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From the President

Well, I'm sure everyone would agree that this was a remarkable summer, and Celebration 2014 certainly put it over the top!

The Executive of the PEIRTA had their first meeting of the fall on September 12. As we begin our year we are preparing for our Annual Meeting on THURSDAY, NOVEMBER 6, at the ST. ELEANORS LIONS CLUB.

We would hope for a strong attendance as there are important items on the agenda for your consideration.

Our biggest concern over the past few months was, of course, the changes made to the Provincial Drug Cost Assistance Program. A letter compiled by joint efforts of Marg Stewart and Kimball Blanchard was brought to our Executive after our May socials. In

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June, twenty-seven letters were hand-delivered to all members of the Provincial Government. We received replies from only Richard Brown and Robert Mitchell (indirectly—he had been in communication with Marg prior to this). As we all know, the government then implemented changes without any response or regard for those involved!

PEIRTA AGM

November 6, 2014 St. Eleanors Lions Club 121 East Drive, S'side

Registration: 9 AM

Meeting: 10 AM

Meeting only: \$5.00

Meeting and hot lunch: \$20.00

Dr. James MacAulay and I attended the ACER-CART Annual Meeting in Ottawa from June 5-7 in Ottawa. I have begun to realize that our numbers (170,000 plus) and abilities as retired teachers make us a very powerful lobby group in this country. We have many contacts yearly from organizations seeking volunteers and leadership in



President Sheridyth MacNeill

various roles, and it is important for us to participate both provincially and nationally.

Some of our Executive members, along with Dr. James MacAulay, will be attending the ECRTO Regional Conference in Halifax, October 16 and 17. This gives the retired teacher organizations in Atlantic Canada the chance to meet as a group, share ideas, and compare ways to best lead our organizations into the future!

See President, 3

Visit our website at www.peirta.com

From the Editor

So, the dreaded changes to DCAP have been implemented. I assume that some of you have begun to see the impact. I'm currently tracking my costs as each prescription goes through. So far, \$3.19 is the magic number, consistent with the Regulations published the end of June. But I have also paid \$0 for a couple of prescriptions, which I'm pretty sure means a mistake on someone's part. I'm not questioning anything for the time being, but I want to see how much impact there is right at the counter and how much Government is saving on me.

My MLA called me right after the changes were implemented July 1. I think maybe we knew before Johnson Inc. knew. How bizarre is that? He pointed out that largely as a result of our actions, as individuals and as an organization, changes were made to the original plan, including a provision so that there would be some distinction between at-the-counter charges for those with and without private coverage. To give credit where credit is due, I believe we did have an impact, and I believe that he and maybe a handful of others worked to respond in some way to our concerns.

Ironically, we seem to have benefited everyone but ourselves (members of other groups now pay the same up front as we do, which I think is less than they used to pay, but we pay more than we used to). Worse, there is still little or no understanding that while we may see little impact at the counter, there is still likely to be a major impact on our rates going forward—a fact which has major implications for our plan and our members in the long term.

By the way, how do you feel about the fact that our president hand-delivered 27 letters to our legislators—and got one response?

On a different topic, I heard Cynthia Fleet on the radio this morning talking about the new strategic plan just released by the English Language School Board, the aim of which is to improve outcomes in math and English. I was shocked to hear that only 51% of graduating students leave high school with academic English and math. There was no mention of how many have one or the other but not both. And I have learned that the numbers are somewhat misleading because a significant number who follow a full academic program simply

don't take math in Grade 12—they're not required to. Interestingly, Ms. Fleet mentioned the value of Reading Recovery in large schools. But hasn't Reading Recovery been cut in a significant number of smaller schools? Go figure! The Strategic Plan makes for interesting reading, but I think it also raises some obvious questions with regard to resources (human and other), work load, assessment vs. teaching, etc.

I'm so glad I'm retired. When you read this I will be packing for a cruise to the Canary Islands, and I really won't care about any strategic plan except the captain's.

PEIRTA Executive does not necessarily agree with opinions expressed in material authored by those other than official representatives of the PEIRTA, and information about opportunities offered by others is for information only—no endorsement is implied.

Next issue mid-February. Submit material to margstewart@pei.eastlink.ca.

If you wish to read this newsletter online instead of receiving a hard copy, send me an email and I will let you know when each issue should appear on our site and on the PEITF site.

Letters to the editor should be a maximum of 200 words, must include a one-line bio, and may be edited for length..

