

Coming June 1, 2022:

New insurance providers and changes to your Health Plan

Your retiree benefits provide valuable coverage that protects you and your dependents during retirement. Starting June 1, 2022, we will be switching insurance providers as a result of a comprehensive market review of insurance providers' services, costs and administration practices. We will also be introducing some changes to our Health Plan, which align with changes being implemented in the employee plan as agreed by the unions and employers. These changes have been designed to support wellness, improve member experience and access, as well as follow market best practices.

What is changing?

- + Health coverage will be provided by Medavie Blue Cross and there will be some changes to coverage to align with the employee plan
- + Basic Life insurance (if applicable), will be provided by Manulife

What is not changing?

- + The Health Plan will continue to provide you with comprehensive coverage that supports your health and wellness
- + Basic Life insurance coverage (if applicable) is not changing

Want More Details?

- View the [Retiree Benefits Summary](#) to see the Health Plan changes.
- View your [Premium Rate Memo](#) (distributed to home addresses).
- Read the enclosed [FAQs](#)

What's next?

In the coming months, you will receive more details on the provider changes and the enrolment process if applicable.

May	<ul style="list-style-type: none"> ▪ Receive your Member Information Package from Medavie Blue Cross by mail, including your Member ID card, and enrolment materials if applicable. ▪ Continue to submit Health claims for services incurred/dated up to and including May 31 to Manulife, your current benefits insurer. You will have until June 30, 2022 to submit any outstanding claims for services incurred before May 31.
June	<ul style="list-style-type: none"> ▪ Starting June 1, 2022, submit Health claims for services incurred/dated after this date to Medavie Blue Cross for reimbursement.

Frequently Asked Questions (FAQs)

Why are changes to the Health Plan being introduced?

The retiree benefits plan follows any changes implemented in the employee benefits plan. The employee plan is undergoing changes to establish a new single group benefits plan for NSH/IWK employees and other Health Association member organizations. These changes have been carefully reviewed and designed to ensure that the Health Plan continues to provide comprehensive and sustainable coverage, is readily accessible for plan members across the province, and supports plan member health and well-being.

What will happen to my coverage between April 1, 2022 and June 1, 2022?

You will continue to participate in your current benefits plan until June 1, 2022. On June 1, 2022, you will transition to the new insurers and the Health Plan changes will come into effect.

Important note: your claims history with your current insurer will carry over to Medavie Blue Cross effective June 1, 2022. This means any claims made prior to May 31, 2022 will count towards the applicable maximums under the plan.

How will my Health coverage change June 1, 2022?

For the most part, your Health coverage will remain the same with some changes to benefit maximums and reimbursement structure. Please see your [Retiree Benefits Summary](#) for details on how the changes compare to your current coverage.

Why is my vision care changing?

Vision care coverage is changing to bring it in line with best practices, as well as to provide a better member experience by allowing eligible opticians/vision care providers to submit claims directly to the insurer. This simplifies the claims process and reduces your up-front out-of-pocket expenses. Your new coverage is still considered competitive when compared to the market.

How do I submit claims during the transition to Medavie Blue Cross?

For Expenses Incurred and Dated up to May 31, 2022: Claims for services incurred/dated up to and including May 31 should be submitted to your current benefits provider. You will have until June 30, 2022 to submit any outstanding claims for services incurred before May 31.

For Expenses Incurred and Dated starting June 1, 2022: Claims for services incurred/dated starting June 1, 2022 must be submitted to Medavie Blue Cross. Please see your member information package (coming in May) for details on submitting claims to Medavie Blue Cross and show your new Medavie Blue Cross card to your providers.

Will my costs for coverage change on June 1, 2022?

We complete an annual review of our benefits program to ensure that premium rates are adequate to pay expected claims and expenses in the coming year. For the 2022 plan year, we based the annual renewal exercise on the updated Health Plan coming into effect on June 1, 2022. This means that there will be a change to your rates effective June 1, 2022. Depending on your current plan, the impact on your individual rates may vary. Please see your [Premium Rate Memo](#) for detailed information on your costs.

When will I get more information about the changes and transition to Medavie Blue Cross?

You will receive more information in the coming months, including information on Medavie Blue Cross and enrolling if applicable.



Retiree Benefits Summary

Effective June 1, 2022

This benefits summary outlines your coverage as a **retiree**. The shading in blue indicates a change in coverage that will come into effect on June 1, 2022. The changes shown here mirror the changes approved for the employee plan, which were designed to better align with market best practices, enhance value, promote wellness and improve member experience and access.

Note that you may be enrolled in all or some of the benefits offered by your former employer.

Retirees or spouses who are **OVER age 65** are **not covered** for prescription drugs under this plan effective the 1st day of the 65th birthday month. Residents of Nova Scotia may be eligible for prescription drug coverage under the Nova Scotia Seniors' Pharmacare Program.

