

Overhaul of the Group Insurance Plan

Hello,

The overhaul of your group insurance plan has been in place for 3 months now. In order to answer some of the questions that arose during the summer, here are a few reminders on the changes made to the plan.

Let us remember that this overhaul originated from a survey to which more than 26,000 people responded. After analysis of this survey by your FSSS representatives, four (4) objectives emerged which guided the redesign:

- 1) Cost reduction
- 2) Make the plan simpler
- 3) Make the plan fairer
- 4) Increase the overall level of satisfaction of our members with the plan.

Several changes had to be made to the plan in order to achieve all of these objectives.

We had the opportunity to present changes directly to all of the members and also offer explanations on the nature of said changes through nine (9) interactive virtual meetings (Zoom) held in spring 2021. Here is a reminder of some of the main changes:

The introduction of the \$5 deductible per prescribed drug translates into **premium** savings ranging from approximately \$2.20 to \$7.50 per pay depending on the plan and status chosen. These deductibles apply uniformly to all levels of protection (Health plans 1, 2 or 3).

In addition, for regular prescription drug users, it is possible to mitigate many of the effects of the deductible by purchasing for 3 months. (see "good practices" leaflet)

One of the objectives of the overhaul was to reduce costs substantially. It's important to remind ourselves that more than half of the members (51%) need little or no medication **at all.** In fact, the total of their claims are situated in the bracket between \$0 and \$499 per year! That includes members in all statuses (individual, single-parent or family).

Health plan 1 now comes with the RAMQ list and a 65% reimbursement rate, this plan is particularly aimed at members that have lesser needs. These, and other changes, will have reduced the cost of the premiums by more than 20%. This reduction in costs represents savings per pay of nearly \$12 for an individual status, \$14 for a single-parent status and \$26.77 for a family status! That's almost \$700 reduction in the annual cost of group insurance for a family!!!!

Health plan 2, which now provides for an overall reimbursement rate of 75%, has also seen its cost reduced by 5%. This translates into savings per pay of more than \$7 for an individual status, more than \$9 for a single-parent status and more than \$16 for a person with a family status. All this despite the addition of new coverages and a significant improvement in reimbursements for all health care professionals' services.

Health plan 3 despite several additions of new coverages and a significant increase in

reimbursements for health care professional services and a substantially more generous reimbursement for eyeglasses did not necessitate an increase in rates (contractual premiums).

The ultimate goal in the changes made to health plan 3 were more oriented towards objective number four(4), increasing overall satisfaction. For members in health plan 3, the savings will still be there, but they will especially become noticeable for those who regularly use professional services (eg: chiropracticor, massage therapy, physio, etc.) and also for those who need vision care (eye exam, eyeglasses, etc.) since their share of out-of-pocket costs (co-pay) is greatly reduced.

In addition, we are continuing the battle to obtain 100% universal public drug insurance plan, which would provide significant savings in the cost of drugs for all. Interventions are continuing at both the provincial and federal levels on this subject.

Finally, the gains wrested from the government during the last round of negotiations by the FSSS, which again was able to "hold on" for that "extra minute", made it possible to obtain an increase the employer's share of costs of group insurance. The gain that consists in multiplying the employer's per pay contribution threefold will generate savings ranging from \$6.50 to \$21.50 per pay depending which health you might have and your job title, theses saving apply to members having job titles situated between ranks 1 to 11 of the overall job classification chart.

