



Important Notice!
Recent Changes in Health and Travel Insurance Plans
November 2025

This insurance guide is in the process of being updated to reflect a number of significant changes that have been made recently to the insurance plans that are available to you.

We expect the revised guide to be posted here on the Emeritus College website no later than early January, after it has been reviewed for accuracy by the insurance providers.

This edition of the guide will continue to be helpful to you, whether you have a short or longer time line to make health and travel insurance decisions. It explains insurance plan provisions that are still in effect, as well as guidance on the factors to consider in making decisions regarding your insurance.

Our recommendation: If you do not need to make imminent decisions about your health and travel insurance, you may wish to wait until the updated guide is available. However, if you need to obtain new insurance, make changes to your existing insurance, or want to know how the insurance plans are changing, please check out the information below before consulting the insurance guide.

The following changes regarding health and travel insurance are among those that have taken place since this guide was written.

The Changes

1. The insurance that had been provided by Johnson, Inc. is now provided by belairdirect.
2. The Johnson MEDOC travel insurance is now the belairdirect Travel Insurance Plan 3.
3. The Johnson Prestige travel insurance is now the belairdirect Journey travel plan.
4. The belairdirect Journey travel plan can now be purchased on its own without enrolling in the belairdirect extended health insurance. The Journey travel Insurance plan is not age-based and does not require a health questionnaire. The annual premium of \$542 (per person for the 62-day plan) is less than the cost of belairdirect Travel Insurance Plan 3 (formerly MEDOC) for most individuals above the age of 69.
5. The belairdirect Extended Health Insurance can be purchased on its own without enrolling in the belairdirect Journey travel plan.
6. You no longer have to pay an RTOERO membership fee to obtain the RTOERO insurance. (Membership in RTOERO is now automatically included for free when you purchase this insurance.)
7. RTOERO is in the process of being re-named as “Entente Education Canada”. (Insurance plan provisions are unchanged.)
8. The annual premiums for the various insurance plans are now somewhat higher than those listed in Appendix 2.
9. If you are enrolled in the UBC RSB/Sun Life insurance, as well as either the RTOERO EHC/Travel insurance plan, the belairdirect Journey travel insurance plan, or the belairdirect Travel insurance Plan 3, each of the travel plans has a “coordination of benefits” provision in relation to the UBC RSB/Sun Life plan, which makes the travel insurance **first payer** for emergency medical expenses incurred outside of B.C. or outside of Canada. This means that any claims for emergency medical expenses outside of B.C. or Canada are first submitted to the travel insurance you have and eligible claims are reimbursed from this travel insurance. This protects the lifetime maximum of \$200,000 of your UBC RSB/Sun Life insurance.



THE UNIVERSITY OF BRITISH COLUMBIA

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You can find up-to-date information about the insurance plans, including current premiums on the following links.

UBC/Sun Life:	<u>RSB Coverage</u> <u>Monthly Premium Rates for RSB</u>
belairdirect:	<u>UBC Group Benefits Plan Summary.pdf</u> <u>Travel Insurance Policy - Travel plan 3</u>
RTOERO:	<u>Extended health care plan - RTOERO</u> <u>Monthly premiums - RTOERO</u>



Choosing Extended Health and Travel Insurance to Meet Your Specific Needs

Prepared by the Benefits Committee

UBC Emeritus College

Updated May 2024

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Separate dental insurance, which is not discussed in this document, is available from UBC/Sun Life, Johnson, and RTOERO. See the websites listed in Appendix 4 for information on these dental plans.

Introduction

This guide to insurance provides information that will help you choose the extended health and travel insurance that best meets your specific needs and priorities. Links are also provided to documents and web sites where you can get additional information.

Extended Health Care [EHC] insurance assists with the cost of in-province medical expenses that are not fully covered by the provincial B.C. Medical Services Plan (MSP), such as drugs, physiotherapy, and some expenses associated with hospitalization. **Travel insurance** provides coverage for eligible travel medical expenses incurred due to an accident or sudden and unforeseen medical emergency while traveling outside of Canada or within Canada but outside of British Columbia.

Retired UBC faculty and staff (as well as individuals working past age 71) have access to four plans, referred to in this document as:

- **the UBC/Sun Life plan** (UBC RSB Extended Health Care plan)
- **the MEDOC plan** (MEDOC Travel Insurance plan)
- **the Johnson plan** (Johnson EHC and Prestige Travel plan)
- **the RTOERO plan** (RTOERO EHC plan).

(The plan names used by UBC Human Resources, Johnson, Inc., and RTOERO are in parentheses.)



UBC Human Resources offers retired faculty and staff extended health care insurance through the **UBC/Sun Life plan**, which is administered by Sun Life. This plan also provides some coverage for emergency medical expenses incurred outside B.C. or Canada.

Through the UBC Emeritus College's cooperation with Johnson, Inc., RTOERO (formerly Retired Teachers of Ontario), and CURAC (College and University Retiree Associations of Canada), three additional options are provided:

1. The **MEDOC plan is an annual Travel Insurance plan** that covers an unlimited number of trips and includes coverage for emergency medical expenses, trip cancellation and trip interruption insurance;
2. The **Johnson plan provides Extended Health Care insurance and Travel insurance**. This can be purchased either as a supplement to the UBC/Sun Life insurance or instead of it;
3. The **RTOERO plan provides Extended Health Care insurance and Travel insurance**. This can be purchased either as a supplement to the UBC/Sun Life insurance or instead of it.

In considering your insurance options, it is important to be aware that **if at any time you cancel your UBC/Sun Life Extended Health insurance, this decision is not reversible, and you will NOT be able to re-enrol in the UBC plan in the future. Similarly, if you do not enrol in the UBC/Sun Life plan within 31 days of retirement, you cannot enrol at a later date.**

As will be discussed below, you may wish to have two health insurance plans:

- the UBC/Sun Life plan, primarily for EHC; and
- a second plan to provide either additional travel insurance (e.g., the MEDOC plan) **OR** a plan (such as the Johnson or RTOERO plan) to provide additional travel insurance as well as enhanced EHC coverage to address gaps in the UBC/Sun Life EHC plan.

IMPORTANT NOTES

We have endeavored to ensure the accuracy of all information presented. However, in the event of a discrepancy, the official documents issued by UBC/Sun Life, Johnson, and RTOERO shall prevail. Members are responsible for verifying the coverage available and for making their own decisions as to which insurance is best for their specific situation. Neither the UBC Emeritus College, the University of British Columbia, nor their representatives can make recommendations for individuals.

In the interest of full disclosure, it should be noted that the UBC Emeritus College receives 2% of the gross premiums that emeriti pay to Johnson for extended health insurance and MEDOC travel insurance. The UBC Emeritus College receives 1% of the gross premiums that emeriti pay to RTOERO, and CURAC also receives 1%. The income the UBC Emeritus College receives from Johnson and RTOERO goes solely toward the expenses of the College.

Extended Health Care Insurance

1. UBC/Sun Life EHC Insurance Plan 3

Although the insurance that is offered to UBC faculty and staff upon retirement (or while still employed, if they continue to work past age 71) is not as comprehensive as the insurance provided to them as employees, it still provides very valuable coverage. **Its main strength is that it provides broad coverage of prescription drugs with no annual limit.** (The plan has a total lifetime limit for all reimbursements of \$200,000 per insured individual.) After the annual deductible of \$1,000 (per individual or couple/family) has been reached, coverage is at 80%, and after \$1,000 has been reimbursed per person per year, the insurance pays 100%.

