



**BLUE**<sup>®</sup>  
*Choice*

HEALTH, DRUG &  
DENTAL PLANS

The  
Coverage  
that fits  
your needs

# Contents

<b>The healthy choice for you and your family</b>	<b>1</b>
<b>Make an informed decision about coverage</b>	<b>5</b>
<b>Core Health Plan</b>	<b>7</b>
Vision Care	7
Registered Therapists and Health Practitioners	7
Hospital Accommodation	7
Hospital Daily Cash Benefit	8
Local Ambulance	8
Private Duty Care Nursing	8
Out-of-Province, In-Canada Travel	9
Medical Services and Supplies	9
Disease Support Programs	9
Accidental Dental	10
Accidental Death & Dismemberment	10
Final Expense Benefit	10
Survivor Benefit	10
<b>Coverage Options</b>	<b>11</b>
Prescription Drug Options	11
Dental Options	13
<b>Healthy Blue Living</b>	<b>15</b>
<b>Blue Choice Conversion</b>	<b>16</b>
<b>Stand Alone Dental Plan</b>	<b>17</b>
<b>Annual Travel Plan</b>	<b>19</b>
<b>Definitions</b>	<b>20</b>
<b>To Purchase Your Plan</b>	<b>22</b>

This is not a contract. Actual terms and conditions are detailed in the contract issued by Pacific Blue Cross upon approval of application. Our contract will detail plan limitations and exclusions.

The content in this brochure is effective as of November, 2014, but subject to change without notice. Please check [pac.bluecross.ca](http://pac.bluecross.ca) for current details of the Blue Choice plan.



# The healthy choice for you and your family

## Health insurance protects you

BC residents care very deeply about their health. Studies show that people in BC are willing to change behaviour to protect themselves against disease and injury. Many have stopped smoking or plan to very soon, while others wouldn't consider venturing out on a bike ride without a helmet.

Health insurance protects your health. It allows you to take preventative measures to prolong your well-being and it steps in when you need to get better. If you don't have an employer-sponsored plan, Blue Choice is the right choice for you.

## The value is peace of mind

Provincial government health plans cover only your basic medical needs. Blue Choice gives you peace of mind by ensuring all aspects of your health are protected:

- It provides many health benefits not covered by your provincial health care plans, including physiotherapy, preventative dental care, and coverage for prescription drugs and medical equipment.
- It insulates you from financially devastating medical expenses.

### Walk or bike to the store

Just 30 minutes a day of exercise can lead to a healthier you, and it doesn't matter whether you're walking or biking.

## Why now?

The right time to purchase individual health coverage is when you and your family are healthy. You need to obtain coverage before any unforeseen accidents or sicknesses occur.

Furthermore, we want to remain your partner in health. Your coverage increases the longer you remain on the plan, which works well considering one's health needs generally increase as we age.

If you're healthy, you may also meet our Healthy Blue Living discount criteria. While most plans treat all members the same, we reward your healthy life choices. See page 15 for more information.



## Why Pacific Blue Cross?

- We are accessible. You can contact us by phone or e-mail. You can even visit us in person!
- We pay our claims here in BC.
- We've been here for over 70 years. We know the BC health care environment and our plans integrate with provincial health care plans.
- We are a not-for-profit organization with deep connections to the community.
- Our members enjoy many self-service features, like online claims submission.
- Our members receive a 10% discount on travel plans and get access to Blue Advantage, a savings program for Pacific Blue Cross members.



## Who is Blue Choice for?

Blue choice is the perfect choice for people not covered by an employer plan. This may include:

- Professionals
- People who are self-employed
- Students
- Retirees
- Part-time employees
- Contract workers

## One size does not fit all

The flexibility of our plan allows you to customize your coverage to suit you and your family's specific needs. Blue Choice offers a Core Health Plan plus Coverage Options such as Essential and Enhanced Drug and Dental.

Before you submit your application, get informed. See page 5 and let us help you design a plan with the kind of coverage you need to ensure a healthier future.

### Nearing retirement?

If you are on a group health plan and verging on retirement, you can apply to convert to your own Blue Choice health plan coverage with our conversion privilege.

It allows you to transfer into an individual plan without completing a medical questionnaire. It also covers all pre-existing conditions, meaning the plan will cover prescriptions you're already taking. See page 16 for more details.

# Make an informed decision about coverage

## CORE HEALTH PLAN

**BLUE**  
Choice

- Vision care
- Registered therapists
- Hospital and nursing care
- Ambulance
- Medical supplies
- Disease support programs
- Survivor benefits
- Accidental death & dismemberment

## Prescription Drug Coverage

Drugs are expensive and increasingly necessary. The average Canadian requires upwards of 10 prescriptions per year. This number increases as people age.

