

Benefits At A Glance

Effective January 1, 2024

Health & Dental Benefits Plan

Comprehensive Benefits Plan

Eligible members have access to competitively priced and comprehensive Health and Dental benefits. There are three coverage options: Bronze, Silver or Gold.

Coverage will commence 60 days immediately following your eligibility start date.

Your Benefits Package Includes:

- Basic Life
 - Dependent Life
 - Accidental Death & Dismemberment (AD&D)
 - Critical Illness
 - Extended Health Care (EHC)
 - Virtual Care - Telus Health
 - New Parent Boost
 - Employee & Family Assistance Program (EFAP)
 - Dental Care
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Eligibility

To be eligible, you must reside in Canada (excluding Quebec) and be a member or an employee of a validated studio of Visual Effects Society (VES), or a member of Visual Post Alliance (VPA), at the time of application. Your enrollment must be completed and received by **Dehoney Administrative Services** within 60 days. Coverage is billed as of your calculated effective date regardless of the date your information is received, with no exceptions. Premiums are billed in advance of the due date and due upon receipt (automatic withdrawal on the 10th of the month).

Members can modify their coverage every 24 months of active coverage, or at the time of a life event. A life event is defined as an event resulting in a change to your dependent status (single/couple/family), such as marriage, divorce or having your first child.

How to apply

To apply, simply send an email to adminservices@dehoney.com with your name, date of birth, email address, plan choice (Bronze, Silver or Gold), family status (single, couple, family), and affiliation (name of studio or member number). Make sure to complete the application **within 60 days of becoming a member or your eligibility date** to avoid medical requirements.

Extended Health Care (EHC)

PACIFIC BLUE CROSS	COVERAGE
Co-Insurance/Reimbursement	
BRONZE	80% Drug ; 80% Eye Exams; 80% Paramedical
SILVER	80% Drug ; 80% Eye Exams; 80% Paramedical
• Drug Limit	\$25,000 per calendar year
GOLD	80% Drug ; 100% Eye Exams; 100% Paramedical
• Drug Limit	\$50,000 per calendar year
Prescription Drugs (Mandatory Generic)	
Reimbursement defaults to mandatory generic pricing. If a brand name drug is prescribed and there is a generic equivalent available, the plan will only reimburse the lowest cost equivalent, which is typically a "generic" drug. You have the option to purchase the brand name drug, but you will be responsible for paying the difference in price.	
Paramedical Maximums	
BRONZE	Max. of \$1,000/insured, \$1,200/family
• Paramedical Maximum	\$300 per calendar year
SILVER	Max. of \$1,000/insured, \$1,600/family
• Paramedical Maximum	\$500 per calendar year
GOLD	Max. of \$1,000/insured, \$2,000/family
• Paramedical Maximum	\$500 per calendar year
Paramedical Practitioners	
<ul style="list-style-type: none"> • Psychologist (incl. Social Worker/Registered Clinical Counselor/Marriage & Family Therapist / Psychoanalyst/ Psychotherapist) • Speech Therapist/Audiologist • Physiotherapist & Occupational Therapist • Podiatrist/Chiropractor • Osteopath; Chiropractor; Naturopath; Massage Therapist; and Acupuncture 	
Vision Care	
BRONZE	Eye Exams \$75/24 months
SILVER	Eye Exams \$75/24 months
GOLD	Eyeglasses/Contact Lenses \$300/24 months; Eye Exams \$75/24 months
Virtual Care	
<ul style="list-style-type: none"> • In partnership with Telus Health, plan members can access a health care provider 24/7, no appointments necessary, from any mobile device, tablet or computer that has an internet connection. 	
New Parent Boost	
<ul style="list-style-type: none"> • Developed in collaboration with BC Women's Health Foundation, PBC boosts psychology (\$250 Max.) and physiotherapy (\$250 Max.) benefits for expecting and new parents. 	
Employee & Family Assistance Program (EFAP)	
<ul style="list-style-type: none"> • This is a confidential service (24/7) for members or their family members to connect and discuss a wide variety of personal, family, or work-related issues they may be struggling with. There are many issues this program can assist with; a few include: <ul style="list-style-type: none"> ○ Work/Life Balance and other workplace challenges; ○ Weight Management and Nutrition; ○ Addiction Issues; ○ Financial Guidance ○ Relationship Issues and Parenting 	