The UBC/Sun Life plan also provides coverage for emergency medical expenses while outside Canada or outside of British Columbia. (Reimbursements for eligible emergency medical expenses are counted toward the same \$200,000 lifetime maximum.) **There is no coverage for trip cancellation or trip interruption expenses.** (It should be noted that in addition to the insurance plans discussed below, Johnson offers separate stand-alone trip cancellation and trip interruption insurance. This insurance may suit your needs if you already have adequate emergency medical travel insurance or have booked an expensive trip and want coverage that is higher than your present plan provides.)

The main gaps in the UBC/Sun Life EHC coverage are the \$1,000 annual deductible, the lack of coverage for eye glasses, contact lens, and hearing aids, and the low sub-limits for paramedical care such as physiotherapists and psychologists. The lifetime maximum of \$200,000 per insured individual for Plan 3 is a further limitation of this insurance. (Some prescription drugs are covered only if prior authorization is granted by Sun Life.)

Note: UBC/Sun Life Plan 3 for retirees is the only plan available for individuals who enrol after November 1, 2003. (Plans 1 and 2, for individuals who enrolled prior to November 1, 2003, have some different features and much lower lifetime limits of \$15,000 and \$50,000 respectively.) **The only UBC/Sun Life plan discussed in this document is Plan 3, since the vast majority of retired faculty are in this plan.**

If you have questions or would like additional information concerning the UBC/Sun Life plans, you can call the RSB (Retirement and Survivor Benefits) Administrator in UBC Human Resources at 604.822.4580 or go to
<https://hr.ubc.ca/benefits/benefit-plan-details/retirement-survivor-benefits>

2. Johnson Plan providing EHC and Travel Insurance

The Johnson plan providing Extended Health Care and Travel insurance is available to retired UBC faculty and staff (and their spouses), as well as to UBC employees working past age 71. As of mid-2021, more than 300 UBC emeriti and their spouses had this Johnson insurance.

Individuals who are currently enrolled in a group extended health care plan (either the UBC/Sun Life plan or one comparable to it) or apply with 60 days of losing group extended health care coverage can enrol in the Johnson plan without providing evidence of insurability. Those who apply outside of this eligibility period will need to fill out a medical questionnaire and **may be denied coverage.**

The main strengths of the extended health coverage of this plan are the absence of an annual deductible, broader coverage than the UBC/Sun Life plan for paramedical expenses (such as physiotherapists and psychologists), and the partial coverage for eye glasses and hearing aids. There is a \$200,000 lifetime maximum per insured person for in-province extended health care expenses. There is a separate maximum for eligible emergency medical travel insurance benefits of \$5,000,000 per insured individual, per policy year.

The most significant limitation of this EHC insurance is that there is a limit on the reimbursement for prescription drugs of either \$2,000 per household per calendar year (Plan A) or \$4,000 per household per calendar year (Plan B). (Note: For individuals who also have the UBC/Sun Life insurance, Plan A is likely to be more cost effective than Plan B, since the UBC/Sun Life plan is the first payer for prescription drugs. The Johnson plan would only provide reimbursement for eligible drug costs that have not been reimbursed by the UBC/Sun Life plan.)

If you enrol in both the UBC/Sun Life plan and the Johnson plan, the UBC/Sun Life plan is the first payer for in-province extended health expenses. Claims not fully covered by the UBC/Sun Life plan are then submitted to the Johnson plan.

(It should be noted that in addition to the coverage you have through your own EHC insurance, all residents of British Columbia have partial coverage for prescription drug costs through the province's Fair PharmaCare Program. However, **B.C. Fair PharmaCare does not cover all prescription drugs and has a relatively high annual deductible based upon family net income. More information on the B.C. Fair PharmaCare Program is presented later in this document.**)

The Johnson plan includes trip interruption and cancellation insurance reimbursing up to \$8,000 per trip for each insured individual. An unlimited number of trips, **up to 93 days per trip**, is covered. (For an additional fee, supplemental insurance is available for trips longer than 93 days.)

This travel insurance does not have a “stability clause”. Instead, it has the less restrictive requirement that a medical emergency must be “sudden and unforeseen” to be covered. This very important difference is discussed later in this insurance guide and in Appendix 1.

Additional information on this Johnson plan, which combines EHC and Travel insurance, may be found at: [UBC Emeritus College \(johnson.ca\)](http://johnson.ca)
 By phone you can reach Johnson, Inc. at 1.866.799.0000

3. RTOERO Plan providing EHC and Travel Insurance

The RTOERO plan providing Extended Health and Travel insurance is available to past and present UBC employees.

The RTOERO plan has no annual deductible, and it provides enhanced coverage compared to the Johnson plan for prescription medication, paramedical expenses (such as physiotherapists and psychologists), and it includes partial coverage for eye glasses and hearing aids.

The RTOERO Extended Health Care Plan includes a Travel plan that covers a maximum of \$10,000,000 for eligible emergency medical expenses per insured individual, per trip when travelling outside of B.C. and outside of Canada. An unlimited number of trips, **up to 93 days per trip**, is covered. Trip interruption and cancellation insurance is also included at no additional cost for up to \$6,000 per trip for each insured individual. (For an additional fee, supplemental insurance is available for trips longer than 93 days.)

If you enrol in both the UBC/Sun Life plan and the RTOERO plan, the RTOERO plan serves as the first payer for emergency medical expenses while traveling outside B.C. and outside of Canada. The UBC/Sun Life plan is the first payer for in-province extended health expenses. The remaining portion of the claims is then submitted to the RTOERO plan.

RTOERO Plan vs. the Johnson Plan

Although the Johnson and RTOERO plans have many similarities, there are significant differences as well. Depending on your financial needs and your pre-existing medical conditions, some individuals may prefer the Johnson plan and others may favour the RTOERO plan.

One advantage of the RTOERO plan is that annual premiums are less than those of the Johnson plan by approximately \$700 for an individual and \$900 for a couple. (This is due largely to the fact that there are some 100,000 RTO members and their dependents insured.) However, **it should be noted that unlike the Johnson plan, the RTOERO plan does not cover the additional cost of a semi-private (or private) hospital room. RTOERO offers optional separate insurance for a semi-private hospital room, reimbursed at 95%. The annual cost of this separate plan is approximately \$195 per person per year.** In addition, the payment of an annual RTOERO membership fee, which is currently \$73, is required. An individual, as well as their spouse, may obtain RTOERO insurance with payment of this membership fee. **(Note: The UBC/Sun Life plan covers 80% of the cost difference between a room on a general ward and a semi-private or private room.)**

Another advantage of the RTOERO plan compared to the Johnson plan is that it has higher limits for some of the extended health benefits, such as eyeglasses, hearing aids, and paramedical practitioners. For example, it pays up to a combined maximum of \$1,300 per insured person per year for physiotherapists and 16 other paramedical practitioners compared to \$1,000 in the Johnson plan.

The RTOERO plan, like the Johnson plan, has an annual limit on the reimbursement for prescription drugs. This annual limit of \$3,400 **per person** (not per household) is greater than the annual limit for the Johnson plan of \$2,000 **per household** for Plan A. (However, it is also important to note that if you also have the UBC/Sun Life insurance, the UBC/Sun Life insurance is the first-payer for prescription drugs.)