### Essential or Enhanced Drug Option Which is right for you?

- Before you decide about Essential or Enhanced drug coverage, see page 11. It's important to understand the difference between PharmaCare-eligible and non-PharmaCare eligible drugs.
- The Enhanced Drug Option includes a Pay Direct Drug Card for eligible applicants. Your pharmacist submits claims on your behalf.

## Dental Coverage

Regular dental exams are important. Research now shows that gum disease is linked to cardiovascular disease.

### Essential or Enhanced Dental Option Which is right for you?

- Both options provide coverage for routine maintenance of your teeth — see page 13.
- The Enhanced Dental Option also includes coverage for dentures, root canals and orthodontic treatments.

Do you qualify for our **Healthy Blue Living** program? Learn more on page 15.

If you're on the verge of **retirement** or a **change of employment**, you may be able to convert your existing coverage to our Blue Choice plan. Learn more on page 16.

# Core Health Plan

Covers 80% of these eligible expenses:

## VISION CARE

Pacific Blue Cross covers the cost of prescription lenses, frames, contact lenses and laser eye surgery up to:

0–24 months*	25–48 months	49 months +
\$75/person; \$30 for Optometrist	\$100/person; \$50 for Optometrist	\$250/person; \$70 for Optometrist

\*Benefit begins after six months on the plan.

Enjoy savings of 20–30% on purchase of eyewear through our Blue Advantage program. For more details, see page 23 or visit [www.blueadvantage.ca](http://www.blueadvantage.ca).

## REGISTERED THERAPISTS AND HEALTH PRACTITIONERS

Benefits are paid for visits to registered: physiotherapists, massage practitioners<sup>†</sup>, chiropractors, naturopaths, chiropodists, podiatrists, osteopaths, speech pathologists, psychologists, registered dietitians<sup>†</sup> and acupuncturists. Increasing benefit coverage up to:

0–24 months	25–48 months	49 months +
\$300/person per year; \$25/visit	\$400/person per year; \$25/visit	\$500/person per year; \$25/visit

<sup>†</sup> Services of a massage practitioner or registered dietician require referral by a Physician.

## HOSPITAL ACCOMMODATION

Benefits cover costs for semi-private or private hospital rooms (no age restrictions).

## HOSPITAL DAILY CASH BENEFIT

If you are confined to a hospital, we will pay you \$20 a day from the fourth day of hospitalization for up to 90 days when under age 65.

## LOCAL AMBULANCE

Covers the cost of ambulance fees in emergencies, including air ambulance.

Includes payment for Treat-No-Transport charges (when an ambulance is called to the scene of an accident or place of illness but transportation to hospital is not required).

## PRIVATE DUTY CARE NURSING

Covers the cost for private duty care nursing in your home, provided the nurse is a Registered Nurse (RN) and care begins immediately following the discharge of an acutely ill patient from a hospital, up to:

0–24 months	25–48 months	49 months +
\$1,200/person per year	\$2,500/person per year	\$5,000/person per year

Palliative care services and the services of an RN to assist with activities of daily living are not covered.



### OUT-OF-PROVINCE, IN-CANADA TRAVEL

Covers 100% of Out-of-Province within Canada medical emergency care. This includes hospital charges, physician and surgeon fees, ambulance service and prescription drugs.

### MEDICAL SERVICES AND SUPPLIES

Covers supplies and services not covered by government plans up to:

0–24 months	25–48 months	49 months +
\$1,200/person per year	\$2,500/person per year	\$5,000/person per year

Eligible expenses include:

- Crutches, casts and rigid support braces.
- Ostomy and ileostomy supplies.
- Oxygen and oxygen supplies.
- Permanent prostheses, including mastectomy forms.
- Wheelchairs or scooters up to \$5,000 (lifetime limit).
- Hospital-type beds.
- Wigs and hairpieces required as a result of medical treatment — \$500 for each person (lifetime limit).
- Hearing aids — up to \$300 every five years after a three-month waiting period.
- Custom-made orthotics — up to \$250 every two years, when prescribed by a physician, podiatrist, or chiropractor.
- Blood pressure monitors — up to \$150 every five years, upon referral by a physician.

### DISEASE SUPPORT PROGRAMS

If diagnosed with cancer, this benefit covers up to \$300 of a qualifying program in which physicians and health care practitioners assist in recovery and improving the quality of life.