Overhaul of the Group Insurance Plan

Redesign and Negotiation Premium Savings For job titles ranked 1 to 11

	Individual	SINGLE-PARENT	FAMILY
Santé 1			
Savings redesign*	13,42 \$	16,11\$	29,53 \$
Savings new CA*	7,52 \$	22,83\$	19,79\$
Total	<mark>20,94 \$</mark>	<mark>38,94 \$</mark>	49,32 \$
Santé 2			
Savings redesign*	4,06 \$	5,04 \$	9,04 \$
Savings new CA*	6,56\$	21,50\$	17,57\$
Total	10,62 \$	<mark>26,54 \$</mark>	<mark>26,61</mark> \$
	10,02 Ş	20,54 Ş	20,01 Ş
Santé 3			
Savings redesign*	0\$	0\$	0\$
Savings new CA*	5,95 \$	20,77 \$	16,23\$
Total	<mark>5,95 \$</mark>	<mark>20,77 \$</mark>	16,23 \$

^{*} For health plans 2 and 3, we must add on to the savings the increase in reimbursements and the inclusion of new coverages. For example, a single visit to the physiotherapist at a cost of \$100 now provides a reimbursement of \$80 (Health plan 3) instead of the maximum \$30 before the redesign, an additional saving of \$50 per visit (in this example, after 7 visits = \$350 savings).

^{*} CA= Collective agreement







Best practices for prescription drug purchases

A 90-day supply



When your medical condition is stable, why not request a 90-day supply? When you purchase enough prescription drugs to last you three months, you save in two ways: you only pay the \$5 deductible once instead of three times, and the pharmacist's fees will most likely be lower than when renewing your prescription every month. However, your pharmacist is also bound by a code of ethics and your prescription drug may not be appropriate for such a supply.

Using generics

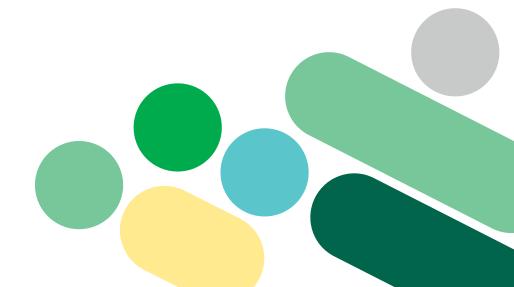


Why opt for generic drugs? The generic version of a drug contains the same active ingredients, efficacy and safety as the brand name drug. It meets all of Health Canada's quality standards. The only difference is the price! If your plan provides for generic drug reimbursement, the savings go directly into your pocket!



Did you know that filling your prescription for three months at a time or opting for the generic version could save you money? Just ask your pharmacist. He or she will be able to advise you based on your situation.





Choosing your pharmacy



Did you know that fees vary from one pharmacy to the next? That explains the difference in the price of your prescriptions. Finding the right pharmacy is good for you and your wallet!

Important! Have all your prescriptions filled at the same pharmacy so that your pharmacist can analyze your entire record.

Pharmacists must submit an itemized invoice for drugs appearing on the government's prescription drug list. This **gives clients the information** they need to **better understand** what they are paying for and make choices that can have a positive impact on the group insurance plan. Please take the time to look at your invoice.

Biological and biosimilar drugs

Biological drugs are products derived from living organisms. The manufacturing process for such drugs is complex and their cost is high. Biosimilar agents have recently appeared on the market and are generating significant savings. A biosimilar drug is a biological drug that is very similar to a reference biological drug. They are so similar that there are no significant clinical differences in efficacy and safety. Biosimilars offer savings that range anywhere from 15% to 50% per treatment.

Be sure to claim under the right plan!



Claims for prescription drug and health care expenses eligible for CNESST, IVAC, or SAAQ coverage should be submitted to these organizations. The interactive communications system used in pharmacy will automatically submit all claims for eligible prescription drugs for these organizations. If the claim is accepted, you will receive your prescription drugs without having to pay out of pocket.

While it may seem easier to submit a claim to your group plan, the reimbursements offered under the government plans are often higher. Opting for your group plan may therefore cost you more and increase the costs attributed to the plan. At the end of the day, it's our group that pays!

An ounce of prevention...



Healthcare professionals and government officials are forever touting the benefits of a healthy lifestyle when it comes to preventing a number of known illnesses. Taking time to exercise, quitting smoking, and eating well are all simple ways of improving your health. And in addition to improving your quality of life, these habits can help lower the cost of our plan!