In regard to the reimbursement for prescription drugs, it should be noted that the Johnson plan reimbursement rate of 80% applies to the dispensing fee as well as the cost of the drug, while the RTOERO reimbursement rate of 85% applies only to the cost of the drug. For example, if a drug costs \$50 and the dispensing fee is \$10, the Johnson plan would reimburse \$48 (80% of \$60), while the RTOERO plan would reimburse \$42.50 (85% of \$50).

In regard to **travel insurance**, the RTOERO plan has a **stability clause** requiring that a pre-existing medical condition must be stable for 90 days prior to a trip in order to be covered. **The Johnson plan is more flexible regarding pre-existing conditions.** Instead of a stability clause, it requires that a medical emergency while traveling be **“sudden and unforeseen”** in order to be covered. This means that if your physician, after considering any pre-existing medical conditions or changes in medication, considers you fit to travel, you would generally be covered under the Johnson plan. **There is additional information on how Johnson interprets the “sudden and unforeseen” clause in the section below on Travel Insurance, as well as in Appendix 1 to this document.**

Note: Appendix 3 provides a summary table comparing the coverage of the UBC/Sun Life, Johnson, RTOERO, and MEDOC plans.

Additional information on the RTOERO plan may be found at

<https://rtoero.ca/insurance/extended-health-care-plan/>

or by calling the Service Administrator at 1.877.406.9007

To ensure you get the correct information, identify yourself as being affiliated with UBC and CURAC (College and University Retiree Associations of Canada.)

4. Combining the UBC/Sun Life Plan with either the Johnson Plan or the RTO Plan

Since the high cost of prescription drugs is one of the most significant financial risks individuals face as they age, and **the UBC/Sun Life plan (unlike the Johnson and RTO plans) does not have a separate annual limit on reimbursement for prescription drugs, this plan provides especially valuable insurance.**

Some individuals with the UBC/Sun Life plan may wish to augment their EHC coverage by also having either the Johnson Plan or the RTOERO plan. (As noted above, if at any time you cancel your UBC/Sun Life Extended Health insurance, this decision is not reversible, and you will NOT be able to re-enrol in the UBC plan at a later date.)

The option of adding the Johnson or RTOERO plan to your existing UBC/Sun Life coverage will have the greatest appeal for individuals who want more extensive travel insurance and also want to address some of the gaps in the UBC/Sun Life EHC insurance. The Johnson and RTOERO plans supplement the UBC/Sun Life EHC insurance by covering 80% (Johnson) or 85% (RTOERO) of the \$1,000 annual deductible in the UBC/Sun Life plan, by their partial payments for eye glasses and hearing aids, and their broader coverage for paramedical expenses.

The Johnson and RTOERO plans also have separate, much higher limits for emergency travel medical expenses. (These are \$5,000,000 per insured individual per policy year for the Johnson plan and \$10,000,000 per insured individual for the RTOERO plan. The total lifetime combined limit for in-province and out-of-country expenses of the UBC/Sun Life plan is \$200,000.) The Johnson and RTOERO plans also include trip cancellation and interruption insurance, which the UBC/Sun Life plan does not have.

Needless to say, the Johnson and RTOERO plans will also strongly appeal to individuals who don't presently have Extended Health Care insurance, are approaching the lifetime maximum in their existing Extended Health Care insurance, or are concerned about the high cost of their present travel insurance due to age or health status.

The premiums of the Johnson and RTOERO plans do not increase with age, unlike the premiums for stand-alone travel insurance like MEDOC. This means that by age 76, when the cost of stand-alone travel insurance such as MEDOC increases significantly, the potential savings from the Johnson or RTOERO plan become even greater.

If an individual or couple has coverage under the UBC/Sun Life plan and either the Johnson or RTOERO plan, the Johnson or RTOERO plan serves as first payer for eligible out-of-province emergency medical expenses. This means that only if an out-of-province expense is not fully covered by the Johnson or RTOERO insurance would the remainder of the claim be submitted to UBC/Sun Life for reimbursement.

For eligible in-province medical expenses, the UBC/Sun Life plan is first payer and the Johnson or RTO plan is the second payer. To take an illustrative example, if an individual enrolled in two plans has \$3,000 of eligible prescription drug costs in a given calendar year, he/she would receive reimbursement as follows:

	<u>UBC/Sun Life Pays</u>	<u>Johnson Pays</u>	OR	<u>RTOERO Pays</u>
first \$1,000	zero (due to \$1,000 deductible)	80% of \$1,000=\$800		85% of \$1,000=\$850
next \$1,250	80% of \$1,250=\$1,000	\$250		\$250
next \$750	100% of \$750=\$750	zero		zero
TOTAL	\$1,750	\$1,050		\$1,100

In addition, if an individual has \$500 of eligible physiotherapist expenses in a year, assuming that the annual deductible has already been satisfied, the UBC/Sun Life plan would pay \$250 (the annual maximum for this benefit), and the Johnson or RTOERO plans would each pay an additional \$250.

If an individual has expenses for hearing aids, the UBC/Sun Life plan would pay zero (hearing aids are not covered by this plan). The Johnson plan would pay 80% up to a maximum of \$600 for three consecutive calendar years, whereas the RTOERO plan would pay 80% up to a maximum of \$1,100 in any three consecutive years.

If an individual has prescription eye glass expenses of \$600, the UBC/Sun Life plan would pay zero (glasses and contact lens are not covered by this plan). The Johnson and RTOERO plans would pay 80% up to a maximum of \$400 in any two consecutive calendar years. The Johnson plan also covers 80% of the cost of one eye examination up to \$100 for two consecutive calendar years, whereas the RTOERO plan covers 80% of the cost of eye examinations up to \$150 in any two consecutive calendar years.

Some of the differences between the travel insurance provided by the Johnson plan, the RTOERO plan, and the MEDOC plan (which Johnson also provides) are discussed in the next section of this document.

Note: See Appendix 3 of this report for a chart that more fully compares the coverage of the UBC/Sun Life, Johnson, RTOERO, and MEDOC plans.

Travel Insurance

The UBC/Sun Life plan provides coverage for emergency medical expenses when traveling out of province and outside of Canada. However, **since the total lifetime maximum reimbursement of this insurance is only \$200,000 per insured individual for Plan 3** (and considerably less for Plans 1 and 2), **many individuals consider it prudent to buy additional travel insurance** to provide protection against depleting their extended health insurance and for possible catastrophic claims that might exceed \$200,000.

Another reason individuals may want to purchase additional travel insurance is to obtain trip cancellation and interruption coverage, since this is not part of the UBC/Sun Life plan. It should be noted that in addition to the insurance plans discussed below, Johnson offers separate stand-alone trip cancellation and trip interruption insurance. This insurance may suit your needs if you already have adequate emergency medical travel insurance or have booked an expensive trip and want coverage that is higher than your present plan provides.

