

General information for faculty and staff covered under University of Victoria's Group Benefit Plans

Benefit handbooks for faculty and staff:

<http://www.uvic.ca/hr/services/home/compensation/benefits/handbooks/index.php>

Eligible Dependents

- a) Your legal spouse or common-law partner (a common-law partner is a person who has been publicly represented as your spouse for at least one year).
- b) Any child, stepchild, legally adopted child, or legal ward of the employee who is:
 - unmarried and dependent on the employee, and under the age of 21 years (children under age 21 are **not** covered if they are working more than 30 hours a week, unless they are full-time students).
 - age 21 to 25 and in **full time** attendance at a recognized educational institute. If child is no longer a student, the coverage will cease at the end of the month of finishing school or university.
 - incapable of supporting themselves because of physical or mental disorder are covered without age limit if the disorder begins before they turn age 21, or while they are students under age 25, and the disorder has been continuous since that time.

At the time of enrollment you have the option of covering eligible dependents. Once enrolled, no further addition or deletion of dependents will be permitted without satisfactory proof of a change in marital or dependent status.

New dependent(s)?

You must apply for coverage **within one month** of the date of marriage, the one year anniversary of common-law status or the birth or adoption of a child. The plan does not administer late enrolments.

Benefit Premiums

Premiums for Medical Services Plan, Extended Health and Dental Care are deducted from pay a month in advance (e.g. deductions in October are for November coverage).

CaresNet through Pacific Blue Cross

Secure, 24/7 access to your detailed benefit plan coverage and online claim submission
<https://service.pac.bluecross.ca/acesweb/pages/Authentication/Activation.aspx?UserType=1>

Temporary Absence from B.C.

If you plan to leave the province for 6 months or more you must advise MSP before leaving so that MSP can be advised of your absence.

You may be eligible to retain your coverage for up to 24 months during a temporary absence from BC. Approval is limited to once in 5 years for absences that exceed 6 months in a calendar year. If you are unsure whether you will qualify for coverage during an absence, you should contact MSP directly.

When you stay outside BC longer than the period for which you are entitled to coverage, you will be required to fulfill the waiting period upon return to the province before coverage can be renewed.

<http://www2.gov.bc.ca/gov/content/health/health-drug-coverage/msp/bc-residents/benefits/services-covered-by-msp/medical-benefits/medical-benefits-outside-of-british-columbia>

Emergency Travel Assistance

In emergencies which occur while your (and your eligible dependents) are traveling, Medi-Assist will coordinate the following services:

- (1) Locate the nearest appropriate medical care.
- (2) Obtain consultative and advisory services and supervision of medical care by qualified licensed Physicians.
- (3) Investigate, arrange and coordinate medical evacuations and related transportation needs.
- (4) Arrange and coordinate the repatriation of remains.
- (5) Replace lost or stolen passports, locate qualified legal assistance and local interpreters, and other incidental aid you and/or your dependent may require when in distress.

Your Pacific Blue Cross worldwide Medi-Assist card provides instant information on how to contact them. Call the nearest Medi-Assist emergency access number listed on your card. If necessary, call collect or contact the local telephone operator for help in placing your call to Medi-Assist. Have your Extended Health number (E040704) and your BC Care Card number ready for personal identification.

<http://www.pac.bluecross.ca/mediassist/Default.aspx>

Termination of Coverage

Coverage under the University's Group Medical Services Plan terminates on the earlier of the last day of the month in which employment terminates, including retirement, or the last day of the month in which other eligibility requirements are no longer being met (such as dependents' age, financial dependency, etc.). If you choose to work beyond your normal retirement date, group coverage will continue to the earlier of your retirement date, or December 31st of the year in which you reach age 71.

This document is intended as a guide. Should any questions arise concerning the interpretation or administration of the benefit plans, the official plan documents will govern in all cases.