| Annual Deductible Lifetime Maximum  Prescription Drugs Drug Formulary  Pay direct card Drug dispending fees  Lowest cost alternative Per prescription deductible Sexual Dysfunction Oral Contraceptives Fertility Drugs Medical Services / Supplies Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing  Medical Services / Supplies Covered value Covered valu  | r calendar pe yes 100% \$5  Un  escribed by e covered Ye  San Ph Ap  O%  Co | ue Rx  es  ime as BC narmaCare  oplies   | No change | No change  No change |
|---|---|--|---|--|
| Annual Deductible Lifetime Maximum  Prescription Drugs Drug Formulary  Pay direct card Drug dispending fees  Lowest cost alternative Per prescription deductible Sexual Dysfunction Oral Contraceptives Fertility Drugs Medical Services / Supplies Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing  Vunlimited  Prugs predoctor are No Drugs predoctor are No Orugs predoctor are No Covered Sexual Dysfunction No Covered Covered Covered Private / s Covered  | r calendar pe yes 100% \$5  Un  escribed by e covered Ye  San Ph Ap  O%  Co | erson per calendar ear, then 100% 50 Inlimited  ue Rx  es Inme as BC InarmaCare oplies | No change No change No change No change No change No change                     | No change No change No change No change No change No change                            |
| Annual Deductible Lifetime Maximum  Prescription Drugs Drug Formulary Pay direct card Drug dispending fees  Lowest cost alternative Per prescription deductible Sexual Dysfunction Oral Contraceptives Fertility Drugs Medical Services / Supplies Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing  Value Inlimited  Drugs pre doctor are No No Covered No Accovered Supplies Covered  | n 100% yes \$5 I Un  escribed by e covered Ye  Sai Ph  Ap  0%               | ear, then 100% 50 Inlimited  ue Rx  es Ime as BC InarmaCare Inplies                    | No change  No change  No change  No change  No change                           | No change  No change  No change  No change  No change                                  |
| Annual Deductible Lifetime Maximum  Prescription Drugs  Drug Formulary  Pay direct card  Drug dispending fees  Lowest cost alternative  Per prescription deductible  Sexual Dysfunction Oral Contraceptives Fertility Drugs  Medical Services / Supplies  Med-Assist  Out of province emergency  Ambulance Hospital Private duty nursing / in home nursing  Drugs predoctor  Authorizer And No  Drugs predoctor  Another And No  Drugs predoctor  Another Anot  | sscribed by e covered  Ye Saa Ph Ap  O%                                     | ue Rx  es  me as BC  narmaCare  oplies   | No change  No change  No change  No change  No change                           | No change  No change  No change  No change  No change                                  |
| Prescription Drugs Drug Formulary Pay direct card Drug dispending fees  Lowest cost alternative Per prescription deductible Sexual Dysfunction Oral Contraceptives Fertility Drugs Medical Services / Supplies Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing  Drugs pre doctor are No Drug spre doctor are No Covered Sexual Dysfunction No Covered  | escribed by e covered  Ye San Ph Ap  0%                                     | ue Rx es ume as BC narmaCare oplies  | No change  No change  No change  No change  No change                           | No change  No change  No change  No change  No change                                  |
| Prescription Drugs  Drug Formulary  Pay direct card  Pay direct card  Drug dispending fees  Lowest cost alternative  Per prescription deductible  Sexual Dysfunction  Oral Contraceptives  Fertility Drugs  Medical Services / Supplies  Med-Assist  Out of province emergency  Ambulance  Hospital  Private duty nursing / in home nursing  Drugs pre doctor are  No  Covered  Sexual No  Ano  No  Covered  | escribed by e covered  Ye Saa Ph Ap  0%                                     | ue Rx  es  ime as BC  narmaCare  oplies  | No change  No change  No change  No change                                      | No change  No change  No change  No change   |
| Drug Formulary  Pay direct card  Pay direct card  Drug dispending fees  Lowest cost alternative  Per prescription deductible  Sexual Dysfunction  Oral Contraceptives  Fertility Drugs  Medical Services / Supplies  Med-Assist  Out of province emergency  Ambulance  Hospital  Private duty nursing / in home nursing  Proverd  No  Covered  | e covered Ye Sai Ph Ap  0%  | es<br>nme as BC<br>narmaCare<br>oplies   | No change No change No change   | No change No change No change  |