PEIRTA Executive and Officers 2014-2016

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President (Cont'd from 1)

We wish to encourage as many as possible to attend our AGM on November 6. Our committee people have worked very hard on your behalf over the past year. Direction which was given at last year's AGM has been followed as best we could. It is important that we have a strong turnout from our membership. Your concerns will direct our efforts on your behalf.

SEE YOU NOVEMBER 6, 2014!!!!!!

Resolution to 2014 AGM

WHEREAS, attendance at the county socials is very small and each year seems to bring fewer members out; and

WHEREAS, costs to host these socials are escalating; and

WHEREAS, the county representatives are voted in at these meetings;

BE IT RESOLVED, that
Executive-sponsored county
socials be discontinued, and that
county representatives be
elected at the Annual General
Meeting when the rest of the
Executive are elected.

Address Changes

If your address changes, or if you know anyone who has had a change of address and/or is not receiving this newsletter, please have him or her notify our membership chair (contact info on page 2).

You Didn't Ask, but...

Joyce McCardle

Where has summer gone? Did we have any? Today (Aug. 29) I went out to get my newspaper and thought, it's fall! Anyway, ready or not the seasons change, much like the seasons of our lives. The solution: live and appreciate each day to the max. Don't put off what you want to do; as the saying goes, "Git 'er done!"

OK, enough with this month's sermon from the little mini home in Summerside. I do try to cram in all the things I want to do. In June I took a bus tour to Lancaster, Pennsylvania to the Amish country. What a great time. We saw the play "Moses," which was spectacular. I highly recommend this trip to any who haven't been there.

In July your past president Pat McCardle and I took a short trip to Grand Manan Island and Campobello Island. I think it was the only two days rain we had in the month, but we had a good time anyway. Oh yes, a word of warning: Campobello Island is Canada, so don't go into US and think you can count the hours you spend there as part of your US allotted time. I tried that; it didn't work; I had to pay tax on what I bought. It used to be 5%; now, of course, it's 14%. Thank you, Wes Sheridan and boys!!

The end of September my daughter, who lives in Edmonton, and I are going on an 8-day cruise out of Miami. It was a really good deal I found; mind you, it is hurricane season, but what the heck. If we don't get caught in one, I'll have something to write about in the next newsletter; if we do get caught in one and I survive, I'll have something really, really exciting for you. We have 2 days in Miami after the cruise so we are going down to the Florida Keys.

I was too lazy to write an article for the

last newsletter. I bet you breathed a sigh of relief and thought my pen had finally dried up. Nuh uh, sorry; I'm back!! Enjoy the rest of 2014. I'll talk at you in 2015.

Got this joke which I thought was cute enough to pass along.

My Favorite Animal Our teacher asked what my favorite animal was, and I said, "fried chicken."

She said I wasn't funny, but she couldn't have been right, because everyone else laughed.

My parents told me to always tell the truth. I did. Fried chicken is my favorite animal.

I told my dad what happened, and he said my teacher was probably a member of PETA. He said they love animals very much.

I do, too. Especially chicken, pork, and beef. Anyway, my teacher sent me to the principal's office. I told him what happened, and he laughed, too. Then he told me not to do it again.

The next day in class my teacher asked me what my favorite <u>live</u> animal was. I told her it was chicken. She asked me why, so I told her it was because you could make them into fried chicken.

She sent me back to the principal's office. He laughed, and told me not to do it again.

I don't understand. My parents taught me to be honest, but my teacher doesn't like it when I am.

Today, my teacher asked me to tell her what famous person I admired most. I told her, "Colonel Sanders."

Guess where the hell I am now...

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Group Insurance

~ by Kimball Blanchard

DCAP, DCAP, DCAP

Over the past two years we have been sharing information about proposed changes to the Drug Cost Assistance Act that affect drug coverage for those over 65 covered under our Group Insurance Plan. The Minister of Health And Wellness announced that the Province will save \$4,000,000 by implementing these changes. The major change, of course, was that those Islanders who have private health plans would see their plans become the first payer for any drugs covered in the formulary of the DCAP. We eagerly awaited the Minister's announcement about the date for implementation and for a full explanation of how the program would work. The announcement never came and the explanation of the program never came, but the implementation date did. The regulations were published in the Royal Gazette on June 28 and the implementation date was set as July 1, 2014. Pharmacies, it seems, were given three days to re-program their systems to be ready for the July 1 date.