Questions to Ask Yourself

Stand-alone emergency medical travel insurance is provided by the MEDOC plan and by insurance issued by numerous insurance companies, banks, and credit card companies. In comparing insurance policies, in addition to price, it is very important to consider the specifics of each policy:

1. **Who is the “first payer”?** In other words, if you have a major claim and are enrolled in a group insurance plan such as UBC/Sun Life, is the claim applied to your Sun Life extended health insurance before the additional emergency medical travel insurance you have purchased pays out any money? The travel insurance offered by BCAA, as well as most banks and credit card companies, requires that your claims must first be submitted for payment to your UBC/Sun Life plan. **The BCAA insurance only covers eligible expenses not paid by your UBC/Sun Life insurance. This means that your UBC/Sun Life extended health lifetime maximum is not protected and you are likely to receive limited benefit from BCAA travel insurance and plans like it.**
2. **Is trip cancellation and trip interruption coverage included in the insurance?**
3. **For what period of time (e.g., 90 days, 180 days) must pre-existing medical conditions be stable** for there to be coverage under the insurance?
4. Do you want to purchase **just emergency medical travel insurance, or do you also want additional in-province extended health insurance** to supplement the coverage provided by the UBC/Sun Life insurance?
5. Do you prefer a single-trip policy (if you expect to make only 1-2 trips in the next 12 months) or a multi-trip policy that will cover an unlimited number of trips (up to a specified maximum number of days per trip).

MEDOC travel insurance is an annual plan that covers an unlimited number of trips that are either 17 or 35 days’ duration or less, depending upon which option is selected. (For an additional fee, longer trips can be covered.). It includes trip cancellation and interruption insurance. If you have the MEDOC travel insurance and medical expenses, the **MEDOC insurance serves as the first payer for out-of-province emergency medical expenses**. The MEDOC insurance has a 90-day stability clause (rather than the 180-day stability period required by a number of other companies). As of May 2021, approximately 180 UBC emeriti and their spouses had MEDOC travel insurance.

Additional information about the MEDOC plan may be found at
[UBC Emeritus College \(johnson.ca\)](https://www.ubc.ca/emc/johnson)
 or by calling 1.866.606.3362

Comparing Travel Insurance Plans

MEDOC Travel Insurance vs. the Johnson and RTOERO Combined EHC/Travel Insurance Plans

There are several important differences between the MEDOC stand-alone travel insurance plan and the Johnson and RTOERO plans which combine EHC and travel insurance.

Age-based Premiums

Unlike the MEDOC plan, the premiums for the Johnson and RTOERO plans do not increase with age.

This means that at age 76 and above, when MEDOC premiums increase significantly, individuals may find it less expensive to purchase the Johnson and RTOERO plans for their travel insurance, while prior to age 76 they may find it less expensive to purchase the MEDOC plan for their travel insurance.

Medical Questionnaire



Unlike the MEDOC plan, the Johnson and RTOERO plans do not require an annual medical questionnaire, and premiums are not dependent upon an individual's health.

Pre-existing Conditions

The MEDOC and RTOERO plans have a **90-day stability clause**. This means that emergency medical expenses associated with a pre-existing medical condition **will not be covered if that condition was not stable or there was a significant change in the medication to treat the condition (potentially even including a decrease in dosage)** during the 90 days prior to departure. In contrast, the Johnson plan is less restrictive in that it replaces the stability clause with the requirement that emergency medical travel expenses be the result of a **“sudden and unforeseen”** medical emergency. **If your physician, after considering any pre-existing medical conditions or changes in medication, considers you fit to travel, you would generally be covered under the Johnson plan. However, it is important to be aware that each claim is reviewed utilizing the medical information provided by your physician at the time of the claim. If in doubt, you should ask Johnson for advice on how a possible claim is likely to be viewed before you begin your trip. Further information, and some examples of how actual inquiries have been evaluated by Johnson, is included in Appendix 1 to this document.**

Trip Duration

- The Johnson plan covers an unlimited number of trips that are **93 days' duration** or less. (For an additional fee, longer trips can be covered.) It covers emergency medical travel expenses up to \$5,000,000 per insured person per policy year, and it includes trip cancellation and interruption insurance of up to \$8,000 per insured person per trip.
- The MEDOC plan covers an unlimited number of trips that are either **17 or 35 days' duration** or less, depending upon which option is selected. (For an additional fee, longer trips can be covered.) It covers emergency medical travel expenses up to \$5,000,000 per insured person per policy year and includes trip cancellation and interruption insurance of up to \$8,000 per insured person per trip.
- The RTOERO plan covers an unlimited number of trips that are **93 days' duration** or less. (For an additional fee, longer trips can be covered.) It covers emergency medical travel expenses up to \$10,000,000 per insured person and includes trip cancellation and interruption insurance of up to \$6,000 per person per trip.

In addition to the out-of-country coverage described above, the MEDOC, and Johnson plans provide Trip Cancellation and Trip Interruption coverage for trips within your province of residence. These plans also provide this coverage, as well as emergency medical travel insurance, for trips within Canada that are outside your province of residence. Trips within Canada of unlimited duration are covered. RTOERO does not provide Trip Cancellation and Trip Interruption coverage for trips within your province of residence unless the trip is part of a connecting flight to a destination outside your province or outside of Canada.

Note: See Appendix 3 of this document for a chart that more fully compares the coverage of the UBC/Sun Life, Johnson, RTOERO, and MEDOC plans.

Information Sources for the Four Plans

The UBC/Sun Life plan:

<http://www.hr.ubc.ca/wellbeing-benefits/benefits/details/retirement-survivor-benefits/>.

You can also call the RSB Administrator in UBC Human Resources at 604.822.4580

The Johnson plan: [UBC - Johnson Inc Insurance](#)

By phone you can reach Johnson, Inc. at 1.866.799.0000

The RTOERO plan: <https://rtoero.ca/insurance/extended-health-care-plan/> By phone you can get more information by contacting the Service Administrator at 1.877.406.9007. To ensure you get the correct information, identify yourself as being affiliated with UBC and CURAC (College and University Retiree Associations of Canada.)

The MEDOC plan: [UBC - Johnson Inc Insurance.](#)
 By phone, you can get more information at 1.866.606.3362.

Cost of Insurance

The table in Appendix 2 lists the annual premiums for the UBC/Sun Life Plan 3, the MEDOC plan, the Johnson plan, and the RTOERO plan. The cost of MEDOC travel insurance depends upon age, and upon health as determined by the answers given to an annual health questionnaire. MEDOC premiums increase with age, and the rates for the “Standard” health category are considerably more expensive than those for the “Preferred” and “Optimum” categories. The cost of the UBC/Sun Life, the Johnson, and the RTOERO plans do not depend upon your age or health.

Province of BC Fair PharmaCare Plan

Fair PharmaCare is a free provincial program designed to protect residents of British Columbia from catastrophic prescription drug costs. **Many, but not all, prescription drugs are covered.** **There is an annual deductible that depends upon net family income.** Individuals (or their extended health plan) pay the full cost of drugs until the annual deductible is reached. After the annual deductible has been reached, Fair PharmaCare pays approximately 70% of the eligible costs of drugs that are covered. Once you (or your extended health insurance) have reached the Annual Family Maximum, which is also based on income, Fair PharmaCare pays 100% of the cost of prescription drugs that are covered, as well as designated medical supplies and services.

Here is **an illustrative example:** For a family with a net annual income of \$100,000, the annual deductible is \$3,000 and the Annual Family Maximum is \$4,000. Accordingly, this family (or their EHC insurance) would pay all of the first \$3,000 of eligible prescription drug costs each year. Thereafter, Fair PharmaCare would pay 70% of the eligible costs in a given calendar year between \$3,000 and \$4,000. Once the eligible prescription costs in a given calendar year have reached \$4,000, Fair PharmaCare would pay 100% of the further eligible expenses for the rest of the year. (Note: If you or your spouse were born in 1939 or earlier, Fair PharmaCare benefits are enhanced.)