Health

	Current Coverage	Coverage Effective June 1, 2022
Provider	Manulife	Medavie Blue Cross
Participation	Optional coverage	
Eligibility	You, your spouse, and your dependent children (must meet eligibility for Retiree Benefits)	
Termination age	Drug coverage: For you: you reach age 65 For your spouse: your spouse reaches age 65 All other coverage: No age limit	
Reimbursement		
<ul style="list-style-type: none"> ▪ Drugs (pay-direct) 	100%	
<ul style="list-style-type: none"> – Eligible drugs 	Managed Formulary, based on provider-approved list of eligible drug expenses (Prior authorization required for some drugs) Certain categories are subject to Step Therapy (see details below) requiring new patients to try cost effective first-line therapies first Supplements Government Health Care Coverage *NEW* Payment for a specialty high cost drug may be reduced by financial assistance available under a Patient Support Program	
<ul style="list-style-type: none"> – Co-payment 	You pay the dispensing fee	
<ul style="list-style-type: none"> – Out-of-pocket maximum 	\$492 / family / calendar year	
<ul style="list-style-type: none"> – Generic substitution 	Limited to the cost of the least expensive interchangeable (usually generic) drug, unless medical basis for brand-name drug	
<ul style="list-style-type: none"> – Pharmacy partnership 	Arrangement with Loblaws and Sobeys/Lawtons *NEW* Discounts will be automatic when using your Medavie pay-direct card at all participating pharmacies	

	Current Coverage	Coverage Effective June 1, 2022
– Diabetic supplies	Covered – including insulin pump supplies	
– Glucose Monitoring Systems	Not Covered	*NEW* For insulin dependent: continuous glucose monitoring (CGM) receivers, transmitters or sensors
– Anti-obesity	Covered	\$5,000 / calendar year, subject to prior authorization and annual re-qualification
– Fertility	\$15,000 lifetime maximum	
– Sexual dysfunction	\$1,200 / calendar year	
– Smoking cessation	\$500 / 24 months	
– Vaccines	50%, \$500 lifetime maximum	
– Allergy serums	\$50 deductible / person / calendar year (out of pocket maximum \$150 / family) 100% to a maximum of \$1,000 / person / calendar year	100%
– Over the Counter Antihistamines (prescribed)		No coverage
▪ Vision Care	100%	
– Eye exams	Once / 2 calendar years (Once / calendar year for dependent children)	Once / 2 calendar years for adults (Once / calendar year for dependents under age 21)
– Maximum	Covered to the provider's Reasonable & Customary Limit	
– Frames	\$150 / 4 calendar years (every 2 calendar years for dependent children)	\$225 / 2 calendar years for frames and lenses (every calendar year for dependents under age 21) Includes Laser-eye surgery *NEW* Provider direct claims submission
– Lenses	Covered with diopter change	
– Laser-eye surgery	\$200 lifetime maximum	
▪ Ambulance	100% \$1,000 / calendar year	
▪ Hospital	100%	
– Accommodations	Private/semi-private room	
▪ Paramedical practitioners	100%	
– Mental health practitioners	Combined maximum of \$1,500 / calendar year Includes: Counselling therapist, psychologist and social worker *NEW* Psychotherapist	Combined maximum of \$1,800 / calendar year
– All other practitioners	Combined maximum of \$1,800 / calendar year Includes: Acupuncturist, chiropractor, chiropodist or podiatrist, dietician, homeopath, massage therapist, naturopath, occupational therapist, osteopath, physiotherapist, speech therapist	Combined maximum of \$1,500 / calendar year

	Current Coverage	Coverage Effective June 1, 2022
▪ Extended Health Benefits		100%
– Nursing and personal care services		\$10,000 / calendar year
– Accidental dental		Covered
– Other diabetic equipment		Covered, including insulin pumps
– Hearing aids		\$1,000 / ear / 3 consecutive years, includes batteries and repairs
– Orthopedic shoes and supplies		\$200 / calendar year
	(\$300 for dependents under age 21)	(\$300 for dependents under age 21)
– Orthotics	\$300 / calendar year	\$300 / 3 calendar years
	(\$400 for dependents under age 21)	(\$400 for dependents under age 21)

Note: most expenses are reimbursed based on the insurer's assessment of reasonable and customary fees.

What is Step Therapy?

For many conditions, such as high blood pressure, diabetes, gout, high cholesterol and depression, there are a number of equally safe and effective treatment options to choose from.

Under Step Therapy, the plan will reimburse the cost of a therapeutic substitution by your pharmacist, making it easier for you to get proven, safe and effective treatments in a way that can save money for you and the drug plan.

Life Insurance

Starting June 1, 2022, life insurance coverage will be provided by Manulife. There is no change to coverage or eligibility. For details about your life insurance coverage, contact Health Association of Nova Scotia.

Questions?

If you have questions about your benefits, please call Health Association Nova Scotia at 1-866-886-7246.

For more information on benefits, please visit www.healthassociation.ns.ca and select the **Benefits Plan Member Information** button.

This retiree benefits summary replaces any previous versions. Health Association Nova Scotia reserves the right to review the retiree benefits program and to modify, amend, discontinue, and/or make exceptions to the program. All information is subject to change. This document provides a snapshot of the key benefits available to you under the Retiree Health Association Nova Scotia Group Benefits Plan. In the case of a discrepancy, the contracts will prevail. More details on the plan will follow closer to the implementation date.