Around this time, the Minister made the news by announcing that \$ 3,000 was saved by his department by not going to Newfoundland and Labrador to recruit doctors. But apparently the \$ 4,000,000 coming out of Islanders' pockets is not newsworthy. Certainly the media have not picked up on this story, even after being made aware of it, and the Official Opposition has not made a state-

ment about it. The whole scenario is mindboggling!

During a recent visit to my pharmacy I picked up the first published information I have seen from Government since the implementation of the changes to the DCAP. The brochure is titled "Public Drug Program Improvements." The brochure indicates that changes have been made "to how claims are processed through the public drug program system." It goes on to state, "With this change steps have been taken to ensure most Islanders won't see any changes. However, there may be individual cases where a person's out-of-pocket expenses are slightly higher or slightly lower." Further it states, "For Islanders who do not have private insurance nothing will change."

These statements may be correct, but my limited experience since July 1 at my pharmacy suggests something a little different. My two prescriptions prior to July 1 were covered by my health plan and the DCAP. Since July 1 my out-ofpocket expense has been \$ 6.38— \$3.19 for each prescription for a 90 day supply of each. The increase in cost to my health plan was \$86.91. The total change in shared cost (me and plan) was \$93.29. The total increase in cost to me and my plan for the year will be \$373.16. It can reasonably be argued that my "outof-pocket expenses are [only] slightly higher," at \$ 25.32 for the year. But a person who has three prescriptions for 30 day supplies would have direct out-of-pocket expenses of \$114.84 annually—a

little more than a slight increase.

The position of Government seems to be that the previous drug cost assistance plan was not sustainable. If this is true, then changes might have been necessary. But one of the problems with the recent change is that it is not equitable. To put the burden of the costs on the shoulders of those who have earned and are either sharing the cost or assuming the full cost of a private health plan is totally unfair. There are many ways the burden could be shared by all Islanders, but our Health and Wellness Department, and the Minister, do not seem to be interested in treating us fairly.

In the above mentioned brochure, the changes are touted as a way to make it possible for all Islanders to have a Catastrophic Drug Program. The brochure provides three examples to illustrate the benefits of the plan, including—to my surprise—references to blood pressure medication and cholesterol medication. Are these catastrophic drugs? I wouldn't have thought so. But the examples do attract people's attention

The introduction of a Catastrophic Drug Plan will no doubt be positive for many Islanders, but for retired teachers covered under our plan, the benefits of the program may be minimal because our plan already provides some benefits in this area.

It seems that this is a done deal. Our Group Insurance Trustees are in the process of reviewing options available to us. In the meantime, please review the
→

information provided by your pharmacy when you obtain a prescription drug previously covered by the DCAP. Compare the costs and the breakdown of coverage with costs and coverage prior to July 1. This will give you an indication of how your plan will be affected by these unjust changes.

I am still puzzling over how the Province will save \$ 4,000,000 without it costing anybody anything. Do you believe in miracles?

Group Insurance Rate Update

Generally speaking the rates for the various aspects of the Group Insurance Program will remain unchanged for this year, with a couple of exceptions.

The rate for life insurance will increase by 3%. This means that those with the basic retirement coverage of \$15,000 will pay an extra 27 cents a month, or an extra \$3.24 a year.

While we are monitoring the effect of changes to the DCAP the Trustees have decided to maintain the basic rates for health insurance, but the travel insurance part of the plan requires an increase. Single coverage will increase from \$2.15 a month to \$2.54 a month, and the family rate goes from \$4.95 a month to \$5.85 a month. This means that travel medical insurance for a single person will be \$30.48 a year, and for family coverage the cost will be \$70.20. These costs are included in the basic rates for the health coverage. The travel insurance provided under our plan is very comprehensive and offers very good valueespecially given last year's changes to the look-back period for pre-existing conditions. People are reminded to check about any pre-existing conditions which may affect their coverage and to be aware of the proper procedures in the event that a claim has to be made. You will find the most recent definition of "pre-existing condition" on page 8.

Information provided by Medavie Blue Cross indicates that 36% of our drug claims over the past year were for brand name drugs, and that these drugs make up 60% of the total cost of prescription drugs in our plan. This is close to the standard for health plans, but it also indicates that savings can be had by using generic drugs when possible.

Savings to our plan can also be had by comparing prices at various pharmacies. You may or may not know that pharmacies don't all charge the same for the same drug/ prescription. Medavie Blue Cross tells us that two chains in PEI account for over 50% of our claims, and they happen to be among the most expensive. Obviously, the choice of a pharmacy need not, or should not, be driven by price alone. But it is interesting that the cost of pills and capsules can vary from pharmacy to pharmacy by almost 9%. Significant savings could be gained simply by having more members patronize the less expensive pharmacies. Members are encouraged to check with their pharmacies re dispensing fees/ admin costs and actual drug prices and, if possible, do some comparisons with other pharmacies.

