

ONE T

Ontario Non-union
Education Trust



CAEAS-ECAB webinar: Introducing ONE-T and your benefits plan

October 2018

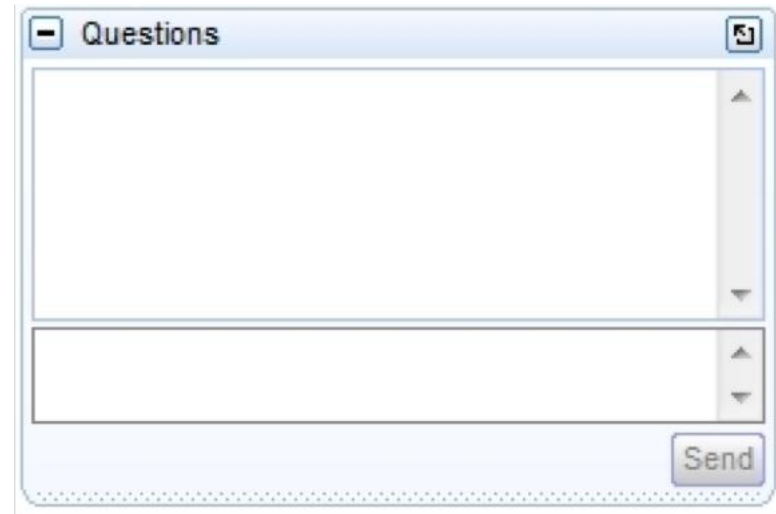
Purpose of today's webinar:

To formally introduce you to ONE-T, provide an overview of your benefits plan and the support available, and give you an opportunity to ask questions

1. Welcome & recap
2. Introducing ONE-T
3. Understanding your benefits plan
4. Member support/communications
5. Your questions

A few housekeeping notes....

- Participants will be muted for the presentation
- To ask a question, type it into the **Questions** box
- We'll answer as many questions as we can, at the end of the presentation
- Recordings (French and English) will be posted on the ONE-T website after the webinars are complete



- ONE-T General Manager (Corina Feiger)
- Cowan (plan administrator)
- Great-West Life (insurer)
- Cubic Health (drug plan management)
- Eckler (benefits & communications consultant)

Recap

Where we are today, and how we got here

- As of June 1, 2018, your benefits are provided through ONE-T – an employee life and health trust (ELHT) – instead of through your school board
- Membership includes:
 - CAEAS-ECAB (Directors, Supervisory Officers, other non-union employees)
 - Principals/Vice-Principals
 - Approx. 15,000 members total (actives & retirees)
- Ontario government provides funding via negotiated amount per FTE (full-time equivalent) employee