All residents of BC who have either UBC/Sun Life, Johnson or RTOERO extended health insurance are required to enrol in the Fair PharmaCare Plan. Enrolment is a simple one-step process. Your annual deductible and Family Maximum are automatically recalculated each year based upon the information contained in your tax return (which Fair PharmaCare obtains from the Canadian Revenue Agency). Once you have enrolled, you are not likely to receive further information or requests from Fair PharmaCare. This means it is easy for individuals to forget whether they have enrolled. See below, for information on how you can easily check whether you have already enrolled.

To check whether you have already registered under Fair PharmaCare, go to [Fair PharmaCare | Registration Status Search \(gov.bc.ca\)](#) Where it asks for your Personal Health Number, enter the number on your B.C. medical CareCard.



For information on how Fair PharmaCare works, go to: [Fair PharmaCare Plan - Province of British Columbia \(gov.bc.ca\)](http://gov.bc.ca/fairpharmacare)

A calculator to ascertain what your Fair PharmaCare deductible is, based upon your net family income (or more precisely **your family's net income two years ago, as reported on Line 236 of your Federal income tax return**), may be found at: [Fair PharmaCare Calculator \(gov.bc.ca\)](http://gov.bc.ca/fairpharmacarecalculator)

For more information on what expenses Fair PharmaCare does and does not cover, go to: [What PharmaCare Covers - Province of British Columbia \(gov.bc.ca\)](http://gov.bc.ca/whatpharmacarecovers)

For more specific information on what prescription drugs are and are not covered by Fair PharmaCare, go to: [Welcome to the BC PharmaCare Formulary Search \(gov.bc.ca\)](http://gov.bc.ca/welcome-to-the-bc-pharmacare-formulary-search)

B.C. MEDICAL SERVICES PLAN (MSP)

The B.C. Medical Services Plan (MSP) pays for required medical services within the province. It does not cover the cost of prescription drugs. Individuals no longer pay a monthly premium for this program.

If you are temporarily absent from B.C., MSP will help pay for unexpected medical services provided the services are medically required, rendered by a licensed physician, and normally insured by MSP.

Reimbursement for physician services will not exceed the amount payable had the same services been performed in B.C.

Although the Province does provide some coverage for emergency hospital care when you travel outside Canada, coverage is limited to a maximum of \$75 per day (Canadian funds). In some countries, this may be thousands of dollars per day less than the amount charged. More detailed information may be found at [leavingbc_brochure_web.pdf \(gov.bc.ca\)](http://gov.bc.ca/leavingbc_brochure_web.pdf)

UBC/Sun Life Extended Health Care Insurance: Plans 1, 2, and 3

There are three different UBC/Sun Life Extended Health Care insurance plans for retirees currently in effect: Plans 1, 2, and 3. The particular plan you are in depends upon when you retired. Plans 1 and 2 are for UBC retirees who retired and enrolled prior to November 1, 2003. **Plan 3 is the only plan available for individuals who enrolled after November 1, 2003.** The lifetime limits on benefits paid under each of these plans are: Plan 1, \$15,000; Plan 2, \$50,000; and Plan 3, \$200,000. To ascertain what benefits you have and what premiums you pay, you need to know which plan you are in. **The only UBC/Sun Life plan discussed in this document is Plan 3, since the vast majority of retired faculty are in this plan.**

For general information on UBC Retirement and Survivor Benefits and what it includes, go to: <http://www.hr.ubc.ca/wellbeing-benefits/benefits/details/retirement-survivor-benefits/>.

More detailed information on UBC/Sun Life Plans 1, 2, and 3 may be found at: <http://www.hr.ubc.ca/benefits/files/020605-RSB-Sun-Life-Contract-Booklet.pdf>.

To find out how much of your lifetime maximum remains, call Sun Life at 1.800.361.6212 and inform them you are a member of plan **020605** and provide them with your name and date of birth.

If you have questions or would like additional information concerning the UBC/Sun Life plans, you can call the RSB Administrator in UBC Human Resources at 604.822.4580. The RSB Administrator can also confirm which UBC/Sun Life plan you are enrolled in.

Travel Insurance and COVID-19

Travel insurance coverage for illness associated with COVID-19 has changed over time as the pandemic has developed. **The information below was last updated in November 2022.**

Before making travel plans, and while traveling, you should consult the websites of your travel insurance provider, as well as Government of Canada Travel Advisories ([Travel Advice and Advisories - Travel.gc.ca](https://travel.gc.ca)). Some borders could close as the COVID-19 situation changes, and you could have your coverage terminate while still abroad. Return transportation options, and availability of medical care may become very limited outside Canada.

At the time this insurance guide was updated (November 2022), Sun Life, Johnson, and RTOERO were covering emergency medical expenses while traveling that were due to COVID-19. In addition, Johnson and RTOERO provide coverage if you need to cancel, interrupt or delay a trip because you or your travelling companion has a positive COVID-19 test result or become ill with COVID-19 or die due to COVID-19. (The UBC/Sun Life insurance does not include coverage for trip cancellation or delays.)

UBC/Sun Life Insurance

You should make sure your entire trip falls within the 90-day per trip limit of this insurance. Coverage won't be extended beyond 90 days, even if you experience restrictions while travelling home.

Sun Life won't cover the cost of COVID-19 tests under its travel insurance because they don't consider it treatment for a medical emergency.

This insurance does not provide any reimbursement for trip cancellation, interruption or delay. If you miss a flight because you can't get a test for COVID-19 before departure, the cost of the missed flight or other related expenses is not covered.

For additional, up-to-date information, go to <https://www.sunlife.ca/workplace/en/group-benefits/focus-updates/over-50-employees/> To contact Sun Life by phone, call 1.800.361.6212. Indicate you are a member of plan 020605.

Johnson Insurance

Johnson, Inc. provides Prestige Travel Insurance as an optional addition to its Extended Health Insurance. It also offers MEDOC Travel Insurance which does not include Extended Health Insurance.

In addition, at the present time (November 2022), Trip cancellation, interruption, and delay benefits now include a new COVID-19 related covered event. This benefit will provide you with coverage if you or your travelling companion's death, illness or positive test result as a result of contracting COVID-19 prevents you from traveling on your date of departure or date of return, or causes you to interrupt your trip. This includes trip delay benefits should the COVID-19 illness or positive test result require you to quarantine and incur additional meal and accommodations expenses. For all other circumstances, your policy does not provide coverage for a trip cancellation, interruption or delay if it is directly or indirectly related to COVID-19.



The Emergency Medical Insurance benefits of the Prestige Travel Insurance provides coverage for eligible emergencies related to COVID-19, even while a Canadian travel advisory related to COVID-19 is in effect.

For additional, up-to-date information see www.johnson.ca/coronavirus. The FAQ addresses important, frequently asked questions.

To contact Johnson by phone, call 1.866.606.3362.

RTOERO Insurance

The RTOERO Extended Health Care Plan covers emergency medical travel expenses. It also provides Trip Cancellation and Trip Interruption coverage. This includes coverage for COVID-19 emergency medical expenses while traveling out of province and out of country. This coverage applies even during the government's advisory to avoid travel outside of Canada due to the pandemic.

In addition, you are covered if you need to cancel, interrupt or delay a trip because you or your travelling companion have a positive COVID-19 test result or become ill with COVID-19 or die due to COVID-19.

For additional, up-to-date information see rtoero.ca/prepared. The FAQ addresses important, frequently asked questions. Alternatively, you can also contact RTOERO Service Administrator by calling 1.877.406.9007.

