

February 7, 2023

VEAES Members,

The coming weeks will see a lot of discussion about our benefits plan. We are reaching out to each member today to let you know the process that will begin in the coming weeks regarding our Extended Health Benefits (EHB) Plan through Pacific Blue Cross

### **History**

Vancouver, along with two other teacher unions in BC, negotiated excellent health benefits plans prior to 1996, when provincial bargaining was mandated for Salary and Benefits. Our plan has continued to be superior to the provincial plan that was negotiated as an “opt in” model. This means that locals can make their own decisions whether or not they wish to retain their current EHB plan or join the provincial plan.

The reason this option is provided is that we are unable to independently negotiate improvements to our local plan. We have been unsuccessful in our efforts to reallocate existing funds within our local plan to meet current member needs. This means that our plan has remained the same while the provincial plan has sporadically and incrementally improved. Each time the provincial plan improves, the Vancouver Teachers’ Federation (VEAES and VSTA together) has brought the matter to a membership vote.

In many ways, our local plan is superior to the provincial plan. However, this round did see a few small improvements in the provincial plan, so we are once again bringing the decision whether to remain in our local EHB plan or join the provincial EHB plan to the membership.

It’s important to understand that this is a one-time move. We cannot return to our local EHB plan if we make the decision to join the provincial plan.

### **Benefits plans and you / your family**

Which benefits you access is a deeply personal and individual matter, one that is closely connected to your medical health and likely, to your family health profile. The treatment your medical needs dictate, and the plans you and your doctor develop cannot be generalized over the membership as a whole, and each person must determine what will work best for you.

Here are some factors to keep in mind:

- As we age, our medical needs can change and expand. What is a priority for us may not reflect our long-term health needs.
- If your plan covers multiple family members, deductibles and individual limits will play a role

- Processes such as direct pay or guarantees of doctor prescribed coverage make a big difference in the work and timelines of receiving treatment or medication
- Whether the services you need are covered extensively enough for your medical conditions
- The changing costs of practitioner services and access

### Plan comparison

There are some aspects of the provincial benefits plan that are improvements on what is in our current, local plan. The main ones include the new \$1200 for registered counsellors or registered social workers. The provincial plan also includes a pay direct card to reduce the paperwork associated with some claims. Our local plan is superior in other ways, *and*, there are many aspects of the EHB that require a deeper look. You can [compare the Vancouver plan to other locals here](#) (Burnaby, for instance, is in the provincial EHB plan) or you can look at the [comparison chart we've created](#) on many of the main benefits.

Our local plan includes “unlimited” access to most paraprofessionals, and while we know that is fettered by Reasonable and Customary limits, that teachers can exceed the 24 sessions with a doctor’s note. Benefits limited by dollar amounts will not change as fees for services increase.

**Example: Registered Massage Therapist (RMT)**

Local plan:

- Minimum value of \$3000 per year for RMT at the current rate, no cap on coverage with doctor’s recommendation. (\$125 x 24)
- That amount of coverage will increase with any practitioner fees.

Provincial plan:

- \$1000 cap in the provincial plan will pay for 8 sessions of hour long RMT treatments at the current going rate. (\$125)
- The number of sessions will decrease as practitioner fees increase.

Deductibles also vary between our plans, with the local plan at 80% reimbursement until \$1000 is spent **per family** on medical expenses, then coverage begins at 100%. In the provincial plan, the \$1000 deductible is **per family member**, meaning that some members of the same family can be receiving full reimbursement while others are still paying the 20% deductible.

In our view, the most significant difference between the two plans is the Drug Formulary. In the local plan, any medication prescribed by your doctor are covered, whereas in the provincial plan, only medications on the [“Blue Rx” list created by Pacific Blue Cross](#) are covered, and they retain the right to require you to try all lower cost alternatives to prescribed treatment. This four-tier system has some cheaper treatments covered immediately, many medications that require a rigorous pre-approval process and additional documentation prior to coverage, a third category of medications that are not

covered at all, and a fourth category of medication that *may* be covered if the member makes a successful application to the BC government through Fair Pharmacare.

#### Example: Depression Medication

Local plan:

- Unlimited coverage for medications prescribed by doctor

Provincial plan:

- Some depression medications covered
- Some depression medications require pre-approval (physician completed form requiring diagnosis, demonstrated failure on at least two other cheaper medications)

#### Timeline and Process

Now that all of our local and provincial bargaining tables are completed and ratified, we are looking forward to the opportunity to meet with members and discuss this important decision. We understand from the employer that a decision to join the provincial plan will likely take effect in April 2023.

Today or tomorrow, you'll receive a survey from VEAES soliciting questions for Pacific Blue Cross (PBC). We will collate these questions and provide them to the PBC staff in advance, in order to ensure the best coverage of the material. Please do not use this forum to ask very specific personal questions about individual medications or treatments or find information that is available on the webpages included in this email, or [on the PBC website](#).

**On Monday, February 13**, the VTF will host a virtual meeting with representatives from the Pacific Blue Cross / HUB, organized by the VSB payroll and benefits department. The meeting will be in webinar format. Members can ask questions after the presentation through the chair of the meeting. The presentation will be recorded for members to access later.

<https://us06web.zoom.us/j/87929397660?pwd=VDhXaE9LV1paeHk4aWFOWmFsSGc1QT09>

Passcode: VTF

Webinar ID: 879 2939 7660

Passcode: 552517

**Wednesday, February 22**, the VTF will host an in-person information session at Tupper Secondary for members who have additional questions. There will not be a PBC / VSB facilitator at this meeting

**Monday and Tuesday, February 27-28** Simply Voting platform will be made available for members to cast their vote to remain in the local EHB plan or move to the provincial EHB plan.

**February 7-12** Members can submit questions to PBC through VEAES survey

**February 13** Virtual meeting (Zoom) with invited guests from PBC / HUB featuring pre-submitted questions and a live Q&A session

**February 22** In-person VTF information session at 4PM at Tupper Secondary for discussion and questions

**February 27-28** Members can vote through Simply Voting on whether to retain our local EHB plan or move to the provincial EHB plan.

We hope that these opportunities will provide sufficient information for all members to cast an informed vote, and that discussions and conversations will continue at the worksites between these meetings to share the implications more broadly. This is a serious decision that will impact all members.

In solidarity,

VEAES Table Officers