Annual Welfare & SUB Newsletter

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A look back at last year.





A Message from the Board of Trustees

As 2022 ended, we begin 2023 by taking a moment to reflect on the benefit enhancements we made to our plan, the switch in insurance carriers for our Life, Short Term Disability (STD) and Long-Term Disability (LTD) and the yearend financial results for the Welfare and SUB Trust Funds. The last few years has been a journey like no other, and we commend our membership for battling through the challenges to make the best of these unprecedented times.

Our annual newsletter provides a summary of the work and effort that the Board and the administration office completed over 2022. We also wanted to provide you with a snapshot of our financial position in both the Welfare and SUB Funds. We continue to analyze the data, speak to our experts, and monitor rising benefit costs. As previously communicated, the Welfare Trust Fund subsidizes the cost of the benefit plan when contributions are too low. The increase in the Collective Bargaining Rate in 2022, 2023 and 2024 ensures that the Trust Fund keeps up with the rising cost of claims. However, even with these increases the Trust Fund continues to provide plan subsidization to the membership.

As we move toward a more stable (we hope) 2023 we look forward to working with our membership and our newly appointed Trustee Candidates through the program that was established in 2022. Despite any challenges we encounter this year, the best days still lie ahead

Board of Trustees

Steve Foffano, Chairman Ross French, Secretary Frank Benincasa Nathan Bergstrand Les Ellerker Ken Luxon Dave Marcus Bill Stanger

Candidate Trustees

Braedan McIntyre Barrington Price

Canada Life – Life, Short-Term, Long-Term Disability

Group life insurance is a common member benefit that provides a death benefit to your beneficiaries if you die while you are eligible under the benefit plan. The goal of group life insurance is to give our members a benefit that can protect their family from financial hardship in the event of your death.

Group Disability coverage is also very *important* in case you become physically unable to work

due to non-occupational sickness or disability.

In 2021, we marketed the Life, Short-Term Disability and Long-Term Disability Plan as part of our financial due diligence but more importantly, we had received feedback from our membership regarding service delays and other items of concern from the insurance carrier. Quotations were requested from several large insurance carriers and

through our analysis, three were chosen for final review. We met with all three insurance carriers with our focus on cost, service, and communications. A final decision was made to move to Canada Life effective January 1, 2022. Members have provided positive feedback based on their experience with Canada Life. Costs are down and communications with the carrier are open and frequent.



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Speech Therapy was also added to the list of paramedical services available to you and your dependents.

Benefit Enhancements/Changes made in 2022

On January 1, 2022, the Board of Trustees made the following changes:

Speech Therapy w added to the list of paramedical service

The Psychologist benefit was enhanced to include Social Worker, Behaviour Analyst, Psychoanalyst, and Psychotherapist were aincluded in the Mental Health benefit, and Marriage Counsellor (if they have a designation of one of the above. A Doctor's note is no longer required.

Speech Therapy was also added to the list of paramedical services available to you and your dependents. No prescription is required and is part of the \$400 combined annual maximum.

SUB Plan – Claim Requirement Reinstated

Effective January 1, 2022, members who meet the criteria for a

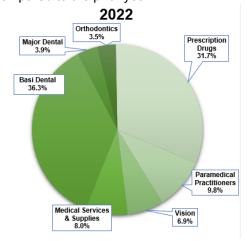
SUB claim must also be on the Out of Work list with the Union to claim SUB.

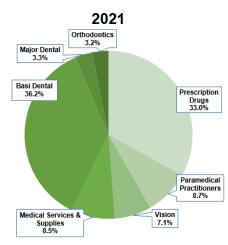
Should you have any questions regarding the above, please contact the RASI office by email at local67@reliableadmin.com or by calling 905-387-5861.



In 2022, members' combined Health and Dental claim dollars increased by 7.7% compared to the prior year. As expected, members are utilizing enhancements to the mental health benefit, resulting in paramedical claims up by 21.1%. Prescription Drugs, Vision, Basic Dental, Major Dental, and Orthodontics claims are all steadily on the rise compared to the prior year.







SUB 2022 – Utilization has Increased!

Your Supplemental Unemployment Benefits (SUB) plan pays \$175 per week for up to 10 weeks.

To qualify, you need to have 1,800 SUB hours during the previous 24 months. You must also be receiving Employment Insurance (EI) benefits or completing the waiting period and meet all the required criteria.

Over the last few years, due to COVID-19 lockdowns and Trade School being at its highest enrollment levels, SUB benefits have averaged \$360,021.

With contributions at \$0.20/hour and work being

down since 2019, the financial stability of the SUB Fund is a concern. The Board of Trustees will be analyzing additional data as it pertains to work hours and projecting future expenses to determine next steps.

If changes to the SUB Fund are required, the Membership will be advised.





Annual Welfare Report

Current Plan and Rates

Employer contributions made on behalf of all plan members are held in a single Trust fund, which is intended to pay for the entire cost of the Group Benefits Plan. The Trust Fund depends on contributions as revenue, both from Employers and Self-Paying members to pay Dental Expenses have for Benefits and Expenses.

