



Millwrights Local 2736 Health Benefits Plan Member Newsletter

WINTER 2019

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Questions about your benefits?

There are many ways to get answers to your questions:

Access your PBC Member Profile on the website www.pac.bluecross.ca or mobile app for details on what is covered, your claims history, your HSA balance, other benefit balances, and more!

Phone the Pacific Blue Cross Call Centre at **604-419-2000** or toll free **1-877-722-2583** for details on what is covered or other specific questions.

Go to the Plan Office website miw.planoffice.ca for an outline of your coverage and access to downloadable resources.

Benefit Plan Improvements

The Trustees of the Millwrights Local 2736 Health Benefits Plan (the Plan) regularly review the Plan design and financial position to ensure the benefits provided to members are both competitive and sustainable.

Health Spending Account

In early 2019, the Trustees announced the addition of a Health Spending Account (HSA) to the Plan and awarded \$500 per family for all members who were enrolled as of January 1, 2019. The Trustees are pleased to announce **an additional \$500 will be awarded on January 1, 2020.**

The Trustees encourage all members to take full advantage of this new benefit. For those that haven't already, there is still opportunity to use the original \$500 from 2019 in addition to the new \$500 for 2020. Please read more within this newsletter about how to use your Health Spending Account and the rules that apply.

Other Plan Changes

In addition to the HSA funding, the Trustees have approved the following enhancements to the Plan effective January 1, 2020:

- The maximum age for active member eligibility under the Group Life benefit will increase from 70 to 75
- Coverage for Occupational Therapists will be added, subject to the same maximum as other paramedical practitioners
- Coverage for physiotherapists will remain unchanged, with no annual maximum but subject to reasonable and customary guidelines. **The annual maximum per person for all other paramedical practitioners will increase from \$500 to \$1,000.**

New Self-Pay Rates

Members who do not have sufficient hours in their hourbank are able to self-pay for up to 18 months to ensure continuation of coverage. The Trustees regularly review the self-pay rates in relation to actual Plan costs.

While premiums for BC MSP will no longer be required after 2019, the cost of other benefits continue to rise. Plan costs for 2020 are expected to exceed \$300 per member per month (or \$2.74 per hour).

Standard Plan

Effective with January 2020 coverage, the Plan's self-pay rate will be **\$1.40 per hour**. Therefore the cost for full self-pay will be \$154 per month.

Mini Plan

The Mini-Plan is available as an option to members who are self paying. This plan includes the following benefits only:

- Member Life Insurance at \$20,000
- Spouse Life Insurance at \$7,000
- Extended Health Care benefits

The self-pay rate for the Mini-Plan will remain at \$0.50 per hour. For members who choose this option, the cost will be \$55 per month.

Get your claims paid FASTER!

Show your PBC ID card to your pharmacist to have your drug claims submitted directly to Pacific Blue Cross and processed at time of purchase. Also ask your optometrist, optician, massage therapist or other practitioner if they are registered for direct billing with Pacific Blue Cross.

For situations where pay direct is not available, online claiming is the fastest and easiest way to make a claim. And with online claiming, you can easily use your HSA to cover any unpaid balance. You can instantly see if your claim has been approved, and payment is deposited into your bank account within two business days.

Start claiming online by accessing your PBC Member Profile at www.pac.bluecross.ca or by downloading the free Pacific Blue Cross mobile app from the App Store or Google Play.

Plan Office Contact Information

Mailing Address
PO Box 24715, Stn F
Vancouver, BC V5N 5T8

Phone
604-419-2478

Fax
604-419-2884

Email
adm@pac.bluecross.ca

Website
miw.planoffice.ca

What can be claimed under my HSA?

Your Health Spending Account (HAS) can be used for unpaid balances or expenses not otherwise covered under the Millwrights Plan, the Provincial Medical Services Plan, or your spouse's group benefits plan (if applicable). You can claim **any item or service allowed under the Income Tax Act of Canada as a medical expense**. Some examples include:

- glasses, contact lenses, and laser eye surgery
- prescription drug expenses not covered under the Extended Health Care plan (e.g. fertility drugs)
- professional medical practitioner services (optometrist, chiropractor, physiotherapist, massage therapist, psychologist)
- all dental services, including implants
- any balances not reimbursed under your Dental or Extended Health Care plans, such as deductibles and coinsurance, or claims exceeding specific plan maximums

For a more complete list of eligible expenses, please refer to the posting on the Union website. You may also contact the Canada Revenue Agency at 1-800-959-8281 or visit their website www.cra-arc.gc.ca.

How do I submit claims under my HSA?

The easiest way to use your HSA funds is to submit your claim online through your *PBC Member Profile* (on the PBC mobile app or at www.pac.bluecross.ca) On the "Claims Details" screen, you will see a box asking if you want to "Use HSA" – select "Yes" from this box to apply your HSA to any balance that is not covered by your Extended Health Care or Dental Plan. It's just that easy!

Claim Details

Need help reading your receipt?

Claimant *

Benefit *

Type of expense *

Date of purchase/service *

Total amount of expense *

Amount paid by public or provincial plan

Amount paid by Pacific Blue Cross/Other insurance plan

Nature of illness/injury *

Use HSA? *

I have coverage with Pacific Blue Cross AND with another insurance company. Which insurance company should I submit my claim to first?

If you are submitting your claim on paper using a Pacific Blue Cross Standard Health Claim Form, look for the question "If applicable, apply any unpaid balance(s) to your HSA?" and check off the "Yes" box.

PART 4 — HEALTH SPENDING ACCOUNT (HSA): Complete only if you have an HSA, see page 2 for more information

If applicable, apply any unpaid balance(s) to your HSA? Yes No

Submit your 2019 expenses by March 30, 2020. **If you don't use your full \$500 HSA entitlement in 2019, any unused balance will be carried forward into 2020.** However, you must use your 2019 entitlement by end of 2020, or you will lose it!

Any amount carried forward from 2019 will be added to your 2020 entitlement. If you haven't used your 2019 entitlement, then you could have up to \$1,000 in your HSA to use in 2020.