Concluding Summary:

A Step-By-Step Approach to Choosing the Insurance that Best Meets Your Specific Needs

A Starting Point

One way to structure your decision-making about insurance is to ask yourself sequentially the following questions:

1. Do I want to enrol in the UBC/Sun Life plan?
2. Do I want additional travel insurance?
3. If I want additional travel insurance, should I purchase travel insurance only or should I purchase a plan that provides additional EHC insurance as well?
 - A. **If I want additional travel insurance only**, do I prefer the MEDOC plan or insurance provided by another entity, such as a bank, a credit card company, or BCAA?
 - OR**
 - B. **If I want additional travel and EHC insurance**, do I prefer the Johnson plan or the RTOERO plan?

Specific Decisions

1. Deciding on Whether to Enrol in the UBC/Sun Life Plan

A decision on enrolling in the UBC/Sun Life plan should be made prior to retirement. If you do not enrol in the UBC/Sun Life insurance within 31 days of retirement, you cannot enrol at a later date. If at any time you cancel your UBC/Sun Life Extended



Health insurance, this decision is not reversible, and you will NOT be able to re-enrol in the UBC plan in the future.

The high cost of prescription drugs is one of the most significant financial risks individuals face as they age. **The UBC/Sun Life plan, unlike the Johnson and RTOERO plans, does not have an annual limit on reimbursement for prescription drugs** (though there is the lifetime limit of \$200,000 on reimbursements). The UBC/Sun life plan also includes coverage of a wide range of medical expenses. It is less expensive than other extended health insurance plans. For these reasons, many individuals will choose this insurance.

If you have access to a comparable EHC plan (e.g., through your spouse's employer), you should carefully compare the coverage of this plan to the UBC/Sun Life plan. You should also consider what happens to your coverage should your spouse pre-decease you or should the insurance provider stop covering spouses. (Provisions for coverage in the event of the dissolution of marriage might also be considered.)

2. Deciding on Travel Insurance

Most individuals who travel will also want travel insurance. If you are injured or have a major illness while traveling, this can be very costly. You also may want trip cancellation and interruption insurance, in case accident or illness forces you to alter your travel plans.

The UBC/Sun Life plan provides coverage for emergency medical expenses while you are out of province or out of country. However, since the UBC/Sun Life plan has a lifetime limit of \$200,000, even with this insurance, many individuals will want additional travel insurance to safeguard against the depletion of the UBC/Sun Life insurance and to obtain the trip cancellation and interruption insurance it lacks.

The MEDOC plan provides travel insurance, while the Johnson and RTOERO plans provide both travel and EHC insurance.

3. Deciding on Stand-alone Travel Insurance vs. Insurance providing Travel and EHC Coverage

If you decide you want travel insurance, you next need to decide whether you only want travel insurance or would prefer a plan that provides travel and EHC coverage.

Factors to consider in making this decision include: the relative cost and expected benefit from different plans, your existing travel and EHC insurance, your age, your health, how you feel about completing an annual health questionnaire, and how restrictive you feel a stability clause for pre-existing conditions would be compared to a clause requiring that a medical emergency while travelling be "sudden and unforeseen".

The cost of stand-alone travel insurance depends upon your age and health. Younger retirees (e.g., below the age of 76) who are in good health may find that stand-alone travel insurance is less costly than a plan combining EHC and travel insurance. Conversely, **individuals over the age of 75 who have pre-existing conditions may find that the net cost (i.e., premiums less expected reimbursements) for a plan that provides EHC and travel insurance is less than the net cost of stand-alone travel insurance.**

- **Comparing MEDOC Travel Insurance with other Stand-alone Travel Insurance Plans**

This document discusses key features that you should consider when comparing stand-alone travel insurance plans such as MEDOC with the travel insurance offered by banks, credit card companies, and other entities (such as BCAA). As explained elsewhere in this document, **it is of vital importance that you ascertain whether your travel insurance plan or your EHC plan would be the first payer in the event of a claim.** Most stand-alone travel insurance plans (such as BCAA travel insurance) stipulate that if you have an EHC

plan with a lifetime maximum above \$100,000 (or in some cases above \$50,000), the EHC plan, and not the travel insurance, is the first-payer. However, **if you have the UBC/Sun Life insurance and MEDOC travel insurance, the MEDOC travel insurance serves as the first-payer for emergency out-of-province medical expenses. Moreover, the MEDOC travel insurance has a 90-day stability clause (rather than the 180-day stability period required by a number of other companies).**

- **Comparing the Johnson and RTOERO Plans**

The Johnson and RTOERO plans both provide EHC and travel insurance. If you have the UBC/sun Life EHC plan and either the Johnson or RTOERO plans, the Johnson or RTOERO plan serves as the first payer for emergency out-of-province medical expenses.

The main advantages of the RTOERO plan are that it provides more generous benefits and it costs less than the Johnson plan. Premiums are approximately \$600 less for an individual and \$800 less for a couple. (Hospitalization coverage is included in the Johnson plan. RTOERO provides hospitalization coverage through an optional plan costing approximately \$180 per person per year. In addition, the payment of an annual RTOERO membership fee, which is currently \$73, is required. An individual, as well as their spouse, may obtain RTOERO insurance with payment of this membership fee.)

As discussed earlier in this document, the main advantage of the travel insurance in the Johnson plan is that it replaces a 90-day stability clause with the more flexible provision that a medical emergency be “sudden and unforeseen”. Some individuals may feel that this added flexibility regarding travel with pre-existing conditions is worth the extra cost, while others may feel it is not worth the additional expense. **(Also see Appendix 1 for a discussion of how the “sudden and unforeseen” provision of the Johnson insurance is interpreted.)**

Appendix 1

Interpreting the Meaning of the “Sudden and Unforeseen” Clause

As discussed above, in the section on “Travel Insurance,” the Johnson plan deals with pre-existing conditions differently than the MEDOC or RTOERO plans. The Johnson plan is less restrictive in that it replaces the 90-day stability clause of MEDOC and RTOERO with the requirement that emergency medical travel expenses be the result of a “sudden and unforeseen” medical emergency.

To help clarify what is meant by “sudden and unforeseen,” Johnson, Inc. has provided the following explanation, along with some examples of how actual inquiries and cases have been evaluated by the underwriter DFS. Although the underwriter of the Prestige Travel Plan portion of the Johnson insurance plan has recently been changed from DFS to RSA, no significant changes are expected in how “sudden and unforeseen” will be interpreted. **(As is noted in the section on “Travel Insurance,” if you are in doubt before you travel, you should ask Johnson for advice on how a possible claim is likely to be viewed.)**

Explanation and Examples Provided by Johnson, Inc.

The Plan presumes you are in good health and medically fit to travel. Although there is no specific pre-existing condition clause in the policy, emergencies must be sudden and unforeseen. For example, if your doctor advises you not to travel, you would not be covered for that condition as it is not sudden and unforeseen. Because there is no stability period within the plan, a change in medication or treatment does not necessarily dictate that coverage would be restricted.

There are no guarantees of coverage because each case is reviewed on its own, given the medical information provided by the insured's physician at the time of claim. However, in general terms, this Plan is the most comprehensive Travel coverage in the voluntary retiree market, with no pre-existing condition limitation. The fact that emergencies must be sudden and unforeseen means just that. However, it is case specific. As a minimum, the insured must be medically fit for travel and must not have been advised by his/her physician not to travel for a medical condition.

