



Checklist for Extended Health Care (EHC) Benefit Plans

How does your plan compare?

ITEM	'IDEAL'	YOUR CONTRACT OR BENEFIT PLAN
Who pays for what:		
<p>Premiums Premiums are what Plan members pay the Plan carrier for an agreed upon set of benefits. The rate is negotiated between the Carrier (insurance company) and the Plan Sponsor (usually the Employer).</p> <p>Sometimes there are different premium rates for 'single' and 'family'.</p>	<p>Employer pays 100% of premium</p> <p>Maintain or lower employee share of premium to 100% employer-paid.</p> <p>Negotiate a "single parent rate" since "family" bases premium on two partners and dependents.</p>	<p>Employer pays: ____ % or \$ ____ per yr</p> <p>Employees pay: ____ % or \$ ____ per yr</p> <p>-----</p> <p>Single rate: \$ ____</p> <p>Family rate: \$ ____</p>
<p>Deductibles Deductibles are the annual amount the employee is required to pay up-front before receiving any reimbursement for extended health care (EHC) plan claims. Sometimes deductibles also exist for specific services such as vision care and dental care.</p>	<p>No deductibles.</p> <p>Where they exist, no increase in the amounts.</p>	<p>EHC Plan Deductible: \$</p> <p>-----</p> <p>what: amount:</p> <p>Other deductibles:</p>

