# My Benefits Update



March 2019

# 2019 Benefits Update

Your benefits coverage through CUPE Locals 1145, 1770, 1775 and 3260 is an important part of your total compensation package, providing health and dental coverage and financial protection for you and your family throughout your career. That is why we are proud to offer you a comprehensive program that includes 100% reimbursement for all health and drug expenses (subject to maximums).

The Group Insurance Trust Committee for CUPE Locals 1145, 1770, 1775 and 3260 recently completed the annual renewal of your benefits program. Below are the results of the renewal, including highlights of the rate changes effective April 1, 2019.

### **2019 rates**

Each year we review our benefits program to ensure that contribution rates are adequate to pay expected claims and expenses in the coming benefit year.

As a result of this review, you will see some changes to the premiums you pay for basic and dependent life insurance, long-term disability, health, dental and travel plans effective April 1, 2019. Although some of our rates are increasing, they do remain competitive when compared to industry norms. There will be no change to the cost of optional life and basic and optional accident coverage.

Plan	Rate Change			
Basic and Dependent Life	2.0% decrease			
Basic and Optional Accidental Death & Dismemberment (AD&D)	No change			
Optional Life	No change			
Long-term Disability	4.2% increase			

Plan	Rate Change
Health Plan	4.5% increase
Dental Plan	2.6% increase
Travel Plan	1.9% increase

#### Overview of rate changes

Here's an overview of the rate changes effective April 1, 2019:

		12-month employees		10-month employees				
		Your cost per month			Your cost per month			
		Current	New	Difference	Current	New	Difference	
Health coverage	Single	\$67.03	\$70.05	\$3.02	\$80.44	\$84.06	\$3.62	
	Family	\$156.22	\$163.25	\$7.03	\$187.46	\$195.89	\$8.43	
Dental coverage	Single	\$21.93	\$22.50	\$0.57	\$26.32	\$27.00	\$0.68	
	Family	\$46.26	\$47.47	\$1.21	\$55.51	\$56.96	\$1.45	
Travel coverage	Single	\$1.54	\$1.59	\$0.05	\$1.85	\$1.91	\$0.06	
	Family	\$3.08	\$3.13	\$0.05	\$3.69	\$3.75	\$0.06	
Basic life – for you (\$50,000 of coverage)		\$8.73	\$8.56	-\$0.17	\$10.48	\$10.27	-\$0.21	
Dependent life		\$2.06	\$2.02	-\$0.04	\$2.47	\$2.42	-\$0.05	
Long-term disability (% of earnings)		1.72%	1.79%	0.07%	1.72%	1.79%	0.07%	

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### A closer look at health and dental costs

Member health and dental premium rates are determined by the paid claims of the group. Premiums are set at a rate that ensures the funds in the Plan are sufficient to cover the cost of all claims made under the Plan for coming year, as well as the costs of running the Plan. Health costs in Canada have continued to rise over the last few years. An aging population, more expensive treatments and increased use of services provided under the plan are all factors that are contributing to the increase in the cost to run the plan.

#### Tips to help control benefit costs

Here are a couple of ways to help you and our benefits program save on health and dental expenses.

- Shop around drug costs and dispensing fees can vary considerably between pharmacies. Dispensing fees can range from as low as \$9.33 up to \$12.39 per prescription.
- Order a three-month supply of long-term or maintenance prescription drugs to save on extra dispensing fee costs.
- Take your medication as directed to avoid a reoccurrence of your illness and the need to start the treatment over again.
- Get a second opinion before starting expensive dental treatment. Procedures and costs can vary considerably from one dentist to another to treat the same dental problem.

## Don't forget when choosing a paramedical provider

In order for the services of an eligible paramedical practitioner to be reimbursed under the health plan, they must be registered in the province where the service is given. If you are unsure if a paramedical practitioner is registered in the province, you can check the Great-West GroupNet app for the list of eligible practitioners in your area or you can call Great-West Life before incurring the claim.

# The impact of Diabetes

High rates of obesity, poor diet and a lack of physical activity are all contributing to a significant increase in Type 2 diabetes. Claims for diabetes are the highest cost driver of the health plan today. According to Great-West Life's statistics, individuals with diabetes claim an average of 2.7 times more than a person without diabetes. This is because medical conditions such as depression, high blood pressure, eye complications, and elevated cholesterol are more common for people with diabetes.

Individuals with Type 2 diabetes can take preventative steps to help improve their health. Healthy eating habits, regular exercise and maintaining a healthy weight are all important tools to improve health.

Great-West Life has a number of resources and tools ready to help. Login to Great-West Life's GroupNet for Plan Members at <u>greatwestlife.com</u> — Click the *Health & Wellness* tab on the right and follow the instructions to launch the Health & Wellness website.

A Personal Health Risk Assessment is an easy first step to take stock of your current health and set a course to improve it. In the Health and Wellness website, under How healthy is your life, click Start Now to begin your Personal Health Risk Assessment.

#### **Need more information?**

For more information about your benefits, visit the benefits website at <a href="maybenefitplan.ca"><u>mybenefitplan.ca</u></a> or consult your *Benefits Summary*.

You can also contact Johnson Inc. for benefits information at 902-628-3537 (or toll-free at 1-800-371-9516) and Great-West Life for questions about claims at 1-800-957-9777.

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