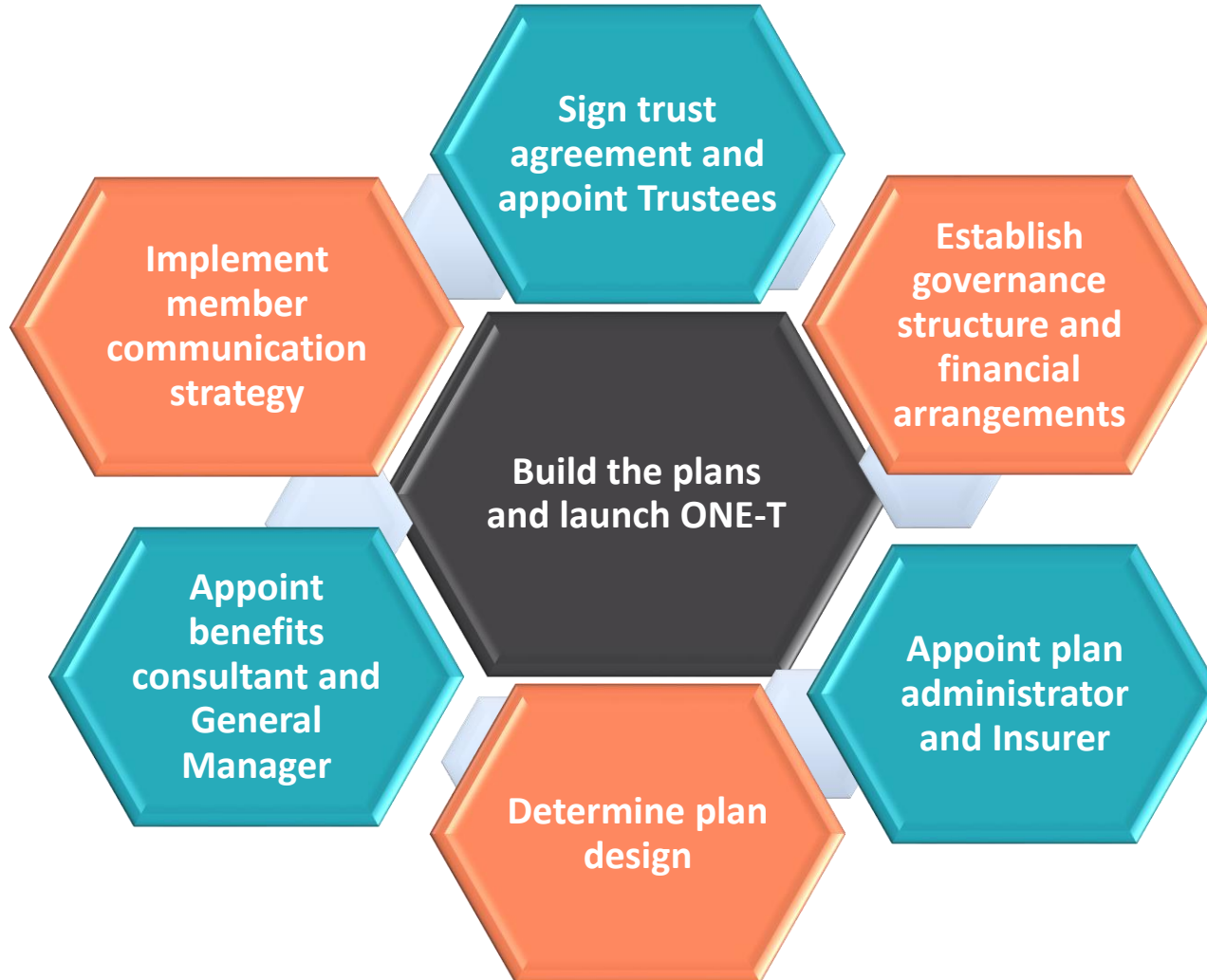
Then....	Now....
<p>Defined benefit model: Traditional benefits plans provided by individual school boards</p>	<p>Defined contribution model: Benefits funded through fixed annual contributions from Ontario government</p>
Wide range of benefits plan designs	<p>Consolidated benefits plans:</p> <ul style="list-style-type: none"> • CAEAS-ECAB Active Plan • CAEAS-ECAB Retiree Plan
Range of different providers (selected by school boards)	<p>Consolidated providers:</p> <ul style="list-style-type: none"> • Cowan • Great-West Life • Chubb • Cubic Health
Short-term view	Sustainability focus

Important: New plans under ONE-T are not identical to ANY previous Board plans!

We've had some challenges....

- Integrating several plans (CAEAS-ECAB and P/VP, active and retiree) into a single benefits trust
- Finalizing Trust Agreement/Participation Agreements
- Data issues
- Member education on new plan provisions
- Implementation delays

Moving from 72 Board plans to consolidated benefits plans was a major undertaking. Thank you for your ongoing patience and support.



Introducing ONE-T

How it works, and what it means to be a member

What is an ELHT?

