



UNBC Group Benefits Plan

For CUPE Regular, Faculty Association, Exempt Regular, Affiliate Regular and Academic Services Regular Employees

Benefits at a Glance

Further details about your benefits, including eligibility requirements, can be found in your UNBC benefits booklet, available online at www.mysunlife.ca.

EXTENDED HEALTH	
Deductible	\$25 per individual / \$50 per family (prescription drugs)
Prescription Drugs / Pay-Direct-Drug Card* *Faculty Association Employees do not have a Pay-Direct-Drug Card	80%
Licensed Paramedical Practitioners (physiotherapist, massage therapist, chiropractor, naturopath, homeopath (combined with naturopath), and podiatrist or chiropodist)	80% up to \$500 per practitioner, per benefit year (Per visit maximum for the first 12 visits/benefit year: Affiliate and Faculty Association - \$10/visit CUPE, Exempt and Academic Services - \$30/visit No per visit maximum after the first 12 visits/benefit year)
Licensed Paramedical Practitioners (psychologist (includes social worker and clinical counsellor visit), osteopath, acupuncturist, speech therapist and audiologist)	80%, up to \$500 per practitioner, per benefit year
Licensed Provider of Orthopaedic Shoes	80%, max \$250 for 1 pair per benefit year
Licensed Provider of Orthotics	80% max \$300 for 1 pair per benefit year
Semi-private Hospital	80%
Private Duty Nursing	80% up to \$10,000 per benefit year
Services and Supplies (crutches, canes, casts, rental of hospital beds, wheelchairs, ambulance services, etc.)	80%
Hearing Aids	\$400 every 5 benefit years
Vision (for glasses and contact lenses)	 100% reimbursement up to a max of \$500/24 months from date of use for persons 19 and over 100% reimbursement up to a max of \$500/12 months from date of use for persons under age 19
Licensed Ophthalmologist/ Optometrist	Eye Exams – 80% for 1 exam every 24 months, to a maximum of \$65
Emergency Out-of-Province/Country & Travel Assistance	100% (maximum of 60 days per trip; up to a maximum of \$5,000,000 per event)





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DENTAL CARE		
Deductible	None	
Check-Up Frequency	Once every 6 months	
Complete Exam Frequency	Once every 24 months	
Preventive and periodontal scaling	Total of 2 time units per year for a child under age 13 or 10 time units per year for any other person (1 time unit = 15 minutes)	
Preventive Services	100%	
Basic Services	100%	
Major Services	100% with assessment of pre-treatment estimate	
Maximum	\$1,500 per calendar year	
Orthodontics	For dependent children only, provided treatment commences prior to reaching age 19 - 65% (up to a lifetime maximum of \$3,000 per covered person) with assessment of pre-treatment estimate	
Dental Fee Guide	Current Fee Guide in the Province of Treatment	
Proventive Services include procedures typically performed at a deptal check up, such as eral exams, cleanings and y rays		

Preventive Services include procedures typically performed at a dental check-up, such as oral exams, cleanings and x-rays.

Basic Services include fillings, extractions, root canal treatment, periodontal treatment and minor surgical procedures.

Major Services include procedures such as crowns, dentures, bridgework and major surgical procedures.

Orthodontic Services include orthodontic examinations such as diagnostic services, and fixed or removable appliances (e.g. braces).

LONG TERM DISABILITY	
Coverage	66.67% of the first \$2,500 of monthly earnings, plus 50% of the next \$3,000 of monthly earnings, plus 35% of the excess (if applicable)
Maximum Monthly Benefit	\$8,000
EMPLOYEE BASIC LIFE	
Coverage	2x annual basic earnings (rounded to the next higher \$1,000 if not already a multiple thereof)
Maximum Amount	\$500,000





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EMPLUICE	/ SPOUSAL OPTIONAL	LIFE

Coverage Units of \$10,000

Maximum Amount \$500,000

EMPLOYEE / SPOUSAL OPTIONAL CRITICAL ILLNESS

Coverage Units of \$10,000 from a minimum of \$20,000

Maximum Amount \$200,000

CHILD OPTIONAL CRITICAL ILLNESS

Coverage Units of \$5,000

Maximum Amount \$20,000

EMPLOYEE BASIC ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) - Coverage provided by Chubb

Coverage 2x annual basic earnings (rounded to the next higher \$1,000 if not already a multiple thereof)

Maximum Amount \$500,000

EMPLOYEE/FAMILY OPTIONAL ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) - Coverage provided by Chubb

Coverage Units of \$10,000

Maximum Amount \$300,000

EMPLOYEE AND FAMILY ASSISTANCE PROGRAM (EFAP)

Coverage provided by Homewood Health Counselling, Coaching and Support

BC MEDICAL SERVICES PLAN (MSP)

Provincial medical services plan provided by the BC government

Life's brighter under the sun