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<p>Co-insurance Refers to the share of every claim to be paid by each party e.g. employer 80% employee 20%. It does <u>not</u> refer to the employer/employee cost split of premiums. It is paid <u>after</u> the deductible is paid, and it usually applies to <u>all</u> services in the Plan. It is another way employers pass on costs to employees.</p>	<p>no co-insurance</p>	<table border="1"> <tr> <td data-bbox="1327 228 1575 607">What's co-insured:</td> <td data-bbox="1575 228 1814 607">Employer pays:</td> <td data-bbox="1814 228 2030 607">Employee pays:</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	What's co-insured:	Employer pays:	Employee pays:																					
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<p>DRUG PLAN</p>																										
<p>Formulary: (list of drugs the carrier will reimburse) Formularies should be as broad as possible. Limited formularies (or "Managed Formularies") can exclude access to drugs because of costs, religious or cultural beliefs.</p> <p>Payment: Co-payment: Some plans require you to pay part of each claim for <u>certain</u> services e.g. prescription drugs, in addition to deductibles and co-insurance. It can be the same amount each time, like \$5 per prescription, or it can be a percentage of the total cost, such as 20% of each prescription. Some plans put limits on how much the plan will pay – called "caps" or "maximums". They can be dollar amounts, amounts per year, or lifetime limits. "Tiers" - Some plans require employees to pay different rates for different groups of drugs. "Preferred Provider Networks (PPNs)" - Pharmacies or chains agree to provide a service at a fixed, lower fee in exchange for plan members using their pharmacy for prescriptions.</p>	<p>Formulary:</p> <ul style="list-style-type: none"> - covers all drugs with a DIN (Drug Identification Number) - includes generic drugs option - covers homeopathic remedies and alternative therapies e.g. acupuncture - no "Managed Formularies" <p>Payment:</p> <ul style="list-style-type: none"> - no co-payment of prescription costs - plan pays dispensing fee - plan pays 100% of each prescription - use of a drug card (to avoid being out of pocket while waiting for reimbursement) - use of "preferred provider" networks to reduce costs - no annual or lifetime caps or maximums - no tiers 	<p>Formulary:</p> <ul style="list-style-type: none"> <input type="checkbox"/> don't know what's covered <input type="checkbox"/> covers all drugs with a DIN <input type="checkbox"/> covers homeopathic remedies <input type="checkbox"/> covers alternative therapies <input type="checkbox"/> uses provincial plan formulary <input type="checkbox"/> other <table border="1"> <thead> <tr> <th data-bbox="1327 954 1722 982">Payment:</th> <th data-bbox="1722 954 1814 982">Yes</th> <th data-bbox="1814 954 2030 982">No</th> </tr> </thead> <tbody> <tr> <td data-bbox="1327 982 1722 1015">plan pays dispensing fee</td> <td data-bbox="1722 982 1814 1015"><input type="checkbox"/></td> <td data-bbox="1814 982 2030 1015"><input type="checkbox"/></td> </tr> <tr> <td data-bbox="1327 1015 1722 1047">plan pays 100% of prescription</td> <td data-bbox="1722 1015 1814 1047"><input type="checkbox"/></td> <td data-bbox="1814 1015 2030 1047"><input type="checkbox"/></td> </tr> <tr> <td data-bbox="1327 1047 1722 1079">drug card available</td> <td data-bbox="1722 1047 1814 1079"><input type="checkbox"/></td> <td data-bbox="1814 1047 2030 1079"><input type="checkbox"/></td> </tr> <tr> <td data-bbox="1327 1079 1722 1112">use preferred provider network</td> <td data-bbox="1722 1079 1814 1112"><input type="checkbox"/></td> <td data-bbox="1814 1079 2030 1112"><input type="checkbox"/></td> </tr> <tr> <td data-bbox="1327 1161 1722 1193">prescription co-payment</td> <td data-bbox="1722 1161 1814 1193"><input type="checkbox"/></td> <td data-bbox="1814 1161 2030 1193"><input type="checkbox"/> _____</td> </tr> <tr> <td data-bbox="1327 1193 1722 1226">caps or maximums</td> <td data-bbox="1722 1193 1814 1226"><input type="checkbox"/></td> <td data-bbox="1814 1193 2030 1226"><input type="checkbox"/> _____</td> </tr> <tr> <td data-bbox="1327 1226 1722 1258">tiers in drug costs</td> <td data-bbox="1722 1226 1814 1258"><input type="checkbox"/></td> <td data-bbox="1814 1226 2030 1258"><input type="checkbox"/> _____</td> </tr> </tbody> </table>	Payment:	Yes	No	plan pays dispensing fee	<input type="checkbox"/>	<input type="checkbox"/>	plan pays 100% of prescription	<input type="checkbox"/>	<input type="checkbox"/>	drug card available	<input type="checkbox"/>	<input type="checkbox"/>	use preferred provider network	<input type="checkbox"/>	<input type="checkbox"/>	prescription co-payment	<input type="checkbox"/>	<input type="checkbox"/> _____	caps or maximums	<input type="checkbox"/>	<input type="checkbox"/> _____	tiers in drug costs	<input type="checkbox"/>	<input type="checkbox"/> _____
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VISION CARE			
<p>Glasses /contacts</p> <p>Eye exams</p>	<p>Glasses/contacts – every two years or when prescription changes (current norm - \$250 - \$500 every 2 years)</p> <p>Eye exams – plan reimburses full cost of annual exam; (current norm \$100 per exam)</p>	<p>Amount :</p> <p>Glasses: \$ _____</p> <p>Eye exams: \$ _____</p>	<p>Frequency:</p>
DENTAL			
<p>Payment – may be included in the EHC premium or may be a separate premium</p> <p>Co-payment – Some plans require employees to pay part of EACH claim, in addition to deductibles and co-insurance. It can be a fixed amount (e.g. \$5 per prescription) or it can be a percentage of the total cost (e.g. employees pay 50% of the cost of a crown.)</p>	<p>- For all levels: plan reimburses claims 100% no age limit for coverage no deductible no co-payment no annual or lifetime maximums</p> <p>- Ideal is at least “Basic” Coverage paid 100% by Employer</p>		
<p>Fee guides Provincial Dental Associations negotiate fees, usually every year.</p>	<p>Use <u>current</u> fee guide for dental practitioners and specialists to determine fees and reimbursement.</p>	<p>Dental Fee Guide year used:</p>	

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<p>"Basic" coverage:</p> <ul style="list-style-type: none"> - Diagnostic - usually refers to check-ups, x-rays, lab reports - Preventative – usually refers to cleaning, fluoride treatments, endodontics (root canals and nerve treatments), periodontic (gum treatments), fillings, and repair to existing dentures, crowns, bridgework) 	<p>"Basic" covers:</p> <p>Norms:</p> <ul style="list-style-type: none"> - employer pays 80%-100% of each claim - checkups - every 6 months - x-rays - every 6 months <ul style="list-style-type: none"> - full mouth every 3 years - lab reports – 60% of claim - cleaning (deep scaling) - every 6 months - fluoride treatments - every 6 months - root canals - 8 "units" per year - periodontal treatments - 8 "units" per year - fillings – non-bonded amalgam - repairs to existing dentures - every 6 months 	<p>"Basic" covers:</p> <ul style="list-style-type: none"> <input type="checkbox"/> checkups <input type="checkbox"/> every 6 months <input type="checkbox"/> other: _____ <input type="checkbox"/> x-rays <input type="checkbox"/> lab reports <input type="checkbox"/> cleaning (deep scaling) <input type="checkbox"/> fluoride treatments <input type="checkbox"/> root canals <input type="checkbox"/> periodontic (gum) treatments <input type="checkbox"/> fillings <input type="checkbox"/> repairs to existing dentures etc. <input type="checkbox"/> other: _____ <p>Payment:</p> <ul style="list-style-type: none"> - employee pays separate premiums of \$ _____ - employee pays ____% of claim <p>No Yes If yes, amount:</p> <ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> age limit for coverage _____ <input type="checkbox"/> <input type="checkbox"/> deductible \$ _____ <input type="checkbox"/> <input type="checkbox"/> co-payment _____% <input type="checkbox"/> <input type="checkbox"/> maximums \$ _____

