To SFU employees and retirees,

RE: Extended Health Care Plan

Effective April 1, 2011, there will be two changes to how claims are administered under your Extended Health Care (EHC) plan with Pacific Blue Cross.

Your EHC plan is there to protect you against medical expenses that are not covered by the provincial plan. These changes do not reduce your coverage but they ensure that the plan is not paying for expenses that are not medically required or where funding is available under the provincial plan.

**Massage Therapy Claims**

Massage therapy claims will now require that you receive a referral from your doctor. You must submit a copy of the doctor’s referral with your next claim for treatments received on or after April 1st. The referral will be valid for 6 months so that you do not have to submit a new referral with each claim within the 6 month period.

Massage therapy claims have increased dramatically over the last several years, and these claims impact the cost of the EHC plan. The plan is meant to cover only those massages that have therapeutic value, and not non-medical massages.

**Prescription Drugs available under Pharmacare Special Authority program**

While approximately 75% of drugs available in BC are covered under the Fair Pharmacare program, many others are available only upon application to Pharmacare’s “Special Authority” program.

Starting April 1st, you will be required to apply to Pharmacare for coverage for certain high-priced drugs that are available under the Special Authority program. Your physician must submit the application to Pharmacare on your behalf. (Physicians are familiar with this process.) You will be required to submit a copy of Pharmacare’s decision with your drug claim to Pacific Blue Cross. If Pharmacare rejects your application, your EHC plan will consider the full cost of the prescription subject to the plan provisions (e.g. deductible, coinurance). If Pharmacare accepts your application, your EHC plan will consider only the portion not covered by Pharmacare, i.e. the Pharmacare deductible and coinurance amounts.

A list of drugs impacted by this change is attached here. The list will change from time to time as Pharmacare updates the program, and a current list will be available in CARESnet, Pacific Blue Cross’s member self service site, at pac.bluecross.ca.

To avoid having Pacific Blue Cross reject your claim, please check this list and if you are prescribed one of these drugs in the future, have your physician submit an application to Pharmacare prior to submitting your claim.

If you have claimed any of the drugs on this list in the past year, you will receive a letter from Pacific Blue Cross advising you to apply to Pharmacare Special Authority (if you haven’t already) and submit a copy of Pharmacare’s decision with your next claim.

More information about the new process is attached. This change in how your EHC plan is administered is meant to ensure you have continued access to the drugs prescribed by your physician, while ensuring you access all available government funding in order to protect your EHC plan from rising costs.

If you have questions about these changes, please call us at 604 419-2600, or toll-free at 1-888 275-4672, then press 1, 1.