Dental Care

PACIFIC BLUE CROSS	COVERAGE
Co-Insurance/Reimbursement	
BRONZE	80% Basic Services (Recall Exams Every 9 Months)
• Annual Maximum	\$1,000 per calendar year
SILVER	80% Basic Services; 50% Major Services (Recall Exams Every 9 Months)
• Annual Maximum	\$1,500 Basic & Major Combined
GOLD	80% Basic Services; 50% Major Services (Recall Exams Every 9 Months)
• Annual Maximum	\$1,500 Basic & Major Combined

Life and AD&D Insurance

PACIFIC BLUE CROSS	COVERAGE
BRONZE	
SILVER	
GOLD	
• Benefit Maximum Life/AD&D	\$25,000
• Reduction Formula Life/AD&D	Reduces to 25% at Age 65
• Termination Life/AD&D	Earlier of Age 75 or retirement
DEPENDENT LIFE	
• Spouse	\$2,500
• Child	\$1,000
• Termination	Earlier of Age 75 or retirement

Critical Illness Insurance

PACIFIC BLUE CROSS	COVERAGE
BRONZE	
SILVER	
GOLD	
Covered conditions include Alzheimer's Disease, Deafness, Motor Neuron Disease, Aorta Surgery, Heart Attack, Dismemberment, Multiple Sclerosis, Benign Brain Tumour, Heart Valve Replacement, Occupational HIV Infection, Blindness, Paralysis, Cancer, Loss of Speech, Parkinson's Disease, Coma, Major Organ Failure, Severe Burns, Coronary Artery Bypass Surgery, Major Organ Transplant, Stroke, Loss of Independence.	
• Benefit Maximum	\$25,000
• Maximum Eligible Age	Under Age 68 to enroll
• Reduction Formula	Benefit reduces by 50% at Age 65
• Termination	Age 70

British Columbia Plan Coverage Levels and Cost

PLAN	DRUG	PARAMEDICAL	DENTAL	BC RATES
BRONZE	80% up to \$25,000	80% up to \$300 each. Combined max. of \$1,000/insured or \$1,200/family	80% Basic Services Only. Maximum of \$1,000/per calendar year	SINGLE \$133.55 COUPLE \$249.80 FAMILY \$332.20
SILVER	80% up to \$25,000	80% up to \$500 each. Combined max. of \$1,000/insured or \$1,600/family	80% Basic Services. 50% Major Services Combined Maximum of \$1,500/per calendar year	SINGLE \$212.54 COUPLE \$414.12 FAMILY \$562.36
GOLD	80% up to \$50,000	100% up to \$500 each. Combined max. of \$1,000/insured or \$2,000 family	80% Basic Services. 50% Major Services Combined Maximum of \$1,500/per calendar year	SINGLE \$234.72 COUPLE \$459.29 FAMILY \$625.04



FOR MORE INFORMATION PLEASE CONTACT:
 The Dehoney Financial Group Admin Team
adminservices@dehoney.com
 604.684.2300



Ontario Plan Coverage Levels and Cost

PLAN	DRUG	PARAMEDICAL	DENTAL	ON RATES*
BRONZE	80% up to \$25,000	80% up to \$300 each. Combined max. of \$1,000/insured or \$1,200/family	80% Basic Services Only. Maximum of \$1,000/per calendar year	SINGLE \$195.38 COUPLE \$380.38 FAMILY \$512.18
SILVER	80% up to \$25,000	80% up to \$500 each. Combined max. of \$1,000/insured or \$1,600/family	80% Basic Services. 50% Major Services Combined Maximum of \$1,500/per calendar year	SINGLE \$284.84 COUPLE \$550.71 FAMILY \$745.22
GOLD	80% up to \$50,000	100% up to \$500 each. Combined max. of \$1,000/insured or \$2,000 family	80% Basic Services. 50% Major Services Combined Maximum of \$1,500/per calendar year	SINGLE \$303.72 COUPLE \$588.50 FAMILY \$797.02

* Plus applicable taxes



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