Changes may be in the offing for our health plan, but for now it is business as usual while our Group Insurance Trustees monitor the current situation. Every member can help reduce costs to the plan by being a good consumer. Members' health and welfare is most important, but financial factors are a reality we must continue to be aware of.

This guy is obviously retired ↓↓↓



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ACER-CART~ submitted by Jim MacAulay

ACER-CART'S 23rd AGM was held June 5-7 in the Ottawa office of the Canadian Teachers' Federation (CTF-FCE). Twenty-five participants from all thirteen organizations attended. President Sheridyth MacNeill represented PEIRTA.

We began on June 5 with a presentation by MP Lawrence MacAulay, who spoke on effective lobbying. MPs are very upset in Ottawa because they haven't had a meeting with the Federal Health Minister. Mr. MacAulay indicated that the Liberal Party supports Pharmacare. He suggested that Executive members of ACER-CART should try to arrange meetings with as many MPs as possible and present letters or petitions with our concerns.

We began Friday morning at 8:30AM with a welcome from President Tom Gaskell and greetings from CTF-FCE President Dianne Woloschuck and the Secretary General, Dr. Calvin Fraser. Next we heard Executive Reports from Tom Gaskell and Executive Director Roger Regimbal. President Gaskell highlighted action taken during his term: rethinking our lobbying approach, continued care and concern for retirees, forging new relationships with like-minded organizations, and action needed as a result of the demise

of the national Health Accord.

After a BBQ with the CTF staff, we heard provincial reports. Later in the afternoon President Woloschuck spoke to the group, emphasizing among other things the need for us to work more closely for advocacy.

Next Francine Filion, CTF Director of Communications, highlighted the need for us to share information and create public awareness about our issues. Those you can contact include CBC CANADA, CBC POLITICS, CTV NEWS, and RADIO CANADA, as well as the *GLOBE and MAIL*. Andre Picard (G and M) especially speaks on health issues and could be used as a possible contact. Again she emphasized the importance of being in contact with our MPs.

On Saturday morning Richard Harrison, Senior Consultant with Johnson Inc., reviewed the changing age dynamics in Canada (Stats Canada projects that in Canada by 2031 one in four will be over the age of 65; 85% of those will have one chronic condition, and 15% will have two or more chronic conditions); the effect of these changes on medicare costs; and various aspects of health care expenditures and shortcomings.

A presentation by Canadian Medical Association (CMA) representatives Kristen Smith and Francois Lessard explained the "Choosing Wisely Canada" campaign, supported by 30 medical specialty societies, designed "to help physicians and patients engage in conversations about unnecessary tests, treatments and procedures." Lessard pointed out that the CMA supports extending the scope of practice of pharmacists in our system.

Other actions/positions supported by the meeting included the following:

- A) Continued support for the CTF
 "Hear My Voice" initiative
 urging that Government be
 more transparent, heed the
 voices of Canadians concerned
 about the state of democracy,
 and refrain from attacks on
 unions
- B) Establishment of a standing committee for political advocacy
- C) Publication of a new brochure to facilitate advocacy
- D) Encouragement for ACER-CART members to use "all candidate forums" during the next election campaign.
- E) Importance of working together to address the shortage of geriatricians and gerontologists.

We finished the ACER-CART Meeting with reolutions, priorities for 2014-2015, and Executive elections. See the executive list on page 7.

Life Insurance Reminder

Are you approaching 65? Giving any thought to life insurance?

- At age 65 the term life insurance under the PEITF Group Insurance Plan automatically is reduced to \$15,000.
- Your coverage can be converted to a private plan with the same carrier without evidence of insurability. Apply within 31 days of turning 65.
- You may purchase an amount equal to your present coverage, or a lesser amount.
- Before your 65th birthday, so you will be prepared to make the decision that best suits your situation, you should check to find out whether you are insurable, and investigate market rates for the amount of insurance you may wish to carry.

Questions? Call Johnson at 902-628-3537 or 1-800-371-9516, or visit their office at 111 Kent Street in Charlottetown.

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Gilles Arsenault



Dear RTA members.

It gives me great pleasure to bring you greetings as we start a new school year. I hope you had a wonderful summer season and that you are now making plans to enjoy the fall and winter seasons as they are quickly approaching.

