

Newsletter

Prince Edward Island Retired Teachers' Association

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From the President

As I sit at my desk trying to put something intelligent on paper, I find it's getting harder all the time (the intelligent part, anyway!!) It has been exceptionally quiet since the last newsletter. This is not a bad thing because it makes my life very easy—except when it comes to telling you what exciting things I did. I didn't travel anywhere so that was a dead end. But I had recently received the NBRTA newsletter and saw an article I had given President Margaret Urquhart permission to print. I decided it still offered food for thought. Recently I lost two family members and I realized again what the widows were facing. I hope this is some help to you and if you haven't taken care of some of the things mentioned, you will do so.

What follows is taken from an

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article I wrote for the September 2008 Voice for Island Seniors. My husband of 41 years had passed a couple of years before. These are some things I learned and feel are still worth repeating.

Retiring, Aging and Beyond

I have to say retiring was great and I didn't give much thought to the other two [words] in the title until much later. I was too busy enjoying my newfound freedom, travelling with my husband and doing all the things I didn't have time for while working. However, the aging part began to make itself known in new aches, pains and medical conditions, but still life was good and the last word seemed far away.

We all like to think we have done our best to smooth life's path for our children; now they are adults, but we need to continue this practice. As long as at least one parent is left mentally capable, that one will take care of the business of the other. When you get left alone, you begin to think about who will take care of your business. That business begins the day your life partner leaves you alone. Planning the wake and funeral is not easy when your heart is broken. The days and



weeks that follow do not get easier for a long time. If the surviving spouse/partner was the bill payer/ bookkeeper, things won't be so over-whelming. However, if the one left has never paid any attention to such, it can make the transition to being single much harder.

Most of you know what you're doing, I'm sure. I don't want to belabor a point, but I would like to share with you some of the things both people should know and discuss. Of course, people without children or those never married

See President, page 3

Visit our website at www.peirta.com

From the Editor

Joyce isn't the only one who is finding it more and more difficult to come up with something to write. I could rant about US politics, but that elevates my blood pressure. I could express my opinion on how the PEI school review ended, but that wouldn't do much for my blood pressure either. And, believe it or not, I don't have an opinion on whether any one or all of the five schools should be closed. (Given the whole experience, I was surprised to hear Mr. Grimmer, while discussing rezoning issues on CBC on April 26, say that "These decisions that were made by the Board of Directors through the consultation process, they are decisions, they are final..." Go figure!) I could speculate on why Government

still doesn't appear to have a new pharmacy agreement. Or I could wax eloquent on how wonderful it would be to see a basic income pilot in PEI—a proposal that I think originally came from Peter Bevan-Baker, was supported by all members of government, and now appears to be defunct. Ontario has already initiated such a pilot. How great if this kind of project were to go forward in PEI with a full-throated bi-partisan blessing. I believe that because we are small, and smart, and innovative, PEI should be able to do things that others can't, but we rarely do (except, apparently, in waste reduction). An assured livable income would have the potential to lift vulnerable people (many of them seniors) out of poverty and positively impact health, education, justice, etc.

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My space is almost filled! I will finish with a reminder that this newsletter goes out three times a year (early October, mid-February, and early June) and that you can access it any time online. All issues have been archived on the PEIRTA site. So if you don't receive your hard copy for some reason, go online to get it, but let me, Joyce, or Pat know that you didn't receive yours.

Phew!

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 early October. 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..

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President (Cont'd from 1)

should also have their master plan in place.

1. **A WILL:** It is surprising how many people neglect to make a will or to update the one they have from their youth.

2. POWER OF ATTOR-

NEY: This is very important. What happens if you or your spouse/partner becomes incapacitated? Is there someone who can take over? I'm not an expert on these matters, but your lawyer can explain it to you.

3. A LIVING WILL/ HEALTH CARE DIREC-

TIVE: Again, get this explained. Community Legal Information Association (CLIA) is a great resource.



4. LIFE INSURANCE

POLICIES: Is the beneficiary the one you actually want to get these benefits? Often old, small policies get forgotten and the beneficiary is not changed with the marital status or other commitments. Make sure you check with your employer/past employer about any policies from the company. Sometimes there

are small policies through your financial institution(s). Find out about any such policies and have a written account of them.

5. **ASSETS:** Make sure both people in the partnership know exactly what assets are available (e.g., stocks, bonds, RRSP's/RIF's, bank accounts) and all financial institutions with any of your money. Make a list of these and keep it on file or in a safety deposit box.

