

Drug Card for Faculty

As of April 1, 2009, full-time faculty have a drug card. This card acts as a payment device. Instead of paying for prescription medicines and then submitting claims, and waiting for the 85 per cent reimbursement, faculty now simply give the card to the pharmacist, who swipes the card and then collects the 15 per cent payment from the faculty member. The 85 per cent is reimbursed to the pharmacist directly from Sun Life. No more waiting weeks for claim payment for prescription medicines.

The card will be available in 2010 for partial-load faculty.

This is a convenience that many faculty have asked for. So, you may wonder, why did it take so long to arrive?

In the current academic plan, a prescription drug is covered when it receives approval from Health Canada (it has a DIN number). In previous rounds of bargaining, the employer proposed the drug card but could not guarantee that the card would not change the current drug plan. The faculty bargaining teams found that the card could introduce a formulary, which is a listing of approved drugs at a certain point in time. Future drugs approved by Health Canada would not have been covered automatically by our plan, but would have had to go through other tiers of approval, controlled by the insurance company. That, coupled with a

resistance to applying the card to partial-load faculty, led the academic side to reject the proposals. In 2008 the card was reintroduced to the Joint Insurance Committee. The faculty members of the JIC received a commitment that this time the card would not change the plan, and that it would be applied to partial-load faculty as well as full-time. These

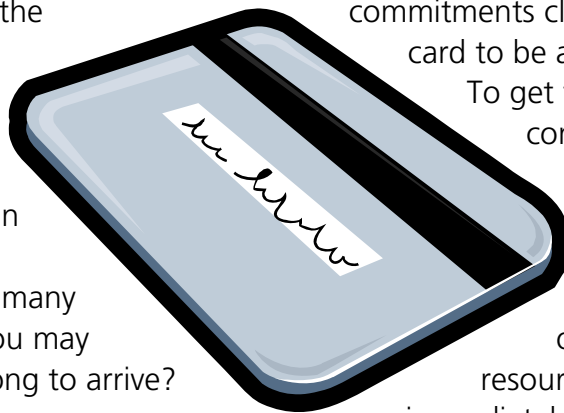
commitments cleared the way for the drug card to be approved.

To get the card, you needed to complete some paperwork from the college. If you did not do this, and do not have a card, please contact your union office and your human resources department

immediately. As noted, this applies now to full-time faculty only, with partial-load to follow.

Please note: After the date of implementation, if you pay for your prescriptions and submit claims in the "old way," you will only be reimbursed for 85 per cent of the new cost.

Once you have the drug card, the cost of drugs to the plan will be reduced, so it is important that you use the card.



** Formerly "On The Fringe"*

Insulin Pumps

The JIC is pleased to announce that we have gained payment for several members who were denied coverage by Sun Life for insulin pumps. For these members, it has meant over \$5000 in-pocket for the trouble of letting a JIC member know that their claim had been denied.

Recently the Ontario government extended provincial coverage of insulin-infusion pumps and supplies for adults over age 19 who have Type 1 diabetes. Previously coverage was limited to those under 19.

Moral of the story: If Sun Life denies your claim, contact a union member of the JIC – Jeff Arbus (jeff_arbus@hotmail.com); Paddy Musson (pdmusson@yahoo.ca); Donna Mese (happysinger1950@aol.com); Debbie Rautins (dcol26825@hotmail.com); Shirley McVittie (smcvittie@opseu.org).

Laser Eye Correction

If you, along with your eye specialist, have decided that laser surgery is for you, the cost might still be a deterrent. However, it may be less expensive than you think. You can combine your vision coverage with your paramedical coverage for laser surgery. That means you can combine \$400 in coverage from the vision care plan and up to \$1500 from your paramedical plan as long as the surgery is performed by an ophthalmologist.

Note that because the benefit year for vision care starts on September 1 and is a two-year benefit limit, whereas Extended Health Care is an annual limit starting on January 1, there may be some reconciliation required. Contact your union office or a member of the JIC for assistance.

Small Claims Court may be an option if your claim is denied

Scenario: You make a claim for a drug or paramedical service and Sun Life turns you down. You bring the issue to the JIC which is unsuccessful in getting the decision reversed because Sun Life and the employer stick to their interpretation of the plan. What can you do?