### Laughter really is the best medicine

Laugh at least once a day. It stimulates the brain, makes us feel better and it's good for those around us.

### ACCIDENTAL DENTAL

Covers up to \$2,500 per person for accidental damage to natural teeth.

### ACCIDENTAL DEATH & DISMEMBERMENT

Principal sum up to \$25,000 (under the age of 70).

### FINAL EXPENSE BENEFIT

Covers up to \$3,000 for each person (after 24 months on the plan if death occurs naturally; immediate coverage for accidental death).

### SURVIVOR BENEFIT

- No contributions payable by the beneficiary for 12 months.
- No survivor benefits are available for the first 12 months following approval of application.



# Coverage Options

If you choose to add any options at a later date, they can only be applied for on the anniversary date of your existing Blue Choice coverage.

## PRESCRIPTION DRUG OPTIONS

Prescription drug coverage can be purchased as an option to your Extended Health Care plan. There are two options to choose from — the **Essential** or the **Enhanced Drug Option**. Both cover 80% of eligible costs incurred up to:

0–24 months	25–48 months	49 months +
\$1,000/person per year	\$2,000/person per year	\$5,000/person per year



## Essential Drug Option

- Covers prescription drugs that are recognized under government plans, like BC PharmaCare.
- Drugs for birth control are not covered.

## Enhanced Drug Option

- Provides the greatest amount of prescription drug coverage available on the Blue Choice plan.
- Augments the Essential Drug Option to also include drugs that are not recognized under government plans and covers birth control. See *It's about access* below.
- Offers a Pay Direct Drug Card to eligible applicants — this allows your pharmacist to submit your claim electronically. Pacific Blue Cross pays the pharmacy 80% of your prescription cost, and you pay the pharmacist the remaining 20%. There is no need to submit a paper claim.

Exclusions are the same for both options. These include smoking cessation drugs, over-the-counter drugs, fertility drugs and drugs not requiring a prescription. Dispensing fees are not covered.

## It's about access

Both drug options cover 80% of the cost of prescription drugs. So what's the difference?

The Essential Drug Option covers drugs on the BC PharmaCare list of drugs (called a formulary). To develop this list, medical experts review the alternative drugs that can treat a specific condition. They select those which have proven medical effectiveness and safety while also ensuring a cost-effective treatment.

In contrast, the Enhanced Drug Option also covers drugs not on the BC PharmaCare formulary. So when your doctor prescribes a specific drug not on the PharmaCare list, you can still be reimbursed for it.



## DENTAL OPTIONS

Dental coverage can be purchased as an option to your **Blue Choice** Extended Health Care plan, or to your Pacific Blue Cross **Group** Extended Health coverage.

All dental plans include a direct bill feature. We pay your dentist directly, so you only have to pay your portion (if applicable).

Choose either the **Essential** or **Enhanced Dental Option**. Each covers eligible expenses for Basic services after a three-month no-claims waiting period, up to the annual maximum of:

0–12 months	13–24 months	25 months +
\$500/person per year	\$750/person per year	\$1,000/person per year



## Essential Dental Option

Covers procedures involved in the routine maintenance of your teeth (Basic services). Eligible expenses are covered at 70% for the first year and 80% for subsequent years.

Eligible expenses include:

- Diagnostic expenses (oral examinations, x-rays).
- Preventive treatments (polishing, fluoride treatments).
- Restorative treatments (silver-coloured fillings and tooth-coloured fillings on front adult teeth).
- Periodontal cleaning (scaling and root planing).
- Prosthodontic services (denture services, repairs to inlays, onlays, crowns and bridges).
- Oral surgery.
- Recall visits twice per calendar year.

The plan also covers emergency treatment of the above services while temporarily outside BC or the Yukon.

## Enhanced Dental Option

Covers maintenance as well as more complex dental treatments. Augments the Essential Dental Option to include:

	0–12 mos	13–24 mos	25 mos +
Basic Services	70%	80%	80%
Endodontics*	0%	80%	80%
Major restorative services†	0%	50%	50%
Complete or partial dentures	0%	0%	50%
Orthodontics‡	0%	0%	50%

Major restorative services, dentures and orthodontics have a combined annual maximum of \$500/person.

\*e.g., root canals.

†e.g., crowns, inlays onlays, veneers, posts and fixed bridge restorations.

‡e.g., braces — children only, lifetime maximum \$1,000.

# Healthy Blue Living

## Staying healthy is worth celebrating

Only Pacific Blue Cross offers British Columbians a discount on health insurance for maintaining a healthy lifestyle. With Healthy Blue Living you receive a 10% discount off your monthly Blue Choice Health and prescription Drug benefit plan rate.