- Tax-preferred vehicle to provide benefits
 - Seeded with an initial contribution from the government
 - Essentially “owned” by plan members
- Funds held in trust for members and must be used to pay for:
 - Designated health, dental and life insurance claims
 - Reasonable administrative expenses
- Governed by a Board of Trustees, appointed by member representatives and the government
- Future financial health is based on “experience”

Roles and responsibilities

Entity	Role	Main Responsibilities
Board of Trustees	Trust governance	<ul style="list-style-type: none"> • Policy governance, strategic planning and ONE-T's overall operations
Cowan	Plan Administrator	<ul style="list-style-type: none"> • Maintain member information to support plan administration • Collect funding amounts from employers • Track and report taxable premiums
Great-West Life	Insurer	<ul style="list-style-type: none"> • Review and pay Life, Health and Dental claims
Chubb	Insurer	<ul style="list-style-type: none"> • Review and pay AD&D claims
School Board	Employer	<ul style="list-style-type: none"> • Provide employee info to support benefits administration • Remit monthly employer contributions
Plan Member	Employee/ ONE-T Member	<ul style="list-style-type: none"> • Select coverage level (single/family, optional benefits) • Appoint beneficiary(ies) • Provide required information on covered dependents • Use the plan responsibly

Meet your Trustees



Dr. Sue Wurtele (Trustee Chair)

[READ BIO](#)



Faye Drennan

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Zev Frishman

[READ BIO](#)



John Lewis

[READ BIO](#)



Ron McNamara

[READ BIO](#)



Michel Paulin

[READ BIO](#)



Robin Pilkey

[READ BIO](#)



James (Jim) Sinclair

[READ BIO](#)



Lee Watchorn

[READ BIO](#)

Bios are posted online at
www.one-t.ca

Understanding your benefits plan

Getting to know the plan and its provisions

Goal:

To develop a comprehensive, current and sustainable plan that meets members' needs, with the available funding

- Developed by CAEAS-ECAB Plan Design Team and approved by Board of Trustees
- Incorporated feedback from member survey on benefits needs and preferences
- Separate plans for actives and retirees
- Includes drug plan management provisions (Cubic Health)

- Provides comprehensive benefits coverage
- No member co-pay or deductible
 - 95%/5% premium share
- Ability to buy extra optional coverage for:
 - Life (Actives only)
 - AD&D (Actives only)
 - Critical Illness
- Streamlined claims submission
 - Online/mobile app
 - Pay-direct benefits

- **Health**

- Prescription drugs
- Paramedical services
- Vision care
- Semi-private hospital
- Out-of-country emergency medical
- Private duty nursing
- Medical services/supplies

Plan summaries (active and retiree) are posted on the ONE-T website:

www.one-t.ca/ECABbenefits

- **Dental**

- Basic, major restorative, orthodontics

- **Life Insurance**

- Member (Basic & Optional), Spouse, Child (Optional)

- **Accidental Death and Dismemberment (AD&D)**

- Member (Basic & Optional), Spouse (Optional)

- **Critical Illness**

- Member, Spouse (Optional)

Main features:

- Pay-direct drug card
- No deductible
- Includes life-sustaining drugs, diabetic supplies, preventative vaccines
- Excludes non-life sustaining OTC and lifestyle products
- Mandatory generic substitution
- Therapeutic class pricing (TCP)
- Ingredient mark-up cap
- \$6 dispensing fee cap
- Limit of 5 dispensing fees per chronic medication/year
- FACET program to manage PA claims for specialty drugs – implemented to help ensure long-term plan sustainability

- Independent, unbiased **Prior Authorization (PA) program** for specialty drugs used to treat complex diseases
- Uses disease-state based approach & transparent set of clinical criteria – all evidence-based – to ensure safe and responsible specialty drug utilization
- Run by Cubic Health’s team of Clinical Pharmacists
 - Every claim is reviewed by a clinical expert
 - No affiliation with any insurance company, claims processor, pharmaceutical manufacturer or retail pharmacy group
 - All FACET Pharmacists are fully licensed

- Managing high-cost claims is becoming increasingly complicated
 - More than two-thirds of all new medications brought to market today are specialty products
- That's why FACET focuses on **specific complex areas**

Did you know?