1. Give up – NOT recommended.
2. Hire a lawyer – Lawyers are very expensive. OPSEU may supply up to \$5000 from the Solidarity Fund, this is often a small part of any lawyer's bill for such a matter. The benefit that has been denied is often of less value than the investment in a lawyer. NOT recommended.
3. Try Small Claims Court. You may be surprised how easy this process can be. Small Claims Court applies to a claim of up to \$10,000. You can find more information at www.attorneygeneral.jus.gov.on.ca/english/courts/scc/

And you won't be alone. Contact your Local. As a result of a challenge by OPSEU, unions can now advocate for and represent members at Small Claims Court. The opportunity of financial support from OPSEU's Solidarity Fund makes this option all the more viable for members.

Applying for LTD Benefits: Things you need to know and do

To have to apply for the Long Term Disability (LTD) benefit means that there is a medical reason which is causing you to be unable to work. This is obviously not a good time in your life! The stress caused by your medical status is enough to handle! This article will assist you to be prepared for the application process and help to decrease the waiting time.

The JIC recently had a faculty member who took short-term sick leave and when it was time to go on to LTD, expected this to be a seamless process. It was not. She never expected to be declined, based on her numerous health problems. She was declined by Sun Life despite physician reports. She was finally approved after 7 months of very limited income. Don't let this happen to you!

Here are some of recommendations:

1. Apply **at least** 6 - 8 weeks before your short-term leave runs out. Your employer has to generate the appropriate forms and get them to you. Some may be inclined to wait until the last minute to send them to you so be a step ahead and get this process started sooner than later. Your HR department is who to contact.
2. The forms must include details such as test results, consultations, and all ongoing medical follow-ups in the attempt to treat your problems. Make sure that you ask your physician to include everything. It is not enough for your physician to state "unable to work". Your physician must provide the diagnosis and should give a prognosis. The physician must also provide detail on the limitations the member has and how those limitations affect the person's ability to work. They must include the reasons, both primary and secondary, of why you are unable to work. This includes issues of both a physical and mental health nature, as applicable. The most common problem in obtaining LTD is the lack of depth of the written report by the physician. Your doctor's written report is the key information source for your claim!
3. Do not be surprised if you are refused the first time (it seems to be the norm).
4. Sun Life may send you to their choice of physicians for another opinion. Sun Life would bear the expenses, if any, of such referral.
5. Keep records/copies of all data and correspondence, including emails.
6. A member does not have to involve the union, but the JIC Union members strongly advise that you do involve the union early, in order to have advice and support throughout the process. In the event you are refused, it is recommended you contact your local union immediately.
7. If you have any questions, feel free to contact any member of the JIC committee.

Don't Give Up!

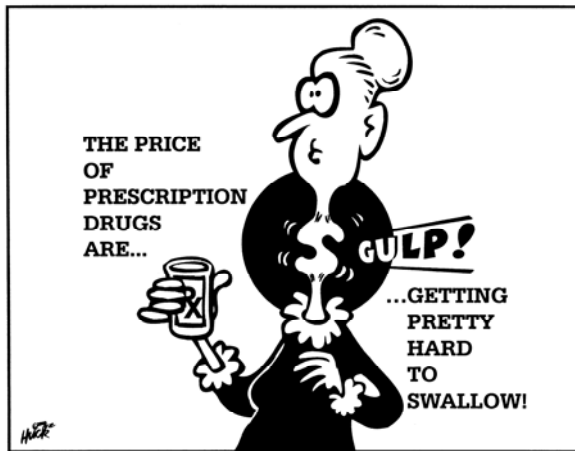
Denied access to sick days?

You have a right to access your sick days even if you have been approved for Long-Term Disability (LTD).

For example, if you have not used all of your Short-Term Disability (STD) days, and are not totally disabled and can do some work for the college, the college cannot block your access to those remaining STD days. You can still access those remaining sick days in a partial-return-to-work, in order to support

your salary. The college may, and in fact should, process your LTD claim prior to the date on which you may need it. This does not cut you off from your existing sick day credits. This interpretation is true irrespective of when you were hired.

If you have been approved for LTD you can, but do not have to use up remaining STD days.