Definition of Medical Emergency (Extracted from the Certificate of Insurance)

“Medical emergency” (as used with regard to emergency medical travel coverage Eligible Expenses under the Extended Health Care Plan Benefits section) shall mean an emergency service rendered for the sudden onset of a medical condition, manifesting itself by acute symptoms of sufficient severity that the absence of immediate medical attention could result in:

- 1. permanently placing the individual's health in jeopardy;*
- 2. serious impairment and dysfunction of any bodily organ or part; or*
- 3. other serious medical consequence.*

For your reference, here are some real life examples of cases which have been reviewed and/or considered under the sudden and unforeseen provision. As you can see, each is decided upon based on its own unique set of circumstances. This is a key part of the medical history review done at time of claim.



Examples of How Past Claims have Been Handled

Situation Example #1 – Prior to Departure Inquiry on Known Condition:

Question: *My condition is known as "radiation proctitis", which causes blood loss, and transfusion when the hemoglobin goes down. I have had this condition since Feb 2010. It is now being treated (since July 2010) with a procedure called "argon plasma coagulation" - a form of laser which cauterizes the colon tissue to stop the bleeding. The condition is as a result of radiation, which I received for cervical cancer a year and a half ago, and which has been successfully arrested. The radiation caused damage to the tissue and is being treated by the above procedure, which is well known and has a good success rate.*

Would I be covered should an incident occur, which is directly related to my pre-existing condition in the U.S.A.? My condition is considered stable via these treatments, which I receive about once a month now, and it should be more wide-spread as time marches on.

Answer: *The condition would not be considered sudden and unforeseen, and therefore not covered.*

Situation Example #2 – Prior to Departure Inquiry on Known Condition:

Question: *Member was diagnosed 3 weeks ago with a 3.9cm abdominal aortic aneurysm, but was told by the doctor that he is "stable" and would require regular 6 months follow up check. If he were to travel and have a claim related to this condition, would it be considered sudden and unforeseen, or would the claim be denied?*

Answer: *With the information provided, Sigma Assistel considers that emergency health care related to this medical condition occurring while travelling would be considered as sudden and unforeseen. This decision was based on the fact that the patient's treating physician stated the medical condition as stable.*

*** Although; emergency health care related to this condition would be covered, the regular follow up (every 6 months) would not be considered as sudden and unforeseen and then would not be covered under travel insurance.*

Situation Example #3 – Prior to Departure Inquiry on Known Condition:

Question: *Member called to advise has digestive disease condition of the large colon and would like to confirm if a related emergency while travelling would be considered unforeseen. Diagnosis is diverticulitis.*

Answer: *In order to find out if this medical condition would be considered as unforeseen, we would need to obtain the medical report of the past episode(s). At this point, we can't confirm if it would be considered as unforeseen. If (we) are able to obtain the medical report for the first and any recent episodes of diverticulitis, we would then be able to determine if it was sudden and unforeseen.*

Situation Example #4 – Determination of Not Sudden & Unforeseen at time of Claim:

Question: *The member is advising she was told by her physician that she was okay to travel and that it was not anticipated that she would have continuing problems, otherwise she would not have travelled. She advises that she sought medical attention while travelling because the sudden and severe pain she was having in her head made her concerned that it was a brain aneurysm or something such as that and that her pain on this occurrence was very different from what she was having prior to her departure. The member recognizes that*



any routine testing and follow up would not be covered, however she does see this particular incident as sudden and unforeseen. She also advised she is willing to share the cost of this claim.

Answer: *The patient's consultation was due to severe headaches and the doctor requested an MRI. Sigma advised the insured that the MRI required authorization from their medical team. The hospital contacted Sigma to request authorization of a CT Scan and Sigma explained that they needed to obtain medical records and subsequently, authorisation from their medical team.*

Medical records and history from the member's home physician were received and evaluated by Sigma's medical staff. It was determined the condition was not sudden and unforeseen, as the patient had consulted for the same symptoms only days prior to her departure. The patient's physician had also considered requesting a CT scan at that time. According to the information obtained from the members' family doctor, she had seen a doctor just before her travel for a "history of headaches for some weeks". The doctor wrote in his file note that the patient "may need a CT" "if significant worsening in any way". During her travel, the member had the same symptoms (i.e. headaches).

Therefore, our decision is based on the fact that this is not a sudden and unexpected illness which takes place during an insured trip, since the condition was known before departure.

It should be remembered that trip cancellation coverage is built into the Johnson plan, so if an individual is not fit to travel due to a medical condition, they should be looking into this policy provision and not take the risk of travelling when unfit to do so.

Appendix 2: Annual Premiums of the Plans

		Individual	Couple
UBC/Sun Life Plan 3 (rates for 2024)		\$1,173	\$2,346
MEDOC Plan 35-day maximum per trip Depends upon age and health (rates through August 2024)			
Day 1 for out-of-country coverage is the day you leave Canada	Ages 65-69		
	Optimum	\$223	\$446
	Preferred	\$243	\$486
Coverage for trips longer than 35 days is available for an extra fee	Standard	\$486	\$972
	Ages 70-75		
	Optimum	\$470	\$940
	Preferred	\$523	\$1,046
	Standard	\$797	\$1,594
	Ages 76-80		
	Optimum	\$818	\$1,636
	Preferred	\$914	\$1,828
	Standard	\$1,313	\$2,626
	Ages 81 & over		
	Optimum	\$1,594	\$3,188
	Preferred	\$1,776	\$3,552
	Standard	\$2,341	\$4,682
Johnson EHC Plan with Travel 93-day maximum per trip (rates through August 2024)			
Coverage for 62-day maximum per trip is available for a reduced premium	Plan A (\$2,000 per household per calendar year maximum for drugs)	\$2,016	\$3,588
	Plan B (\$4,000 per household per calendar year maximum for drugs)	\$3,096	\$5,400
RTOERO EHC Plan with Travel 93-day maximum per trip (rates for 2024)	Day 1 for out-of- country coverage is the day you leave your home province.	\$1,324	\$2,649



Appendix 3

Highlights of the UBC/Sun Life, Johnson, RTOERO, and MEDOC Plans

The chart on the pages that follow, which summarizes the UBC/Sun Life, Johnson, RTOERO, and MEDOC plans, is for information purposes only. While we have endeavored to ensure the chart's accuracy, in the event of a discrepancy, the official documents issued by UBC/Sun Life, Johnson, and RTOERO shall prevail. Members are responsible for verifying the coverage available and for making their own decisions as to which insurance is best for their specific situation. Neither the UBC Emeritus College, the University of British Columbia, nor their representatives can make recommendations for individuals.

In considering your insurance options, it is important to be aware that **if at any time you cancel your UBC/Sun Life Extended Health insurance, this decision is not reversible, and you will NOT be able to re-enrol in the UBC plan in the future. Similarly, if you do not enrol in the UBC/Sun Life insurance within 31 days of retirement, you cannot enrol at a later date.**

As explained in this document, some individuals may wish to have the UBC/Sun Life plan as well as either the Johnson or RTOERO plan.

MEDOC Travel Insurance, which is also provided by Johnson, is available for those who want stand-alone emergency medical travel insurance (with trip cancellation and trip interruption insurance) without additional EHC insurance.

Notes: The coverage listed in the chart is per insured person unless otherwise indicated.

Johnson also offers separate stand-alone trip cancellation and trip interruption insurance. This insurance may suit your needs if you already have adequate emergency medical travel insurance or have booked an expensive trip and want coverage that is higher than your present plan provides.)

