



FAQs - Benefits

VPA Health & Dental Plan

Who is eligible for the plan?

- VPA members and their dependents who reside in Canada (excluding Quebec) and have provincial plan coverage. All eligible dependents need to be added at the time of enrollment.
- If they have coverage, dependents can exempt themselves from the health and dental plan with alternate coverage information. You have 31 days to notify your administrator for coverage activation if they lose their coverage, no medical evidence required.

When can I apply?

- You will be eligible for benefits 60 days after joining the VPA. You will then have 31 days to enroll without having to provide medical evidence. After such time, you and your dependents will be required to supply medical evidence and receive carrier approval before you can join the plan.

Is there a medical exam or medical requirement?

- There are no medical requirements if you enroll within 31 days of becoming eligible. After such time, you and your dependents will be required to supply medical evidence and receive carrier approval before you can join the plan.

Who pays for the plan?

- Each member pays their own monthly premiums through Pre-Authorized Debit (PAD). Based on your family status, you pay single, couple, or a family rate. Preferred rates have been arranged for VPA members.

How do I apply?

- Simply send an email to bc.bcfs-adminservices@navacord.com with your name, date of birth, email address, plan choice (Bronze, Silver or Gold), family status (single, couple, family), and VPA member number. Make sure to complete the application within 31 days to avoid medical requirements

Can I change my coverage option?

- You are given the opportunity to change your coverage selection every 24 months, or at the same time as a life event that changes your family status (single / couple / family) such as marriage, divorce or having your first child.

What if I stop working that employer?

- You can remain on the plan as long as you continue to be a resident of Canada, and you continue paying your monthly premiums.

What if I cancel my coverage, can I re-enroll?

- Your benefits terminate at midnight of the last day of the month in which you request to terminate your coverage. You may request to join again no earlier than 24 months from the date your coverage terminated. Applicants will be subject to medical underwriting and coverage will be at the discretion of the insurer.

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How do I submit my claims?

Type of Claim	Date Incurred	Submit Claim to:
Extended Health Care (EHC) & Dental	Incurred <u>ON or AFTER</u> January 1, 2024	Pacific Blue Cross

How do I update my beneficiary or dependent information?

Visit the secure member portal at: https://bridge.waypoint.ca/member_access/login

- Waypoint Benefits & Financial Services, your dedicated benefits administrator, will verify all the information entered, including all updates to the PBC system and invoice.

If you have questions, please email bc.bcfs-adminservices@navacord.com

FOR MORE INFORMATION PLEASE CONTACT:
Navacord Benefits Consulting & Financial Services
bc.bcfs-adminservices@navacord.com
604.684.2300