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<p>“Major” coverage</p> <p>Usually refers to “restorative” work like porcelain crowns and inlays, creation of dentures and bridgework.</p>	<p>“Major” covers:</p> <ul style="list-style-type: none"> <input type="checkbox"/> porcelain crowns <input type="checkbox"/> dentures <input type="checkbox"/> bridgework <input type="checkbox"/> other <p>Norms:</p> <ul style="list-style-type: none"> - employer pays 50-80% of each claim - at least once every 3 - 5 years for each - may require pre-determination of benefits to be submitted before work is done. 	<p>“Major” covers:</p> <ul style="list-style-type: none"> <input type="checkbox"/> porcelain crowns <input type="checkbox"/> dentures <input type="checkbox"/> bridgework <input type="checkbox"/> other <p>Payment:</p> <p>employee pays \$ _____</p> <p>employee pays ____% of claim</p> <p>No Yes If yes, amount:</p> <ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> age limit for coverage _____ <input type="checkbox"/> <input type="checkbox"/> deductible _____ <input type="checkbox"/> <input type="checkbox"/> co-payment _____ <input type="checkbox"/> <input type="checkbox"/> maximums _____
<p>“Orthodontics” coverage</p> <p>Usually refers to braces and retainers.</p>	<p>“Orthodontics” covers:</p> <ul style="list-style-type: none"> <input type="checkbox"/> braces <input type="checkbox"/> retainers <input type="checkbox"/> other <p>Norms:</p> <ul style="list-style-type: none"> - employer pays 0 - 50% of each claim - lifetime maximum \$1,000 - \$6,000 - may restrict to dependents under age 19 - may require pre-determination of benefits to be submitted before work is done. 	<p>“Orthodontics” covers:</p> <ul style="list-style-type: none"> <input type="checkbox"/> braces <input type="checkbox"/> retainers <input type="checkbox"/> other <p>Payment:</p> <p>employee pays \$ _____</p> <p>employee pays ____% of claim</p> <p>No Yes If yes, amount:</p> <ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> age limit for coverage _____ <input type="checkbox"/> <input type="checkbox"/> deductible \$ _____ <input type="checkbox"/> <input type="checkbox"/> co-payment _____% <input type="checkbox"/> <input type="checkbox"/> maximums \$ _____

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<p>Private Duty Nursing</p>	<p>\$10,000 per calendar year No lifetime maximum</p>	<p>Amount per year: \$ Lifetime Max: <input type="checkbox"/> No <input type="checkbox"/> Yes \$_____</p>
<p>Out of province care</p>	<p>No deductible 100% of eligible expenses covered No lifetime maximums</p>	<p>Deductible <input type="checkbox"/> No <input type="checkbox"/> Yes _____ 100% expenses covered <input type="checkbox"/> _____% <input type="checkbox"/> Maximums: <input type="checkbox"/> <input type="checkbox"/> _____</p>
<p>Part time employee benefit coverage can take the form of:</p> <ul style="list-style-type: none"> - full coverage (part timers pay full premiums and receive full coverage) - pro-rated coverage (part timers pay a proportion of premium and receive only basic benefits and/or coverage for self and not family/dependents) - cash in lieu - a flat rate, an amount per hour, a percentage of salary <p>Eligibility: some plans require a certain number of hours worked to qualify for benefits. Obviously, this makes it harder for part timers to qualify.</p>	<p>Part time employees benefit coverage:</p> <ul style="list-style-type: none"> - What is considered ideal coverage for part time employees can vary. However, our goals include providing benefits to all members, discouraging employers from using part time workers to save money, and thwarting the casualization of work. - No restriction on eligibility of part time. 	<p>Part time employees receive:</p> <ul style="list-style-type: none"> <input type="checkbox"/> full coverage <input type="checkbox"/> pro-rated coverage <input type="checkbox"/> cash in lieu of benefits: <ul style="list-style-type: none"> <input type="checkbox"/> flat rate - \$_____ <input type="checkbox"/> per hour - \$_____ <input type="checkbox"/> percentage of salary _____% <input type="checkbox"/> eligibility restrictions