To qualify, you:

- Are a non-tobacco user.
- Fall within the normal Body Mass Index (BMI) range for your age.
- Maintain a healthy blood pressure.
- Have healthy cholesterol and blood sugar levels.

Do you and your spouse fit the above profile? Check the Healthy Discount option on your application form. We'll reward you with a discount when we review your application. Children will automatically get the discount if their parents qualify.

For more information, visit [healthyblueliving.ca](http://healthyblueliving.ca).

Note: When you renew your Blue Choice plan each year, you must still meet the healthy lifestyle conditions to continue to get the program discount.



# Blue Choice Conversion

A special feature of our health and dental plans is the conversion privilege. If your benefit coverage under a Pacific Blue Cross recognized Canadian group benefit plan ends due to retirement, downsizing or a change of employment, you can apply for coverage under the conversion privilege.

Provided you qualify, we will cover pre-existing medical conditions under the health plans and waive the waiting periods for vision care and dental or denture coverage.

## To qualify, you must:

1. Apply within 60 days of the date on which your group coverage was cancelled,
2. Have been covered under your group plan for the same benefits for at least six continuous months.

The effective date of coverage for the conversion plan will be the first of the month following the termination date of your group coverage. Any claims prior to the effective date will not be eligible for coverage. Plan options cannot be changed once they are selected at inception.

Graduated yearly limits apply. For example, maximum reimbursement for the Enhanced Drug Option for the first 24 months is \$1,000 per person per year.

## Catch cavities early

Left untreated, cavities can lead to severe toothache, infection and tooth loss (ouch!). The best way to prevent cavities is through regular dental visits and good brushing and flossing.

# Stand Alone Dental Plan

Pacific Blue Cross has designed a unique plan for individuals who want affordable dental coverage without purchasing a health plan.

This plan is available to all residents of British Columbia and the Yukon. Pacific Blue Cross will reimburse you for claims or will pay your dentist directly.

The plan has a sliding scale for reimbursement. After a three-month no-claims waiting period and a calendar year deductible of \$100, it covers up to:

0–12 months	13–24 months	25 months +
60%, \$500/person per year	70%, \$750/person per year	80%, \$1,000/person per year

Eligible dental expenses include all necessary services by a dentist, dental hygienist or denturist for the care and maintenance of teeth. Specifically, this includes:

- Diagnostic — two recall examinations every calendar year.
- X-rays — the equivalent of one full-mouth series each calendar year (complete series x-rays are limited to once every three years).
- Preventive therapy — topical fluoride applications are limited to twice every calendar year.
- Restorative dentistry — procedures to restore natural teeth to normal function using silver and tooth-coloured fillings (front adult teeth only) and stainless steel crowns.
- Scaling and root planing.
- Prosthetic repair services to reline or repair fixed or removable appliances.
- Routine extractions.

The plan does not cover the cost of major reconstruction or prostheses for replacement of missing teeth. Specifically excluded are charges for:

- Cosmetic dentistry, temporary dentistry, oral hygiene instruction, tissue grafts, drugs and medicines.
- Inlays, onlays, crowns, bridgework, dentures, implants for bridgework or dentures, root canal therapy, periodontal services and surgical procedures, except as provided in the contract.
- Services related to the functioning or structure of the jaw, jaw muscles or temporomandibular joint.
- Services and supplies for full mouth reconstruction
- Orthodontic services.
- Charges incurred as a result of a change in dentist or denturist.
- Completing dental forms or for missed appointments.
- Services begun prior to our acceptance of your application.

For more details, call us at 604 419-2200 or visit our website at [www.pac.bluecross.ca](http://www.pac.bluecross.ca).



# Annual Travel Plan

Pacific Blue Cross travel plans provide the coverage you need when you leave our beautiful country.

Our Out-of-Canada medical emergency care includes 100% coverage for hospital charges, physician and surgeon fees, ambulance service and prescription drugs up to \$5 million.

This is an annual multiple-trip plan that protects frequent travellers and their families against the high cost of emergency medical care. Coverage is available for trips varying in duration to a total of 182 days.

If needed, you may extend coverage on each trip. Just contact our office prior to the expiration of each trip duration. You can extend up to 182 days in total in a 12-month period.

Members who have Extended Health and/or Dental coverage with Pacific Blue Cross receive a 10% discount on travel plans.