| Pay direct card No Drug dispending fees Yes  Lowest cost alternative Per prescription deductible Sexual Dysfunction No Oral Contraceptives Covered Fertility Drugs \$3,000 life  Medical Services / Supplies Med-Assist Included Out of province emergency Ambulance Covered Hospital Private / s Private duty nursing / in home nursing  Modispending fees Yes  No Covered   | e covered Ye Sai Ph Ap  0%  | es<br>nme as BC<br>narmaCare<br>oplies   | No change No change No change   | No change No change No change  |
| Pay direct card No Drug dispending fees Yes  Lowest cost alternative Per prescription deductible Sexual Dysfunction No Oral Contraceptives Covered Fertility Drugs \$3,000 life  Medical Services / Supplies Med-Assist Included Out of province emergency Ambulance Covered Hospital Private / s Private duty nursing / in home nursing  Ves   | Ye Sai Ph Ap  0%  | ome as BC<br>narmaCare<br>oplies   | No change   | No change  No change   |
| Drug dispending fees  Lowest cost alternative  Per prescription deductible  Sexual Dysfunction Oral Contraceptives Fertility Drugs  Medical Services / Supplies  Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing  No Covered   | San Ph Ap 0%  | ome as BC<br>narmaCare<br>oplies   | No change   | No change  No change   |
| Lowest cost alternative  Per prescription deductible  Sexual Dysfunction Oral Contraceptives Fertility Drugs  Medical Services / Supplies Med-Assist Included Out of province emergency Ambulance Hospital Private duty nursing / in home nursing  No Covered Volume Covered  | Ph Ap 0% Co   | narmaCare<br>oplies<br>%   | No change   | No change  |
| alternative Per prescription deductible Sexual Dysfunction Oral Contraceptives Fertility Drugs  Medical Services / Supplies Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing  \$0  Covered Poservices / Supplies Private duty nursing / in home nursing  \$0  Another Covered Covered Poservices  \$0  Covered    | 0%<br>Co  | oplies<br>%  |   | _  |
| alternative Per prescription  \$0 deductible Sexual Dysfunction No Oral Contraceptives Covered Fertility Drugs \$3,000 life  Medical Services / Supplies Med-Assist Included Out of province Covered emergency Ambulance Covered Hospital Private / s Private duty nursing / in home nursing  \$0 \$ \$0 \$ \$0 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$   | 0%<br>Co  | ·<br>/6  |   | _  |
| Per prescription deductible  Sexual Dysfunction No Oral Contraceptives Covered Fertility Drugs \$3,000 life  Medical Services / Supplies Med-Assist Included Out of province Covered emergency Ambulance Covered Hospital Private / s Private duty nursing / in home nursing  \$0  Covered  | Co  |  | No change   | No change  |
| deductible Sexual Dysfunction Oral Contraceptives Covered Fertility Drugs  Medical Services / Supplies Med-Assist Included Out of province emergency Ambulance Hospital Private duty nursing / in home nursing  No Covered No Covered Covered No C  | Co  |  | No change   | No change  |
| Sexual Dysfunction Oral Contraceptives Fertility Drugs  Medical Services / Supplies Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing Oral Covered Standard Services / Supplies Included Covered Covered Covered Covered Covered Included Covered Covered Included Included Covered Included Incl  |   | overed   |   | . 10 0.101160  |
| Oral Contraceptives Fertility Drugs \$3,000 life  Medical Services / Supplies Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing Provered Covered   |   | overed   |   |  |
| Fertility Drugs \$3,000 life  Medical Services / Supplies  Med-Assist Included  Out of province Covered emergency  Ambulance Covered Hospital Private / s  Private duty nursing / in home nursing  Toward of the services / supplies  Covered of the services / supplies  Med-Assist Included  Covered of the services / supplies  Covered of the services / suppli | Co  | ,  | No change   | No change  |
| Medical Services / Supplies  Med-Assist Included Out of province Covered emergency Ambulance Covered Hospital Private / s Private duty nursing / in home nursing note   | CO  | overed   | No change   | No change  |
| Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing Private Included Covered Covered Covered Tovered Tovere  | etime max \$2   | 20,000 lifetime max  | No change   | No change  |