When a FACET Pharmacist reviews new FACET PA claims, over 40% of the time, there is a need for active clinical intervention by the Pharmacist (working in partnership with the specialist)

- Major disease states managed under FACET:
 - Age-Related Macular Degeneration
 - Asthma/COPD
 - Cancer
 - Chronic Hepatitis C
 - Chronic Migraines
 - Crohn's Disease/Ulcerative Colitis
 - High Cholesterol
 - Multiple Sclerosis
 - Psoriasis
 - Rare Genetic Disorders
 - Rheumatoid Arthritis

www.facetprogram.ca/caeas-ecab

The screenshot shows a web browser window with the URL <https://www.facetprogram.ca/caeas-ecab>. The website header includes the FACET PROGRAM logo and the text "FACET PROGRAM" on the left, and "CAEAS-ECAB" on the right. Below the header is a green navigation bar with "FORMS" and "CONTACT" links. The main content area features a white box titled "Prior Authorization" with the following text:

CAEAS-ECAB's drug plan requires members to submit a claim for certain diseases which require more clinical evaluation

Submitting your claim for drug coverage in any of the diseases listed below is done through a manual or online submission. After submission a case manager will contact you within 3 business days to confirm receipt of the claim.

1. Select from the list of forms below
2. Print form and complete with Physician's assistance
3. Fax completed form to 1(844) 446-1575

Below this text is a table with two columns: "Disease Search" and "Drug Search". The "Disease Search" column is currently selected and highlighted with a green underline. It contains a list of diseases, each with a right-pointing chevron icon:

Disease Search	Drug Search
ASTHMA	>
CANCER	>
CHRONIC MIGRAINE	>
CROHN'S DISEASE/ULCERATIVE COLITIS	>
GENERAL REQUEST	>
HEPATITIS C	>
HIGH CHOLESTEROL	>
MULTIPLE SCLEROSIS	>
PSORIASIS	>

- 3 possible decisions under the FACET Program:
 1. Claim is **APPROVED** as submitted
 2. Claim is **CONDITIONALLY APPROVED**
Decision finds specialty therapy is justified but drug and/or dosage requested is not the most effective, safe and/or cost-effective option. Alternate specialty medication is approved.
 3. Claim is **DECLINED**
Declined for any eligible PA drug if member does not meet evidence-based clinical criteria for specialty medication for a given disease state

- Special series to educate members on new drug plan provisions:
 - Understanding Your Drug Coverage
 - Reducing Your Out-of-pocket Costs
 - Understanding Mandatory Generic Substitution
 - Grandparenting and Prior Authorization
 - Therapeutic Class Pricing (TCP)
- Posted on ONE-T website: www.one-t.ca

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CAEAS-ECAB
JULY 2018

Drug Insights: Grandparenting and prior authorization

Learn more about these plan provisions and how they work

To help ensure your benefits plan remains sustainable, the CAEAS-ECAB plan includes a process called **prior authorization (PA)**. This means, unless they are being grandparented (see the scenarios below), speciality drugs must go through a formal review process before they can be approved.

Speciality drugs are often biologic drugs used to treat complex conditions that have different lines of therapy, such as rheumatoid arthritis, Crohn's disease, ulcerative colitis, multiple sclerosis and plaque psoriasis. In some cases, speciality drugs have been approved for use in Canada even though there's no evidence of clinical benefits, simply because there are few (if any) other treatment options. Conducted by an external team of licensed pharmacists, the PA process uses a transparent, evidence-based approach, based on the most up-to-date clinical studies, independent clinical assessment by government agencies and disease-state treatment guidelines.

The goal is to make sure people are getting the right drug, at the right dose, at the right time, for the right condition. Research shows there is an opportunity to impact more than 40% of new PA claims - that's why this process is so important to the plan in the long term. Here's how it works.

