

EXTENDED HEALTH BENEFIT PLAN COMPARISON

EXTENDED HEALTH	Current Vancouver	Provincial - July 1, 2018
Reimbursement	80% until \$1000 paid per family per calendar year, then 100%	80% until \$1000 paid per person per calendar year, then 100%
Annual Deductible	\$25	\$50
Lifetime Maximum	Unlimited	Unlimited

PRESCRIPTION DRUGS (BLUE RX FORMULARY)

Drug Formulary	No change	Blue Rx
Pay-direct drug card	No	Yes
Drug dispensing fees and mark-ups		Same as BC PharmaCare maximums
Lowest Cost Alternative		Applies
Per Prescription Deductible	\$0	0%
Sexual Dysfunction	No	Covered
Oral Contraceptives	Covered	Covered
Fertility Drugs	\$3,000 lifetime maximum	\$20,000 lifetime maximum

MEDICAL SERVICES AND SUPPLIES

Med-Assist	Included	Included
Out-of-province emergency medical	Covered	Covered
Ambulance	Covered	Covered
Hospital	Private/Semi-Private	Private/Semi-Private
Private duty nursing (including In-home nursing)	Covered with Doctor's note	\$20,000 per year
Hearing aids	\$500 per ear over 60 months	\$3,500 every 48 mos.
Miscellaneous services and supplies*	Covered	Covered
Orthopedic shoes	1 pair per lifetime with prescription	\$500 per year (adults and children) with prescription
Orthotics	1 pair per lifetime with prescription	\$500 per year (adults and children) with prescription

VISION CARE (INCLUDES PRESCRIPTION SUNGLASSES)

Maximum	\$200 per 24 months	\$550 per 24 months
Eye exams included with vision care maximum	Not covered	1 per 24 months *

PARAMEDICAL SERVICES

Naturopath	\$500 per year	\$900
Chiropractor	Unlimited	\$900
Massage therapist	Unlimited	\$900
Physiotherapist	Unlimited	\$900
Psychologist	\$100 per year	\$900
Acupuncturist	\$300 per year	\$900
Podiatrist/Chiropodist	\$200 per year podiatrist (no Chiropodist)	\$800
Speech therapist	\$300 per year	\$800

* Subject to Pacific Blue Cross Reasonable and Customary limits.