As with the SUB Trust Fund. The Welfare Trust Fund has been adequate to pay for any increase in claims and expenses to also ensure that the plan meets the needs of its members. However, over the last few years, the gap between contributions by **Employers and Self-Paying** members has been growing. In fact, Health and increased approximately 27%.

On average, Health, Dental, Life and Disability benefits

increase approximately 5% per year.

These increases are normally offset by an increase in Employer contributions and the members who are selfpaying and by investment factors. However, over the last few years and through the Pandemic, these assets have not increased at the same levels as expenses.

The chart below outlines current direct payment rates.

Category	Life	ГТД	STD	Health Care	Dental	Emergency Travel	Hospital Cash	HCSA	2 Mo Se		ctu 2 A M		tual Actual nthly Monthly	
Regular	х	Х	Х	Х	Х	Х	X	Х	\$	315.00	\$	360.00	\$	372.47
Extended (Rate after 12 months of direct payment at the regular rate)	Х	Х	Х	Х	Х	Х	Х	Х	\$	368.99	\$	360.51	\$	372.47
Modified	Х	Х	Х					Х	\$	61.65	\$	134.57	\$	140.20
Survivor				Х	Х	Х	Χ	Χ	\$	150.33	\$	237.28	\$	237.28
Retiree Full	Х			Х	Х	Х		Х	\$	315.00	\$	316.29	\$	326.09
Retiree (age 65 and over)	Х			Х		Х		Х	\$	155.00	\$	211.34	\$	221.14
Retiree (age 65 and over)	Х							Х	\$	40.00	\$	79.01	\$	85.05
Retiree Survivor				Х		Х		Х	\$	155.00	\$	132.33	\$	144.92
Local 666 Retiree	Х			Х		Х		Х	\$	141.58	\$	148.13	\$	161.93
Local 666 Retiree	Х							Х	\$	20.00	\$	15.80	\$	17.01

^{*}Taxes, Administration Fees, and the Health Care Spending Account are an additional cost to the Welfare Plan

Contributions to the Welfare Plan are Declining

Declining plan member contributions is unfavorable for the benefit plan because it reduces the Welfare Plan's ability to pay for insurance and administrative costs.





"Declining plan member contributions is unfavorable for the benefit plan"





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We're on the Web!

www.reliableadmin.com

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905-387-4146

Email:

Local67@reliableadmin.com

Here's how to submit a Dear RASI question regarding your Benefits Plan:

Email RASI your benefit plan question with **Dear RASI** in the Subject Line or call RASI to provide your suggestion over the phone.



Announcing... Upcoming Contest!

Let's get digital, digital! The UA Local Benefits Plan is launching a series of contests as part of the **Let's Get Digital** Campaign. All UA Local 67 Benefit Plan Members are invited to participate.

Look out for the "Let's Get Digital" man in the next Pipewrench to find out the Contest Rules and Prizes!



Let's Get Digital

EI Sick – After December 18, 2022: 26 Weeks

El sickness benefits can provide you with financial assistance if you can't work for medical reasons. If you are applying for El Sickness benefits, please inform RASI. We will provide you with a UA Local 67 Benefit Plan Disability Guide.

Although, a Short-Term Disability claim cannot be submitted to Canada Life until the 26 weeks of El Sick are exhausted, RASI can assist in expediting your claim if your sickness and/or disability will extend beyond the 26 weeks of El Sickness benefits. We will assist with the coordination of your Short-Term Disability claim so that there is no lag or very little lag in income replacement.

The UA Local 67's non-occupational Short-Term Disability benefit provides another 26 weeks of El Sick Benefit equivalent (2023 \$650/week) once your El Sick benefit is exhausted, and you meet the definition of disability. You must be covered by the plan as a Regular member at the time of your disability.

It is important that you notify RASI well before the EI Sickness period ends. If you do not, Canada Life may delay or deny your claim.

Please call the RASI office for more information, to receive your *Local 67 Benefit Plan Disability Claim Guide and Frequently Asked Questions*, or to get started on your claim.

Dear RASI,

Why was my dentist visit paid for by the plan, but not my Health Care Spending Account (HCSA)?

Most Dentists automatically submit your dental claim directly to your plan with Green Shield (GSC), and you do not need to do anything. However, a dental office cannot submit any unpaid balance to your HCSA- that part is up to you!

Your HCSA is like a bank account that you can use to pay for eligible health and dental expenses not fully

covered by your group benefits plan or your provincial health plan.

So, it is always up to you to direct Green Shield when you want a claim paid from your HCSA.

Your HCSA covers a wide range of health and dental expenses such as medical equipment, drugs, medications, eyeglasses, paramedical practitioners and orthodontic expenses, as well as co-payments or deductibles.

To submit the unpaid portion of your dental claim to your HCSA, you can sign into your GSC everywhere account online or on your mobile app. Go to Submit a claim, choose HCSA claim, and complete the rest of your claim details. Remember to retain your official dental receipt.

If you are covered under a secondary plan, make sure your dental visit goes to both plans first, if a balance remains, then you can submit it to your HCSA.