6. DAILY/MONTHLY EX-

PENSES: You would be surprised at the number of people who pay absolutely no attention to the day-to-day financial operation of the home. Even if you don't want to take over this chore, sit down with the bill payer and become familiar with the routine. Did the home finance manager bank and/or do business online? Are some of your monthly utilities automatically deducted from your bank account? If you own your own property, is the deed in both names? Are your bank accounts joint accounts? This certainly makes things easier.

7. MISCELLANEOUS ITEMS TO TAKE CARE OF WHEN LEFT ALONE:

- Change the car registration to the survivor's name.
- Change the phone (have another name on it with yours).
- Change the dish/cable (have another name on it with yours).
- Change the name on all

utilities (have another name on them).

- Check with the pension department/former workplace about pension continuity.
- Check out all insurance policies.
- Remember you will get hit harder on taxes because the income is not split. Also, remember that "large" \$2,500 CPP death benefit is taxable.

These are just a few things one discovers at a time when you are least able to deal with being alone. It will be doubly difficult if you aren't used to the financial and "day-to-day taking care of business" routine.

In conclusion, I want to reiterate – be prepared! Know your household and financial business. This means **BOTH** of you.

Change of Address: Pension and Benefits

Pensions & Benefits asks that you keep your mailing address up-to-date.

Each year, the Pensions & Benefits office distributes pay advice slips, T4A's and newsletters directly to pensioners of the Teachers' Superannuation Fund (TSF). To ensure that pensioners don't miss any mailings, and to receive TSF related mail in a timely manner, please remember to keep your mailing address up-to-date with Pensions & Benefits. Please contact the Pensions & Benefits office by phone at (902) 368-4200 or by e-mail at tsf@gov.pe.ca to provide updated information and be prepared to provide your name and date of birth to confirm your identity.

Who Determines Drug Coverage?

by Kimball Blanchard

Occasionally the Group Insurance Trustees receive requests to have particular drugs covered by our plan. The request usually is made because a member's physician prescribes a drug that is new or is one that the doctor believes will be more effective than a previously prescribed drug. When the member goes to the pharmacy to have the prescription filled the pharmacist or clerk may indicate that the particular drug is not covered by our plan. Why does this occur?

The Group Insurance Trustees exercise control of our plan in cooperation with the various carriers (there are different carriers, or underwriters, for different kinds of insurance in our plan—critical illness, life, salary continuation, etc.) and are able to make adjustments to our plan after negotiating with the carriers to gain approval.

One thing the Trustees do not do is make decisions on which drugs are covered in our formulary. Making such decisions would require a level of expertise that we as educators do not possess. Neither does Johnson Insurance make these decisions. Their role is to manage the financial aspects of our total plan, pay claims, negotiate with the

insurance companies on our behalf, and provide necessary and timely information to the Trustees.

In the area of drug coverage the Trustees rely on the drug formulary as established by Medavie Blue Cross. Medavie Blue Cross has a Medication Advisory Panel (MAP) which meets every month; it provides a "comprehensive review of medications to ensure the benefits offered are proven effective. medically necessary and cost affordable."* The panel is composed of medical specialists, GP's, pharmacists, nurses, and a pharmacoeconomic specialist. The latter determines the cost effectiveness of the drugs under review. Pharmaceutical companies that wish to have drugs covered must make a submission to this panel and present all appropriate medical evidence, test results, field tests, etc. The panel makes the decisions that determine drug coverage for all Medavie Blue Cross' managed drug plans. This type of drug review is a normal practice for companies that provide managed drug plans to consumers.

When MAP receives a submission the panel will determine whether the evidence shows that it is effective and that it is safe to use, given possible side effects,

and looks at any other available evidence, such as if it is being used effectively in other countries. The panel may request additional information from the manufacturer, and will also look at the drug in connection with provincial drug plans, before a final decision is made.

As part of the complete review of a medication there is also a Canadian Agency that provides input to the process.



If approved, the drug may be included in the formulary with full benefits, or it may be added with full benefits but have a maximum on the amount to be paid. Or the drug may be approved as a special authorization drug, which means that the member must submit an application for approval before coverage is granted, or approved as a supplement to the Government plans.

If a drug is declined, it may mean

that there is no medical evidence that the newer drug is more effective than older and usually less expensive drugs. Prohibitive costs may also be a factor. New biologic drugs are very expensive and many private plans cannot bear the expense. In some cases, Medavie Blue Cross may negotiate an acceptable price with the drug manufacturer, or in some cases intervention by the provincial governments may be required to cover the cost.

Pharmaceutical companies spend large amounts of money to market their products and in some instances more money may be spent on marketing the product than is spent on the development of the product.

Whether a drug is approved or declined has no financial impact, positive or negative, on Medavie Blue Cross. Nor does Johnson Inc. gain or lose financially. Our plan is affected in that we pay the claims, so if a very expensive drug is added to the formulary, our plan bears the cost when it is prescribed.

