

General Overview: Group Benefits available to Organic BC Operators

This plan is provided through ICBA Benefits Services Ltd.

Additional plan details can be found on our [Group Health Benefits page](#).

	Entrepreneur	Bronze	Silver	Gold
	Eligible for operations of 1–2 people. Must be working 24 hours or more weekly.	Eligible for operations of 3 or more people. Must be working 20 hours or more weekly to qualify for coverage.		
Monthly Pricing (for 2021)	<p><i>Specific details + rates for options can be found on our Benefits page.</i></p> <p>Overview Breakdown: Membership fee \$10.50 + Life Insurance starts at \$10.30 + Dependent Life - \$5.38 + AD&D starts at \$0.75 + Extended \$63.19-\$449.19 + Dental \$61.48 – \$223.21 + Optional: Short Term Disability</p>	\$96.32 Single \$161.10 Couple \$241.27 Family	\$102.19 Single \$171.89 Couple \$259.12 Family	\$156.99 Single \$269.86 Couple \$416.18 Family
Life Insurance				
Basic Life Insurance	Flat \$25,000 (reduced by 50% at age 65. Ends at age 75)	Flat \$25,000 (reduced by 50% at age 65. Ends at age 70)	Flat \$25,000 (reduced by 50% at age 65. Ends at age 70)	Flat \$25,000 (reduced by 50% at age 65. Ends at age 70)
Extended Health Care				
Prescription Drugs	Varies: 80% –100% Up to \$5000 per year, brand name drugs paid at generic equivalent.	70%	80%	100%
Annual Deductible	Varies: \$0 – \$250	\$50 Single / \$100 Family	\$50 Single / \$100 Family	\$0
Paramedical:	\$300 annually for each practitioner type	\$350 annually each practitioner type	\$500 annually each practitioner type	\$500 annually each practitioner type
<i>Paramedical typically includes: Acupuncture, Chiropractor/Podiatrist, Chiropractor, Clinical Counsellor/Psychologist, Massage Therapist, Naturopath, Osteopath, Speech Therapist.</i>				
Orthopedic Shoes	(see orthotics below)	\$500 adult annually / \$300 child annually	\$500 adult annually / \$300 child annually	\$500 adult annually / \$300 child annually
Orthotics	\$300 annually	\$400 every 2 years	\$400 every 2 years	\$400 every 2 years
Termination Age	Age 75	Age 85 or retirement	Age 85 or retirement	Age 85 or retirement
Vision Care	100%, up to \$200 every 2 years	Not covered	Not covered	\$100 every 2 years
Eye Exams	Included in above \$200 every 2 years	Not covered	Not covered	\$75 every 2 years
Dental Care				
Deductibles	\$0	\$0	\$0	\$0
Basic Dental	Varies: 80% – 100% (up to \$1500 for combined basic and major dental annually)	70%, with a \$750 annual maximum	80%, with a \$1000 annual maximum	100%, with a \$1500 annual maximum
Major Restorative	Varies: 0% or 50% (up to \$1500 for combined basic and major dental annually)	Not covered	Not covered	Not covered
Recall Exams	Twice per year	Twice per year	Twice per year	Twice per year
Annual scaling	10 units per year	16 units per year	16 units per year	16 units per year
Termination Age	Age 75	Retirement	Retirement	Retirement
More services available. Please refer to the Entrepreneur Plan and ICBA Plan details on our Benefits page for more information.				