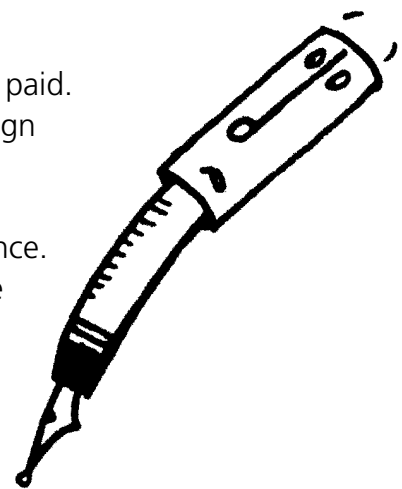


Orthopaedic Shoes benefit shined-up

A recent communications error resulted in some denials of claims for orthopaedic shoes. That error has been corrected. If you had any rejected claim for orthopaedic shoes within the last six months, please re-submit your claim immediately to Sun Life.

Partial-Load Employee Quiz - Benefits Fact or fiction???

1. Extended health is your basic coverage and it is 100% employee paid.
2. You are automatically enrolled in extended health UNLESS you sign off on it.
3. You can elect for optional benefits which include life insurances, vision care, hearing care, dental care and/or critical illness insurance.
4. You can only elect for optional vision and dental care if you have elected for extended health.
5. For benefit purposes you are considered a new employee under your first partial-load contract OR when there is a break of more than 6 months between contracts.



Answers on Page 5

Drugs given outside the hospital

In Ontario, cancer drugs may be paid for by hospitals, patients, and insurance companies. The physician may want to administer the drug outside the hospital, but in that case the Province may not cover the expense. Where administered in a hospital, Sun Life has argued that the drug is not covered by the drug plan. If you are receiving cancer treatments that are not paid for by the Province or by Sun Life, you are strongly advised to discuss this with your physician, and also to contact a member of the JIC for clarification.



Expenses claimed on your tax return? You may have to re-file

In cases where an insurance claim is paid retroactively, you may have to re-file your tax return if you paid the claim up-front and then claimed it on your return. We don't advise waiting for the auditor from Revenue Canada.

Answers to Partial-Load Quiz

1. This is FACT. Extended health benefits include: semi-private hospital coverage, allowable drug coverage,
2. This is FACT. If you are covered under a spousal/partner's plan, you can give away this benefit. But why would you? This is an employer-paid benefit. If your spouse/partner has another plan, the coordination of benefits with your plan will help you to get more of your prescription drug costs and wider paramedical coverage.
3. This is FACT. You can elect for one, two, or all of the listed benefits. Note these benefits are 100% employee paid.
4. This is FACT. This is another really good reason to take the extended health plan coverage.
5. This is FACT. You must have a break of six months in order to be considered a new employee and you must be a new employee to elect to add any coverage to your optional benefits.

Clarifications

In the April 2008 "On The Fringe" we reported that Extended Health, Vision, and Hearing care benefits for partial-load faculty were included in the benefit plan unless the faculty member chose to opt out of the plan because of spousal coverage elsewhere (Art. 26.06 A). In fact, for partial-load employees, the college pays 100% of the premium for Extended Health, unless the employee opts out because of spousal coverage elsewhere. The college provides access to the Dental, Vision, Hearing, Critical Illness/Catastrophic Event Insurance, and Life Insurance, for partial-load employees, provided the premium is paid by the employee. As we did report, even if the employee has spousal coverage elsewhere, we recommend they not opt out because of coordination of benefits.

As well, we reported that the deadline for Extended Health benefit claims in the academic plan is 18 months. More precisely it is the earliest of: 548 days (18 months) following the date on which the expense was incurred; or 90 days following the end of Extended Health Care coverage (for partial-load faculty who do not bridge to the next contract, or for retirees); or 90 days from the termination of the Extended Health Care plan, should that ever occur (including retirement).

We apologize for any confusion.

Academic JIC

The Academic Joint Insurance Committee gets its mandate from the Collective Agreement, Appendix IV, page 102. The four union members are elected at the CAAT (A) Divisional meetings held every two years. The term is four years, on a rotation basis (two members elected at each biannual Divisional meeting).

The union members are ably assisted by Shirley McVittie, OPSEU Senior Benefits Counsellor. Her expertise and commitment are an invaluable resource to OPSEU members.

Current union members on the JIC are:

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E-mail: jeff_arbus@hotmail.com

Donna Mese, Local 655
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1-800-268-7376 ext. 8657 or (416) 443-8888 ext. 8657
E-mail: smcvittie@opseu.org

If you need us, we are willing and able to help out