



# **UNBC Group Benefits Plan**

## Faculty Assoc. Employees (working beyond the TRD)

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	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 (\$10/visit for the first 12 visits/benefit year. 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)	<ul> <li>100% reimbursement up to a max of \$500/24 months from date of use for persons 19 and over</li> <li>100% reimbursement up to a max of \$500/12 months from date of use for persons under age 19</li> </ul>			
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			

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).





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			LIFE

Coverage 2x annual basic earnings

(rounded to the next higher \$1,000 if not already a multiple thereof)

Maximum Amount \$500,000

#### 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 AND FAMILY ASSISTANCE PROGRAM (EFAP)**

Coverage provided by Homewood Health Counselling, Coaching and Support