Our aim is to provide the most effective coverage for our members within our financial limits, and with the process used by Medavie Blue Cross to establish their formulary we feel our interests are being attended to while dealing with a very complex industry.

There is no doubt that a member may be frustrated when a particular prescription drug is not covered at the pharmacy, but at least we can know that the decision was made by an expert panel using all the evidence available at the time.

* Source: "An Evolving Drug Plan Landscape," Anne-Marie Smith, BSc. Pharm., Practice Lead, Drug Plan Solutions

COGNICITI Initiative

At the June 2016 AGM of ACER-CART, a motion was passed to recommend to its members that they make their membership aware of the Cogniciti project.

Cogniciti is an initiative of Baycrest Medical Centre in Toronto, a North American hospital leading in the treatment of and research into dementia.

Essentially, Cogniciti is a test, lasting about 15-20 minutes, taken confidentially on line. It tests memory, problem solving and other factors that measure your cognitive health. It rates you compared to others your age and education and can act as an early warning assessment. It can be taken on a fairly regular basis, once your base score has been established. It is strictly confidential and only you and Cogniciti researchers will know the score. They do not know or care to know your name.

"Cogniciti.com" can be checked out on the web and you can find the test instrument by following the links. You can also find out more about Baycrest by going to the web.

Distracted Driving

Editor~ From RCMP website.

Distracted driving is a form of impaired driving as a driver's judgment is compromised when they are not fully focused on the road. Distracted driving qualifies as talking on a cell phone, texting, reading (e.g. books, maps, and newspapers), using a GPS, watching videos or movies, eating/drinking, smoking, personal grooming, adjusting the radio/CD and playing extremely loud music. Even talking to passengers and driving while fatigued (mentally and/or physically) can be forms of distracted driving.

- Drivers who use hand-held devices are four times more likely to get into crashes serious enough to cause injury.
- Even when drivers use a handsfree phone, they are less aware of the traffic around them. They tend to react more slowly to a critical event or worse — they may not detect the danger at all.
- A study found that in 80% of collisions, the driver had looked away from the road 3 seconds prior to the crash.
- Driver distraction is a factor in about 4 million motor vehicle crashes in North America each year. (<u>CAA</u>)

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History of the PEI RTA Editor's note~ Joyce McCardle has over a period of time compiled a lot of information about the RTA in PEI. This history will be published as space allows. Thanks, Joyce.

1990-1993

At the 1990 AGM, a new slate of officers from Queens County was installed.

Executive 1991-1992

Past President: Helen Robbins President: Winnifred Cutcliffe Vice-President: Mary McIsaac Secretary: Ella Currie Treasurer: Grace Mutch Members-at Large: (Prince) Aubin Gallant (Queens) Mary Buchanan

(Kings) Claire Murphy

The PEITF President was Linda McGuire and Minister of Education was Paul Connolly.

- The semiannual meeting on April 24, 1991 had 96 present.
- The resolution re teachers' pensions from the 1990 AGM was rejected by the executive. Michel Plamondon explained that had CPP and the teachers' pensions not been integrated, higher premiums would have been required.
- A resolution to forego the semiannual meeting in future and have only the AGM was defeated.
- 140 attended the AGM on October 11, 1991.
- A change to the Constitution set the term of executive positions at two years instead

of one.

- The founding meeting for ACER-CART was held June 15, 1991. PEIRTA president Winnifred Cutcliffe attended. It was agreed that PEI would join the national organization and that the fee of \$50 would be sent.
- The president announced that PEITF increased our yearly budget from \$1,000 to \$2,000/ year.
- The first scholarship from the sale of *Teachers Remember* was presented to Anna M. Richard.

A new slate of officers from Prince County was installed.

Executive 1991-1993

Past President: Winnifred Cutcliffe President: Mabel McLellan Vice-President: Helen Turner Secretary: Mary McKenna Treasurer: Virjene Cole Members-at Large: (Prince) Anne Chiasson (Queens) Mary McIsaac (Kings) Claire Murphy

The PEITF President was Linda McGuire. Ministers of Education were Paul Connolly (1992) and Keith Milligan (1993).

- The semiannual meeting on May 15, 1992 had 65 present.
- Allan Murphy reported on Maritime Medical and stated that due to the high deficit, the premiums would rise in October.
- Rufus Reid reported there

was to be a 4.4% increase in pensions in June.

