

Retiree Coverage Comparison (Sept/21)

	Basic	Enhanced
Monthly Premium	Single \$44.38 Couple/Family \$91.56	Single \$111.90 Couple/Family \$230.02
DEDUCTIBLE	\$50 per account	\$50 per account
DRUGS (legally require a prescription)	80% of 1st \$1,000 then 100%	80% of 1st \$1,000 then 100%
Formulary	Pharmicare only https://pharmacareformularysearch.gov.bc.ca/	Generic first, (name brand with note approved by PBC) Open – coverage not limited to pharmacare drugs
Pay-Direct	yes	yes
Dispensing Fee	covered	covered
Smoking cessation	not covered	not covered
Erectile dysfunction	not covered	not covered
Oral contraceptives	not covered	not covered
OUT OF PROVINCE EMERGENCY	100%	100%
OUT OF COUNTRY COVERAGE	none	none
PLAN MAXIMUM	\$50,000 in a 24 month period, after \$50,000 paid for any one illness in a 24 month period, reinstatement and entitlement to benefits considered only with evidence of good health	\$50,000 in a 24 month period, after \$50,000 paid for any one illness in a 24 month period, reinstatement and entitlement to benefits considered only with evidence of good health

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PARAMEDICAL:	80% of 1 st \$1000 then 100%	
HOSPITAL	Difference btw ward and private/semi private	Difference btw ward and private/semi private
EQUIPMENT & SUPPLIES	Yes, over \$5000 requires pre authorization	Yes, over \$5000 requires pre authorization
ACUPUNCTURE	\$250	\$350
CHIROPRACTOR	\$250	\$350
MASSEUR	\$500 combined with Physio	\$4000 combined with Physio
DIETICIAN	\$250	\$350
NATUROPATH	\$250	\$350
OSTEOPATH	\$250	\$350
PHYSIOTHERAPIST	\$500 combined with Massage	\$4000 combined with Massage
PODIATRIST	\$250	\$350
PSYCHOLOGIST	\$250	\$350
SPEECH THERAPY	\$250	\$350
ORTHOTICS and ORTHOPAEDIC SHOES	1 pair of orthotics per lifetime, 1 pair of orthopedic shoes in lifetime	\$300 per person for custom made orthotics per 24 month period, \$500 per person for orthopedic shoes per 12 month period
PRIVATE DUTY NURSING	registered nurse for an acute condition in the person's home or in a hospital in the province of residence	registered nurse for an acute condition in the person's home or in a hospital in the province of residence
HEARING AIDS	*For Dependent Children Only \$500/ 60 months	\$500/ 60 months
VISION CARE	NA	\$250 in 24 month period
EYE EXAM	MSP provides coverage for eye exams when over age 65	MSP provides coverage for eye exams when over age 65

DENTAL (Sept/21)

DENTAL	RETIREE
MONTHLY PREMIUM	Single \$39.65 Couple \$79.36 Family \$116.36
ANNUAL PREMIUM	Single \$476 Couple \$952 Family \$1,396
DEDUCTIBLE	\$0
BASIC	80%
MAJOR	50%
ANNUAL MAXIMUM	\$1,000 combined Basic and Major