| Med-Assist Out of province emergency Ambulance Hospital Private duty nursing / in home nursing Private Included Covered Covered Covered Tovered Tovere  |   |  |   |  |
| Out of province emergency  Ambulance  Hospital  Private duty nursing / in home nursing  Covered value  Covered value  Covered value  note   |   |  |   |  |
| emergency Ambulance Covered Hospital Private / s Private duty nursing / in home nursing note  | Inc   | cluded   | No change   | No change  |
| Ambulance  Hospital  Private / s  Private duty nursing / in home nursing  Covered v note  | Co  | overed   | No change   | No change  |
| Hospital Private / s Private duty nursing Covered v / in home nursing note  |   |  |   |  |
| Private duty nursing / in home nursing note   | Co  | overed   | No change   | No change  |
| / in home nursing note  | semi-private Pri  | ivate / semi-private   | No change   | No change  |
|   | with doctor's \$2   | 20,000 per year  | No change   | No change  |
| Hearing Aids \$500 per o  |   |  |   |  |
|   | ear over 60 \$3   | 3500 every 48  | No change   | No change  |
| months  | mo  | onths  |   |  |
| Miscellaneous Covered   | Co  | overed   | No change   | No change  |
| services and supplies   |   |  |   |  |
| Orthopedic shoes 1 pair per   | lifetime with \$5   | 500 per year with  | No change   | No change  |
| prescription  | on <b>pr</b>  | escription   |   |  |
| Orthotics 1 pair per  | lifetime with \$5   | 500 per year with  | No change   | No change  |
| prescription  | on <b>pr</b>  | escription   |   |  |
| Continuous Glucose Not includ   | ded No  | ot included  | Dexcom CGM  | No change  |
| Monitor   |   |  | included  |  |
|   |   |  |   |  |
| Vision Care   |   |  |   |  |
| Maximum \$200 per 2   |   | 550 per 24 months  | \$600 per 24 months   | \$650 per 24   |
|   | 24 months \$5   |  |   | months   |
| Eye exams included Not cover  | 24 months \$5   | per 24 months  | No change   | No change  |
| with vision care  |   |  |   | _  |
|   |   |  |   | 1  |

| Paramedical Services        |                           |                           |   |                 |
|-----------------------------|---------------------------|---------------------------|---|-----------------|
| Naturopath                  | \$500 per year            | \$900 per year            | \$1000  | No change       |
| Chiropractor                | Unlimited                 | \$900 per year            | \$1000  | No change       |
| Massage Therapist           | Unlimited                 | \$900 per year            | \$1000  | No change       |
| Physiotherapist             | Unlimited                 | \$900 per year            | \$1000  | No change       |
| Psychologist                | \$100 per year            | \$900 per year            | \$1200 & expanded<br>to registered<br>counsellors & social<br>workers | \$1500 per year |
| Acupuncture                 | \$300 per year            | \$900 per year            | \$1000 per year   | No change       |
| Podiatrist /<br>Chiropodist | \$200 per year podiatrist | \$800 per year for either | No change   | No change       |
| Speech Therapist            | \$300 per year            | \$800 per year            | No change   | No change       |
| Vaccines                    | Not covered               | Not covered               | HPV   | Shingles        |

## COMPARISON OF CURRENT VANCOUVER EHB and PROVINCIAL EHB PLANS WITH MOA IMPROVEMENTS

- Notes difference in deductible per person or per family can be significantly different
  - i.e. a family of 4 only needs to reach a cumulative \$1000 to receive 100% coverage under the local plan, but in the provincial plan, each of the four family members have to individually reach \$1000 for that family member's prescriptions to be covered 100%
- The Provincial Plan includes all medications if prescribed by your physician, the Provincial plan limits the number of medications that are covered and requires cheaper alternatives to be used.
- The Provincial Plan can require members to substitute lowest cost alternatives
- The VTF plan does not have a limit for nursing in home care when prescribed by a doctor
- The "unlimited" provisions in the local plan are subject to PBC's "reasonable and customary limits" in both packages
  - I.e. the limits can apply to the fees charged by practitioners and also to the yearly number of sessions