

The following plan changes became effective January 1, 2019:

1. Practitioners

Individual limits of 80% of \$250.00 have been removed. Effective January 1, 2019, the following services will have a combined reimbursement limit of 80% of \$1,250 giving members more access to their preferred method of treatment for managing their health and wellness.

- acupuncturist
- chiropractor
- massage practitioner
- naturopath
- physiotherapist
- podiatrist
- speech therapist

2. Short Term Disability

Effective January 1, 2019, benefits increased from \$400 per week to \$500 per week. Eligible members must:

- a. be covered on the Full Plan on the date of disability, and
- b. have had coverage with DC38 Health & Welfare Trust Fund for the 8 consecutive months immediately preceding the date of disability, whether covered on the Full Plan and/or the Partial Package and/or the Mini Plan, or any combination of the these Plans. There can not be any breaks in coverage for the 8 months immediately preceding the date of disability.

Note: Members reimbursed for periods of disability from January 1, 2019 onward at the old rates will receive a retro-active top-up.

3. Spousal Dependent

Means the person legally married to the Member or a person who has been residing with the Member in a common-law relationship for at least 1 year and who is publicly represented as the Member's Spouse. Only one Spouse is eligible for coverage under the Contract at any one time.

Effective January 1, 2019, the 12 month waiting period from the removal date of one spouse to the addition of a different spouse will be applied regardless of whether the spouse and Member are legally married, or common-law.

If you are estranged (separated), divorced or no longer cohabitating with the person listed as a spouse on your coverage, you are required to contact this office at 604-524-8334 or 1-800 266-1527 to remove them from your coverage.