As you would know and understand, this time of year is an exciting and exhausting one for teachers. They are settling in with their new groups of students and they know that many challenges are in front of them for this school year. This year, teachers will be asked to meet the needs of all of their students and yes, with fewer teachers in the system. This is where the Federation has to rely on folks like you to voice our concerns in order to properly fund our education system. Education is our best investment!

If you haven't seen the CTF's teacher work-life balance research, I would encourage you to check their website as there is a vast array of information regarding teachers and the work that is required of them. The report states that working conditions significantly affect teacher work-life balance. Ask any teacher to describe his or her working conditions, class composition, and demands on their time in relation to the education profession and you will get similar answers: overload, overwhelming, stressful, and unreasonable. We need to work together in order to enhance student learning and at the same time have

a reasonable workload for teachers. We want our teachers to have the ability to teach, so let's take some of the other tasks off their plates to allow them to do what they do best...teach.

In closing, I want to inform your membership that we are working, once again, on our Annual Convention. This year's theme will be **TEACHING: Our Passion, Our Profession**. This theme is a very fitting one. We will be concentrating on these two professional development days to re-boost and re-energize our teachers.

Looking forward to meeting many of you! Enjoy the fall season.

Take care!

ACER-CART Executive 2014-2015

President: JoAnn Lauber (BCRTA), New Westminster, BC

Past President: Dr. Thomas Gaskell (RTO-NSTU), Little Bras d'Or, NS

Vice-President: Brian Kenny (RTO/ERO), Burlington, ON

Region East: Dr. James MacAulay (PEIRTA), St. Peters Bay, PE

Ontario: Norbert Boudreau (RTO/ERO), Nepean,

ON

Region West: George Georget (STS), Saskatoon,

SK



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Breast Cancer Support

YWCA Encore is a free 8-week program for women who have experienced breast cancer. The program begins *Tuesday, October 14, 2014, 12 noon,* at CARI Pool area, Charlottetown, PE.

YWCA Encore is an exercise and education program designed specifically for women who have experienced mastectomy, lumpectomy, or breast reconstruction surgery at any time in their lives. Based around floor and pool exercises and relaxation techniques, it is safe, fun, and therapeutic.

WE AIM TO HELP YOU

- improve mobility and flexibility in your arms and shoulders;
- boost your self esteem and self image;
- relieve any discomfort you may be experiencing as a result of surgery;
- reduce the potential risk of developing lymphoedema;

- manage your lymphoedema if you already have it; and
- create a positive attitude to life and health.

Program begins Tuesday, October 14th, 12 noon to 2 pm. Please contact Amanda Creamer at aquaticsadmin@caripei.ca, or call 902-569-4584, extension 245, to be put on the interested list!

The program will be instructed by Marlene Cairns: AQX Instructor and Trainer; CALA Instructor and Trainer; YWCA Encore Instructor since 2006; Arthritis Society aqua and land fitness assessor since 2005; and breast cancer survivor.

Tel: 902-569-4584

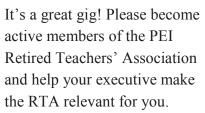
e/info@caripei.ca

w/caripei.ca

There is a form for the participant's physician to sign indicating that he/she is aware the person is taking the course, so pre-registration is advised if at all possible! You can call CARI to have the form mailed to you or pick one up at CARI pool.

Please feel welcome to share this information

Welcome to new retirees.



From Abileen Clark in *The Help*, "You is kind, you is smart, you is important."

Out-of-Province Travel Medical Insurance

A reminder that changes have recently been made to our out-of-province travel medical coverage. The most significant change is to the section on the stability period and the definition of stability as it relates to a pre-existing condition. From the amended section:

A pre-existing condition is considered Stable if you, in the 90 days before the departure date (or 90 days before the booking date for Trip Cancellation coverage*), have not:

- ☐ been treated or evaluated for new symptoms or related conditions;
- ☐ had symptoms that increased in frequency or severity, or examination findings indicating the condition has worsened;
- □ been prescribed a new treatment or change in treatment for the condition (generally does not include reductions in medication due to improvement in the condition, or regular changes in medication as part of an established treatment plan);
- □ been admitted to a hospital for the condition; or
- ☐ been awaiting new treatments or tests regarding the medical condition. (does not include routine tests).

The above criteria will be considered by Medavie Blue Cross collectively in relation to the overall medical condition.

If you have any questions, please contact Johnson Inc.

*Trip cancellation insurance coverage is not currently included in our policy.

