

# Benefits-at-a-Glance

*For regular full-time and part-time employees covered by the  
Community Agreement (2014-2019 & 2019-2022)*

Provided by the Joint Community Benefits Trust

## GROUP LIFE

**Benefit Amount:** \$50,000

- » Includes Advance Payment program for terminally ill employees

## ACCIDENTAL DEATH & DISMEMBERMENT

**Benefit Amount**

- » Death benefit is equal to the Group Life benefit amount
- » Scheduled amount paid for dismemberment or loss of use

## LONG TERM DISABILITY

- » **Benefit Amount** ..... 70% of the first \$2,800 of basic monthly earnings and 50% of the excess, with adjustments
- » **Qualification Period** ..... 5 months
- » **Own Occupation Period** .. 19 months (excluding qualification period)
- » **Any Occupation period** ... after 19 months (excluding qualification period)

## DENTAL

- » **Basic Services** (exams, fillings, etc.)..... 100%;  
Recall exam for adults and children once every 9 months
- » **Major Services** (crowns, bridges, etc.)..... 60%
- » **Orthodontic Services** (braces) ..... 60%;  
lifetime maximum \$2,750; employee must be enrolled in this dental plan for 12 months prior to becoming eligible for orthodontic coverage.

## EXTENDED HEALTH

- » **Deductible**.....\$100/calendar year
- » **Reimbursement**..... 80%
- » **Lifetime Maximum** ..... unlimited
- » **Acupuncturist** .....\$100 annual maximum\*
- » **Chiropractor**.....\$200 annual maximum\*
- » **Hearing Aids** .....\$600 every 48 months\*
- » **Massage Therapist**.....\$1,000 annual maximum\*
- » **Naturopathic Physician** .....\$200 annual maximum\*
- » **Out-of-Province/  
Out-of-Country Emergencies** ..... unlimited
- » **Physiotherapist** ..... unlimited
- » **Podiatrist** .....\$200 annual maximum\*
- » **Prescription Drugs**
  - Pay-direct claims process for prescription drugs
  - Prescription drugs listed on the BC PharmaCare Formulary; includes Prometrium
  - Cap on dispensing fees is the greater of \$10 or the maximum reimbursed by PharmaCare\*
  - Cap on drug mark-ups per Pharmacare\*
- » **Speech Therapist** .....\$100 annual maximum\*
- » **Vision Care**..... \$350/24 months\*

*\*You will be reimbursed up to 80% of the maximum after the deductible for the calendar year has been satisfied.*

PBC Member Login – You can obtain online information on your Dental and Extended Health coverage and claims through the PBC Member Login. You can access PBC Member Login through Pacific Blue Cross' website at [service.pac.bluecross.ca/member](http://service.pac.bluecross.ca/member).

*Benefits-at-a-Glance* is intended as a summary only. For more information, please refer to your benefits booklet.



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