- 100 attended the Oct. 23, 1992 AGM.
- Rufus Reid questioned Minister Connolly on the problem with the teachers' Superannuation Fund. Connolly agreed it was a significant problem that had to be solved jointly by Government and PEITF. The unfunded liability of 260 million dollars was partly caused by government not contributing to the fund from 1931-1980.
- Due to a deficit in Maritime Medical, co-pay was raised to \$6.00 and premiums increased 16%. Rufus Reid expressed concern about the cost of insurance-- \$99.15/family.
- The AGM on Sept. 24, 1993 had 80 present.
- Allan Murphy reported that insurance co-pay would be increased to \$10.00 maximum.

At the AGM a new slate of officers from Kings County was installed.



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Bethany MacLeod

It certainly has been a great spring in PEI. Having the sun shining and tulips beginning to bloom is a welcome sight for all. Thankfully the beautiful weather has served as a welcome distraction for those involved in Island education as storm clouds resulting from the school change process and public meetings continue to linger.

At the onset of the process, teachers were assured that the "Better Learning for All" process would see the pressing issues of class sizes and class composition addressed. The PEITF took steps to ensure that teachers were free to participate in the review and to add their voices to the discussion without fear of repercussion.

Many nights were spent at meetings, many schools were visited, many emails were answered, and many phone calls were taken, all from teachers expressing their concerns about the process. The stress on teachers, students, and their families was immense. Teachers and the general public came out in large numbers to discuss school change in this province. While these meetings were heated at times, the prepared presentations, for the most part, were well researched and respectfully presented. If anything, the process certainly demonstrated that education matters to the people of PEI.

Unfortunately, the resulting changes

from this process will do very little to positively impact the issues of class size and class composition, which we understood as being among the reasons for the review. Now that this process has been completed it would appear that there will still be large class sizes and the pressing class composition issues will remain. All this makes me wonder if the decisions made by the government were more for political posturing than educational benefit?

On a more positive note, we are anticipating a productive AGM this year.

The PEITF has worked to implement many of the recommendations put for-

ward in our organizational review including an upcoming survey on issues pertaining to PEITF communications and group insurance. The constant carousel of educational changes teachers have endured over the past number of years have exhausted teachers but

also strengthened their resolve to move education forward, and that is certainly a positive.

Spring, however, is a time for renewal. Although at times teaching seems all consuming, it is important for everyone to remember to take time for themselves and their families. As the saying goes, we need to stop to smell the flowers sometimes, especially this year! We continue to appreciate the support of the Retired Teachers Association in our collective quest for a sustainable education system.

Take care.

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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).

The following item has been taken directly from the PEITF website.

PEITF Travel Insurance: Update on Pre-Existing Medical Conditions

As you know, the Emergency Out of Province Travel Insurance plan for teachers has a 90 day medical stability clause. The stability clause means that if you have a pre-existing medical condition, it must be considered medically stable for 90 days prior to your departure date in order for there to be coverage if you suffer a medical emergency or sickness related to this condition while you are travelling away from PEI.

A pre-existing condition is considered stable if the member, in the 90 days before the departure date, has not:

- 1. Been treated or evaluated for new symptoms or related conditions:
- 2. Had symptoms that increased in frequency or severity, or examination findings indicate the condition has worsened;
- 3. 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);
- 4. Been admitted to a hospital for the condition; or

5. Been awaiting new treatments or tests regarding the medical condition (does not include routine tests).

Recently, one of our members had a change in their medication for a preexisting medical condition which was as a result of an improvement in their condition in the 90 days prior to travelling out of province and they wondered if that was considered to be a change to their medical stability.

When you review number 3 above, it seems that a change in medication due to an improvement in their medical condition would not affect their medical stability; however, this may not be true in every circumstance.

Medavie Blue Cross, the insurer of our Travel Insurance plan, has indicated that each individual case must be examined. For example, if the change in medication was made close to the departure date and the member has a reaction shortly after travelling, they might not be considered medically stable prior to travel as there was insufficient time to determine if there would have been any adverse reaction to the change.

As you can see, this is not a black and white issue. If you have any questions concerning medical stability of any pre-existing condition, please feel free to contact Medavie Blue Cross prior to your departure date if you are travelling outside of PEI.

Historic School Buildings



I hink I have now published all the pictures of old schools that I have seen. You will find all or most of them on the PEIRTA website, including any that I might have missed. Thanks to those who have supplied pictures. If anyone finds any that we do not yet have, please send them to Bill for the website. Thanks. Marg

Orthotics

For anyone interested in custom made orthotics, check the PEITF website (www.peitf.com) for a brief but fairly comprehensive reference guide to benefits under our group insurance plan. The link is at the bottom of the home page.

Group Insurance Booklet

Please note that you can find the details of our group health plan online at www.peitf.com. Go to the site, scroll down on the opening page, and click on Group Insurance Booklet.