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<p>Retiree Benefits Can be:</p> <ul style="list-style-type: none"> - no coverage - same benefits as employees - same benefits but retirees pay different premiums - limited coverage (specific services, different caps). 	<p>Retiree benefits:</p> <ul style="list-style-type: none"> - Retirees receive same benefits as active employees 	<p>Retirees have:</p> <ul style="list-style-type: none"> <input type="checkbox"/> no benefits coverage <input type="checkbox"/> same benefits as active employees <input type="checkbox"/> same benefits but higher premiums <input type="checkbox"/> coverage by parts of Plan only <input type="checkbox"/> early retirees' benefits paid until age 65 <input type="checkbox"/> other:
<p>Benefits for active employees over age 65</p> <ul style="list-style-type: none"> - Mandatory retirement only exists in B.C., Saskatchewan, N.S., N.B., Newfoundland and Labrador (and is under review in B.C. and N.S. and Saskatchewan). All other provinces have ended it. - At age 65, employees become eligible for provincial public drug plans. In Ontario, CUPE is challenging whether the legislation ending mandatory retirements is age discrimination under the Human Rights Act. 	<p>Benefits for active employees over age 65</p> <ul style="list-style-type: none"> - Active employees over age 65 should be eligible for the same benefit coverage as those under 65. Some Plans require that employees over age 65 must first claim drug benefits from the public provincial plan, and the workplace plan may make up the difference, but this is NOT automatic and must be negotiated. 	<p>Active employees over age 65 have:</p> <ul style="list-style-type: none"> <input type="checkbox"/> full coverage under workplace plan <input type="checkbox"/> coverage under provincial plan only <input type="checkbox"/> public plan as "first pay" and workplace plan covers remainder <input type="checkbox"/> coverage under public plan only. <input type="checkbox"/> other:

ITEM	'IDEAL'	YOUR CONTRACT OR BENEFIT PLAN
COLLECTIVE AGREEMENT LANGUAGE*		
Guarantee of benefits	Employer cannot reduce or change benefits during the term of the agreement AND/OR without consultation with the union.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other:
No change in Plan or carrier	Employer cannot change the Plan or carrier without approval from the union.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other:
Right to grieve if benefit denied	Employer, not carrier, is responsible for providing benefits. Enables use of grievance procedure if benefit is changed or denied.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other:
Access to benefits information for employees	Employer must provide information on benefit coverage to all employees by hard copy brochures, or website.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other:
Disclosure of benefit plan information to union	Employer must provide union with a copy of the Master Contract that details benefits coverage and who pays for what.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other:
Notice to union of savings	Employer shall notify the union of any dividend, premium reduction, or any other savings from the Plan paid to the employer.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other:
Savings go to Plan improvements	Plan savings to be used to improve the Plan, not to give the employer a contribution holiday.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other:

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<p>Joint Benefits Committee</p>	<p>Joint benefits committees work best when they have:</p> <ul style="list-style-type: none"> - equal representation by employer and union; - training is provided to help committee members do their job; - actuarial advisory services are charged to the Plan; - clear mandate to review how benefits are procured, administered and costed; - access to documentation needed to carry out mandate; - clear role to review and approve specifications for tendering, carrier proposals and; - have regular meetings during working hours. 	<p>Joint Benefits Committee has:</p> <ul style="list-style-type: none"> <input type="checkbox"/> equal representation by employer and union <input type="checkbox"/> training provided to Committee members <input type="checkbox"/> actuarial advisory services charged to Plan <input type="checkbox"/> clear mandate to include: <ul style="list-style-type: none"> <input type="checkbox"/> how benefits are procured <input type="checkbox"/> how benefits are costed <input type="checkbox"/> how benefits are administered <input type="checkbox"/> access to documentation <input type="checkbox"/> Committee role to: <ul style="list-style-type: none"> <input type="checkbox"/> consult only <input type="checkbox"/> approve <input type="checkbox"/> meetings during working hours <input type="checkbox"/> other
<p>Notes: *For more detail and examples of negotiated language please see CUPE Bargaining Benefits Kit: "Collective Agreement Language" at cupe.ca</p>		

sl/cope491
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