

UVRA Member Benefit Plan
Extended Health Care (EHC) Comparison of Coverage

	PBC Extended Health for UVic Retirees	Retired Teachers of Ontario (RTO/ERO) - EHC Plan	Johnson Inc. - EHC w/ Optional Prestige Travel Plan
Plan Reimbursement	80% (1st \$5,000 per person per calendar year); 100% thereafter -eClaims submission (via CARESnet website)	80%	80% -provider eClaims submission (via TELUS Health)
Deductible	Option 1: \$1,000 per family per calendar year Option 2: \$100 per family per calendar year	None	None
Lifetime Maximum	\$100,000	N/A	\$200,000
Prescription Drugs	Covered -PharmaCare Low Cost Alternative (LCA) & Reference Drug Program (RDP) pricing	\$3,300 per calendar year -Reimbursed at 85% -Direct Pay Drug Card -Mandatory Generic Substitution pricing -Dispensing Fees: Not Covered	Option A: \$2,000 per household per calendar year Option B: \$4,000 per household per calendar year -Direct Pay Drug Card -Mandatory Generic Substitution pricing -8% mark-up limit -\$10 dispensing fee cap per script
Accidental Dental	Covered	\$1,000 per incident	\$1,000 per calendar year
Ambulance Services	Covered	Covered	Covered
Health Education	Not Covered	\$200 per calendar year	\$100 per calendar year
Hearing Aids	Not Covered	\$1,100 per 3 calendar years	\$600 per 3 calendar years
Home Care	Not Covered	[OPTIONAL HOSPITAL PLAN] -\$75 per day -up to 30 days after hospital stay	\$50/day -up to 10 days after hospital stay
Hospital Accommodation	Covered -semi-private room	[OPTIONAL HOSPITAL PLAN] -reimbursed at 95% -semi-private room	\$165/day -reimbursed at 100% -semi-private or private room
Medical Aids and Appliances	Covered (some limits apply) -Orthopedic Shoes: \$500 per calendar year -Orthotics: \$250 per calendar year	Covered (some limits apply) -Orthopedic Shoes & Orthotics: Combined \$500 per 2 calendar years	Covered (some limits apply) -Orthopedic Shoes: \$500 per 3 calendar years -Orthotics: \$300 per 3 calendar years
Paramedical Services	Combined \$300 per calendar year	Combined \$1,300 per calendar year	Combined \$1,000 per calendar year
Private Duty Nursing	\$10,000 per calendar year (\$25,000 lifetime)	\$2,000 per 2 calendar years	\$3,000 per 3 calendar years
Vision Care	Not Covered	\$400 per 2 calendar year	\$400 per 2 calendar years
Eye Examinations	Not Covered	\$150 per 2 calendar years	1 exam per 2 calendar years -up to \$100
Travel	Out-of-Province & Out-of-Country -reimbursed at 100% -included in lifetime maximum -multiple trip plan (up to 90 days per trip) (*An independent source (Canadian Snowbirds Association) recommends a minimum of \$1,000,000 of travel insurance coverage.)	Out-of-Province & Out-of-Country -reimbursed at 100% -\$2,000,000 per trip -multiple trip plan (up to 93 days per trip) -trip cancellation / interruption (\$6,000 per trip) -90-day stability clause	PRESTIGE TRAVEL PLAN [OPTIONAL ADD-ON]: Out-of-Province & Out-of-Country -reimbursed at 100% -\$2,000,000 lifetime maximum -multiple trip plan (up to 62 days per trip) -trip cancellation / interruption (\$6,000 per trip)

*This summary does not constitute a contract/certificate of insurance. For complete plan details and limits, please refer to the governing documents for each plan.