



PUBLIC EDUCATION BENEFITS TRUST

K-12 Support Staff Addictions or Substance Misuse Medical Monitoring Reimbursement Policy

Goal

To ensure eligible K-12 Support Staff Members throughout British Columbia who are recovering from addictions or substance misuse have access to affordable medical monitoring services as part of their continuum of care, the Public Education Benefits Trust (PEBT) will reimburse a portion of the costs of medical monitoring.

Medical monitoring is the independent third-party, randomized drug/alcohol testing and treatment monitoring to deter the misuse of drugs and alcohol, particularly in the workplace.

What costs can be reimbursed?

- One-third of the cost of a Member's medical monitoring up to a maximum reimbursed of \$2,500 per Member per calendar year.
- Eligible Members are K-12 Support Staff who are eligible to receive PEBT Core LTD benefits, as defined in the Core Long Term Disability (LTD) Program Text.

How does this work?

The school district arranges medical monitoring for a K-12 Support Staff Member as usual. Near the end of the calendar year or at the conclusion of a Member's medical monitoring period, the school district forwards to the PEBT a 'Medical Monitoring Reimbursement Request' form including a copy of the medical monitoring receipt. If the Member did not participate in the PEBT JEIS or LTD programs, then documentation of the Member's LTD coverage is also required.

Reimbursement will not be provided if receipts are submitted more than 90 days following the end of the calendar year in which the expense was incurred.

If either the school district or Member paid for 100% of the medical monitoring costs, then reimbursement will be issued directly to the school district or Member. Where the school district and Member are sharing the cost of medical monitoring, any approved PEBT cost-sharing will be reimbursed directly to each party for amounts over one-third the cost stated on

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the receipt(s) received. If the total reimbursement amount exceeds or is expected to exceed the \$2,500 maximum per Member per calendar year, then reimbursement priority is given to the Member. Only when the Member has been reimbursed (so they are paying no more than one-third of the medical monitoring costs for that calendar year) will the remaining available reimbursement be directed to the school district.

Can the school district select any medical monitoring company?

Yes, school districts may select any company that provides medical monitoring services within Canada. However, we encourage school districts to consider using the PEBT Medical Monitoring Preferred Provider listing (once this is available), or to select a medical monitoring company capable of the following:

- completely randomized testing 7 days per week with 'Chain of Custody' protocols
- a certified medical review officer to review all possible non-compliance tests including a call to the Member
- immediate reporting of all confirmed noncompliance tests
- regular monitoring of all treatment recommendations with the Member including counselling, medication adherence and program attendance
- monthly reporting on Member compliance and progress.

Is additional reimbursement available?

In extenuating circumstances, the school district may submit a request for additional reimbursement or more frequent (i.e. quarterly) reimbursement of medical monitoring costs. Such requests, including accompanying reasons, should be provided in writing to the PEBT within 90 days following the end of the calendar year in which the expense was incurred. The PEBT will review and advise the school district in writing of their decision.

Where do we send the reimbursement requests?

Mail: Confidential
Lori Lofthaug
Public Education Benefits Trust
6222 Willingdon Avenue
Burnaby, British Columbia V5H 0G3
Fax: 604-291-1194
Phone: 604-292-0288

To ensure Member privacy, we ask that any reimbursement requests be sent confidentially to Lori Lofthaug at the PEBT by fax, mail, or through our secure site. Please call Lori for instructions on how to use our secure site.