For more details, visit our travel website at

[www.pac.bluecross.ca/travel](http://www.pac.bluecross.ca/travel)



## Go on a new adventure

Travel provides a break from routines. Your Blue Choice plan provides coverage for travel within Canada. If you're leaving Canadian borders, be sure to purchase a travel plan, or if you travel regularly, get an annual travel plan add-on policy too.

# Definitions

**Common-law spouse** — Only one spouse may be covered at one time under your plan. A common-law spouse is eligible for coverage under your plan after a cohabitation period of at least 12 consecutive months.

**Contract holder** — Contract holders must be 19 years of age or older. We will accept application onto our plans regardless of age; however, an adult must be designated as a contract holder if the applicant is under the age of nineteen.

**Dispensing fee** — A dispensing fee is the amount charged to you by a pharmacy to fill your prescription.

**Effective date of coverage** — The effective date of coverage is the first day of the month following approval of your application.

**Financial limit** — The maximum amount of money we will pay out during the life of the Blue Choice health plan is \$250,000 for each covered person (the lifetime limit). After we have paid you \$1,000 in a calendar year, we will pay 100% of further eligible expenses within that year.

**Medical Underwriting** — Blue Choice health plans are designed to protect you and your family against unforeseen medical expenses. Our Medical Underwriters will review your application and medical questionnaire to determine the acceptable level of coverage we are able to provide based on your family's medical situation. Once complete, we will send a written "offer" to you for your consideration and acceptance. A surcharge may be applied in order to include coverage for some or all benefits.

**Pacific Blue Cross Fee Schedule** — We pay for eligible dental and denturist services according to the fees listed in the Pacific Blue Cross Fee Schedule. This schedule lists eligible dental services, treatment frequency limits and fees. Your dentist or denturist will have a copy of the fee schedule. Any fees in excess of fee schedule amounts are your responsibility. Pacific Blue Cross either reimburses the member or pays the dentist directly.

For services performed by a dental specialist, we will pay up to 10% over the amount of the Pacific Blue Cross Fee Schedule or the current specialist fee guide, whichever is lower.

**Pre-existing medical condition** — Our health plans are designed to protect you and your family against unforeseen medical expenses. They do not cover claims associated with a pre-existing medical condition that existed prior to joining a plan, unless otherwise stated on your agreement letter.

A pre-existing condition is defined as an illness or medical condition which is under treatment, or has required consultation, diagnostic testing, or the professional services of a physician prior to the effective date of coverage under a health plan.

**Spouse and newborns** — Spouses through legal marriage and newborns can be added to your coverage if an application with appropriate payment is received within 60 days of marriage, birth or adoption.

### **We all need to be reminded**

We're not perfect. We all forget to take our medication sometimes, but for those of us with chronic conditions this can be dangerous. If you find yourself forgetting to take your medication, have a chat with your pharmacist about how you can keep your drug therapy top of mind.



## To Purchase Your Plan

- Call us at **604 419-2200** or **1 800 USE-BLUE (1 800 873-2583)**.
- Visit our website at [www.pac.bluecross.ca](http://www.pac.bluecross.ca).
- Come in and see us — our office is located at 4250 Canada Way, Burnaby, BC. We are open from 8 a.m. to 4:30 p.m., Monday to Friday.
- Speak to your Advisor.



# BLUE ADVANTAGE®

The Blue Advantage program allows Pacific Blue Cross members to save on medical, vision care and many other products and services offered by participating providers across Canada.

Simply present your Pacific Blue Cross ID card and mention the Blue Advantage program.

For more details go to

[www.blueadvantage.ca](http://www.blueadvantage.ca)



## CARESnet®

### Information on your schedule

- Your benefit and claims information, including your claim history.
- Submit eClaims.
- Download claim forms and ID cards.
- Register for direct deposit and online statements.

To activate your online access, go to [www.pac.bluecross.ca](http://www.pac.bluecross.ca)



My Good Health is an online resource centre for Pacific Blue Cross members. It features a library of health information, videos, articles, tools and calculators designed to help you live better.

With My Good Health, you can:

- Create a personalized health report
- Test your health knowledge
- Discover new prevention and treatment options
- Check your symptoms
- Learn the details of drugs prescribed to you
- Access community support

### Access My Good Health through CARESnet





## Individual Plans Sales and Support

604 419-2200

Toll-free: 1 800 USE-BLUE (1 800 873-2583)

Fax: 604 419-2199

[inhealth@pac.bluecross.ca](mailto:inhealth@pac.bluecross.ca)

### Mailing Address

PO Box 7000

Vancouver, BC V6B 4E1

### Street Address

4250 Canada Way

Burnaby, BC

[pac.bluecross.ca](http://pac.bluecross.ca)

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