

Extended Health

Deductible

- \$100 per person per calendar year
- Does not apply to Insulin Injectors, Hearing Aids, and Vision Care (excluding Eye Exams)

Plan Maximum

- \$200,000

Reimbursement *(subject to Contract maximums)*

- 100% for Insulin Injectors, Hearing Aids, and Vision Care (excluding Eye Exams)
- 70% for all other eligible expenses up to \$1,000 in paid claims per person in a calendar year, then 100% thereafter
- 100% for out of province emergency eligible expenses within Canada only. *No coverage for emergencies outside of Canada.*

*Extended health expenses may be subject to Reasonable and Customary (R&C) limits.
Visit [PBC R&C Limits](#) for more information.*

Prescription Drugs

- Blue RX Formulary
- Subject to BC PharmaCare Lowest Cost Alternative pricing and Reference Drug Program
- Inclusive of maximum allowable Markup



Vision Care

- \$250 in a 2 calendar year period for adults
- \$150 in a 1 calendar year period for Dependent child(ren)



Eye Exams

- 1 eye exam every 2 calendar years to a maximum of \$75

Paramedical Services

- Acupuncture: \$500 per calendar year
- Chiropractor: \$500 per calendar year
- Massage Therapy: \$500 per calendar year
- Naturopath: \$500 per calendar year
- Physiotherapy: \$500 per calendar year
- Podiatrist and Chiropodist combined: \$500 per calendar year
- Psychologist, Clinical Counsellor and Online Cognitive Behavioural Therapy combined: \$500 per calendar year



Hearing Aids

- \$700 for each ear in a 4 calendar year period for adults and in a 2 calendar year period for Dependent child(ren)

Orthopaedic Shoes & Orthotics

- Combined maximum \$400 per calendar year

Insulin Injectors

- \$500 in a 5 calendar year period
- Supplies (needles, etc.) are not covered for a 5 calendar year period from the purchase date of an insulin injector



Dental Plan Options

Essential

- Plan A – Basic Services: 70%; recall exams: 1 per calendar year
- Maximum: \$1,000 each calendar year



Enhanced

- Plan A – Basic Services: 70%; recall exams: 1 per calendar year
- Plan B – Major Services: 70%
- Combined Maximum – Plan A & Plan B: \$2,000 each calendar year



This *Benefits-at-a-Glance* is for information purposes only and is a summary, not a complete description of coverage.

For full details, refer to your PBC Member Profile at [PBC Member Profile](#) and PBC MRBT microsite at pac.bluecross.ca/mrbt where you will find the *Benefit Booklet*, *Benefits Brochure*, and *Retiree Guide*.