To be eligible for RTOERO insurance, it is necessary to be a member of RTOERO. The annual membership fee (which is currently \$73) enables the member and their spouse to obtain insurance.

Appendix 3: Comparison of Major Provisions of the Plans

Part 1: In-Province Extended Health Care Coverage

Note: MEDOC Travel insurance covers emergency medical expenses while traveling out of province and out of country. It does not cover medical expenses incurred in British Columbia. (However, MEDOC and Johnson EHC/Travel do cover trip cancellation and interruption for in-province trips.)

See part 2 of this Appendix for a comparison of emergency out-of-province coverage.

All benefits are per insured individual unless otherwise stated.

Benefit	UBC/Sun Life Plan 3	Johnson EHC/Travel	RTOERO EHC/Travel
Annual Deductible	\$1,000 per year per single person or couple/family	None	None
Prescription Drug Card (pharmacy paid directly)	Yes	Yes	Yes



Benefit	UBC/Sun Life Plan 3	Johnson EHC/Travel	RTOERO EHC/Travel
Reimbursement Rate for Eligible Expenses	After the \$1,000 has been reached, coverage is 80%. After \$1,000 has been reimbursed per person per year, coverage is 100%.	80%	85% for eligible prescription drugs (dispensing fees are not covered) 80% for other benefits.
EHC Lifetime Maximum	\$200,000 per insured person (includes emergency out-of-province medical expenses)	\$200,000 per insured person (Separate limit of \$5,000,000 per insured person per policy year for emergency out-of-province medical expenses)	No lifetime EHC maximum. However, there is an annual maximum for prescription drugs and there is no coverage for in-province hospitalization under the ECH plan.
Annual Maximum for Eligible Prescription Drugs	<u>None</u>	Annual maximum <u>per household</u> per calendar year of \$2,000 (for Plan A) or \$4,000 (for Plan B)	Annual maximum <u>per person</u> of \$3,400.
Eligible Drugs	Eligible prescription drugs. Pre-authorization required for some drugs. (Vaccines and erectile dysfunction drugs are not covered .)	Eligible prescription drugs subject to Mandatory Generic Substitution Pricing. Pre-authorization required for some drugs. (Erectile dysfunction drugs are not covered . Vaccine coverage is \$100/year.)	Eligible prescription drugs. Pre-authorization required for some drugs. (Vaccines and erectile dysfunction drugs are covered as part of the annual maximum.)
Hearing Aids	None (except for insured children)	\$600 per 3 consecutive calendar years.	\$1,100 per 3 consecutive calendar years.
Vision Care	None	\$400 per 2 calendar years for eyeglasses/contact lenses. \$100 for 1 eye exam per two calendar years.	\$400 per 2 consecutive years for eyeglasses/contact lenses. \$150 for multiple eye exams per two consecutive years.
Registered/Licensed Psychologists	\$100 per calendar year.	Included under 'Paramedical Benefit' for a combined maximum benefit totaling \$1,000 per calendar year.	Included under 'Paramedical Benefit' for a combined maximum benefit totaling \$1,300 per year.
Physiotherapists and Massage Therapists	Combined maximum of \$250 per calendar year.	Included under 'Paramedical Benefit' totaling \$1,000 per calendar year.	Included under 'Paramedical Benefit' for a combined maximum benefit



Benefit	UBC/Sun Life Plan 3	Johnson EHC/Travel	RTOERO EHC/Travel
			totaling \$1,300 per year.
In-Province Hospital Accommodation	Covers 80% of the cost difference between a room on a general ward and a semi-private or private room.	Covers 100% of a private or semi-private room up to \$165/day.	Not covered under EHC plan. Separate hospitalization insurance available for \$180 per person per year.
Private Duty Nursing	Up to 720 hours per person per benefit year (in hospital only).	\$3,000 per three calendar years (out of hospital only).	\$2,000 in 2 consecutive calendar years (only for out of hospital services).
Home Care	Not covered.	\$50/day, up to 10 days, following a hospital stay.	Not covered under EHC Plan; coverage part of hospitalization plan.
Eligibility to Apply for Insurance	Retirement from employment at UBC at age 55 or older; faculty and staff at UBC working past age 71.	Individuals eligible for membership in the UBC Emeritus College; retired UBC faculty and staff; UBC faculty and staff working past age 71. Guaranteed acceptance when enrolling from a group insurance plan.	Past or present employment by a Canadian university, college, or school board. Guaranteed acceptance when enrolling from a group insurance plan.

Appendix 3

Part 2: Emergency Out-of-Province and Out-of-Country Coverage

Benefit	UBC/Sun Life Plan 3	Johnson EHC/Travel	RTOERO EHC/Travel	MEDOC Travel
Maximum	Total lifetime maximum of \$200,000 per insured person for in-province and out-of-province/country medical expenses.	Maximum of \$5,000,000 per insured person per policy year for 'sudden and unforeseen' emergency medical travel expenses.	\$10,000,000 per insured person.	\$5,000,000 per insured person, per policy year for emergency medical benefits.
Maximum duration of each trip	90 days following departure from B.C.	93 days following departure from Canada. (Longer coverage is available for an extra fee.)	93 days following departure from home province. (Longer coverage is available for an extra fee.)	Plans for up to 17 or 35 days following departure from Canada. (Longer coverage is available for an extra fee.)
Pre-existing Medical Conditions	No stability clause. Covers emergency medical expenses. (Continuous or routine medical	No stability clause. Covers 'sudden and unforeseen' emergency medical expenses.	90-day stability clause.	90-day stability clause.



Benefit	UBC/Sun Life Plan 3	Johnson EHC/Travel	RTOERO EHC/Travel	MEDOC Travel
	services for pre-existing conditions not covered.)			
Trip Interruption/ Cancellation	Not covered.	\$8,000 per insured individual per trip (COVID-19 not covered).	\$6,000 per insured individual per trip (COVID-19 not covered).	\$8,000 per insured individual, per trip (COVID-19 not covered).
Trip Interruption/ Cancellation for within province trips	Not covered.	Covered as above.	Not covered.	Covered as above.
Reimbursement Rate for Eligible Expenses	100%	100%	100%	100%
Premiums based on age and medical history	No	No	No	Yes
Annual Medical Questionnaire Required	No	No	No	Yes



Appendix 4

Contact and Enrolment Information for Insurance Providers

The UBC/Sun Life plan: <https://hr.ubc.ca/benefits/benefit-plan-details/retirement-survivor-benefits>. To obtain information or to enrol in the UBC/Sun Life plan, call the RSB Administrator in UBC Human Resources at 604.822.4580. Note: The contract number for this insurance is 020605.

The Johnson plan: [UBC - Johnson Inc Insurance](#). By phone you can reach Johnson, Inc. at 1.866.799.0000. You can enrol in the Johnson plan through their website or by calling 1.866.799.0000.

The RTOERO plan: <https://rtoero.ca/insurance/extended-health-care-plan/> By phone you can get more information by contacting the Service Administrator at 1.877.406.9007. To ensure you get the correct information, identify yourself as being affiliated with UBC and CURAC (College and University Retiree Associations of Canada.) You can enrol in the RTOERO plan through their website or by calling 1.877.406.9007.

The MEDOC plan: [UBC - Johnson Inc Insurance](#). By phone, you can get more information at 1.866.606.3362. You can enrol in the MEDOC plan through the Johnson website or by calling 1.866.606.3362.