



BOILERMAKERS LODGE NO. 191 BENEFIT PLAN SUMMARY OF BENEFITS

All benefits are subject to the terms of the official Plan documents.

This is only a summary for your convenience

AS OF: JANUARY 1, 2026

BENEFITS		AMOUNTS
Lifetime Maximum		\$1,000,000 per person. Reasonable and customary (R&C) charges apply to all benefits.
Life Insurance	Member Life	\$60,000
	Spouse Life	\$25,000
Accidental Death & Dismemberment		Member \$60,000, Spouse under age 70 \$20,000, all eligible dependant children \$5,000.
Wage Indemnity (Short Term Disability)	Maximum Benefit Amount:	\$729 per week effective January 1, 2026. WI disability benefit amounts mirror the current EI maximum benefit. WI benefit payments are integrated with EI Sickness benefit payments.
	Taxes:	Benefit payments are taxable
	Qualifying Period:	Benefit payment commences on the 1st day of a non-occupational accident and on the 4th day of a non-occupational sickness. If you are hospitalized prior to the 4th day of sickness, benefits commence on the 1st day of hospitalization.
	Benefit Duration:	Maximum to the earlier of 26 weeks or age 65
Prescription Drugs		Coverage for prescription drugs and medicines that require, and can only be obtained with, a written prescription from a licensed physician or dentist, if provincial law permits. Drugs and medicines are limited to a 100-day supply. Refills are not permitted to be dispensed earlier than what is deemed to be reasonable and customary. If a member requires more than a 100-day supply of medication, they must contact the Plan Administration Office. Drugs and medicines that are normally available "over the counter" are excluded, even if a prescription is provided. Fertility drugs, vitamins, preventative medications, dietary foods and supplements are also excluded. Smoking cessation products will be covered up to a lifetime maximum of \$500 per person.
Vision Care	Benefit Amount	100% to a maximum of \$750 Every 24 months (12 months for dependent children under age 19). Laser eye surgery is covered for a \$1,000 lifetime maximum per eligible person.
	Eye Exams	Maximum of \$85 every 24 months and are included in the \$1,000,000 lifetime maximum benefit.
Dental	Deductible:	No deductible
	Reimbursement:	100% Basic, 75% Major subject to certain maximums, 50% Orthodontic
	Fee Guide:	Current
	Maximums:	Basic and Major are included under the \$1,000,000 lifetime maximum. \$2,000 lifetime for Orthodontics.
	Services Include:	Basic (diagnostic, preventative, surgical, restorative, prosthetic repairs and maintenance, endodontia (root canals), periodontia, anesthesia). Major (Prosthetic Appliances, Veneers, Crowns and Bridge Procedures).
	Coverage Notes:	Dependant children under 21 and adults are eligible for orthodontic services performed by an orthodontist.
Paramedical	Deductible:	No deductible
	Benefit Amount:	100% up to a maximum of \$1,500 per eligible person per calendar year, for all eligible paramedical practitioner types combined. R&C charges apply.
	Practitioners:	Accupuncturist, Chiropractor (including x-rays), Physiotherapist, Registered Massage Therapist, Registered Psychologists, Registered Clinical Counsellor, Licensed Social Worker, Licensed Dietitian, Naturopath (including x-rays), Osteopath (including x-rays), Podiatrist (including x-rays), Speech Therapist
Orthotics & Footwear		One pair of custom-fitted orthopedic shoes when prescribed by a physician or podiatrist, and replacements when necessitated by normal wear and tear. One pair of custom-made orthotics (including moulds and arch supports), when prescribed by a physician or podiatrist, to a maximum of \$200 per eligible person per calendar year. 2 modifications every 6 months to custom orthotics and footwear are covered.
Ambulance		Charges in excess of the amount payable under your provincial plan for professional licensed ambulance service in an emergency, including transportation by railroad, boat or airplane, or in acute emergency by air ambulance.
Private Duty Nursing		Up to \$25,000 per covered person during any 3 consecutive benefit years for the charges for the services of an out-of-hospital private duty nurse. Services must be for nursing care, and not for custodial care. The private duty nurse must be a nurse, or a nursing assistant who is licensed, certified or registered in the province where you live and who does not normally live with you.
Medical Services, Supplies, and Durable Medical Equipment		100% coverage on a reasonable and customary basis (unless stated otherwise below) the medical services and supplies listed on this page of the Benefit Booklet [link to Booklet once final].
Hospital		Charges made by an approved acute general hospital in B.C. for a private or semi-private room if a ward is not available or if required as medically necessary by a physician.
Convalescent Hospital Benefit		Charges for a convalescent hospital, up to a maximum of \$20 per day for a maximum of 180 days, for treatment of an illness resulting from the same or related causes.
Hearing Aids		50% of the cost of purchase and fitting of hearing aids for all eligible Members and dependants, up to a maximum of \$2,500 in a 5-year period. WorkSafe BC is the first payer on behalf of Members.
Out of Province/Canada Emergency Medical Travel Assistance		Coverage Period: 180 days per trip Maximum of \$5 Million per coverage period. The maximum age for coverage is age 80. Policy Number: DAT00013344 From Canada and the United States, call TOLL FREE 1-833-685-2790 From anywhere else in the world, call COLLECT + 519-735-9448

QUESTIONS? EMAIL QUESTIONS@BOILERMAKERS191BENEFITS.ORG