387-5559
Core Hours: 8:30am - 5:00pm