SCENARIO #1: You are taking a speciality drug requiring PA that has already been approved under a prior Board benefits plan. Your drug claim will be grandparented, and you will not have to go through the PA process again at this time, unless there is a particular concern with the claim (e.g., dosing, medication adherence, etc.). If, for some reason, the prior approval isn't listed on your file, you will be asked to submit a claims history from your pharmacy, a copy of your Explanation of Benefits or other documentation to confirm these drug claims were started and approved under a prior PA process.

SCENARIO #2: You are taking a speciality drug that did not require PA under your previous Board plan but does under the CAEAS-ECAB plan. As in Scenario #1, your drug claim will be grandparented, and you will not have to go through the PA process again at this time, unless there is a particular concern with the claim. However, you will be asked to submit documentation that the speciality drug was being reimbursed under your previous plan.

SCENARIO #3: You have recently (since June 1, 2018) been prescribed a drug that requires PA. In many cases, your doctor or pharmacist will let you know that PA is required. To start the PA process, visit www.facetprogram.ca/caeas-ecab, print the applicable form for your doctor to complete and have your physician send the completed forms to Cubic Health for clinical review.

Important: Grandparenting applies only to pre-approved speciality drugs, not to regular drug approvals. Going forward, there will be an annual review process in place for PAs as part of established best practices for managing the plan.

You can find a list of drugs requiring prior authorization on the CAEAS-ECAB FACET Program website, www.facetprogram.ca/caeas-ecab, which will be updated regularly as new drugs come to market.

Why is my new benefits plan different from my prior Board plan?

Building the CAEAS-ECAB benefits plan was a significant undertaking, which involved consolidating benefits across more than 70 Board plans. It also involved moving from "defined benefit" plans at the individual Board level to a "defined contribution" model, where the government provides a set amount of funding for benefits each year. From a plan member standpoint, this means you won't have exactly the same coverage you had before. But you will continue to have access to meaningful and sustainable benefits as we move forward.

Practitioner	Coverage
<ul style="list-style-type: none"> • Chiropodist/Podiatrist • Naturopath • Chiropractor • Osteopath • Registered Massage Therapist • Speech Therapist/Audiologist 	\$500 per specialist/benefit year
<ul style="list-style-type: none"> • Psychologist • Social Worker 	\$750 per benefit year (combined)
<ul style="list-style-type: none"> • Physiotherapist • Occupational Therapist • Athletic Therapist 	\$1,500 per benefit year (combined)

*** Subject to Reasonable and Customary limits**

- **Extended Health**

- Eye exams: \$120 per 24 months
- Glasses and contacts: \$450 per 24 months
- Hearing aids: \$1,000 per 60 months
- Private duty nursing: \$25,000 per 36 months
- Hospital: Semi-private room
- Emergency travel medical: Up to 60 days per trip; \$1 million per trip
- Orthopedic shoes and orthotics: \$700 maximum per rolling 24 months

- **Dental**

- Basic services: 100% coverage, no annual maximum; recall exams every 9 months for adults, every 6 months for children
- Periodontics/Endodontics: 100% coverage
- Major restorative: 60% coverage; \$2,500 maximum per benefit year
- Orthodontics: 50% coverage; \$3,000 lifetime maximum

- **Life Insurance**

- Basic (Member): 2x annual salary, up to \$1,000,000
- Optional (Member/Spouse): Up to \$500,000; member paid
- Optional (Child): Up to \$25,000; member paid

- **AD&D**

- Basic (Member): 2x annual salary, up to \$500,000
- Optional (Member/Spouse): Up to \$250,000; member paid

- **Critical Illness**

- Member/Spouse: Up to \$250,000; member paid

- Similar to Active plan except....
 - No AD&D coverage
- *Pre-June 1, 2018:*
 - Basic & Optional Life and Critical Illness grandparented as at June 1, 2018 *
- *On or after June 1, 2018:*
 - Optional Life and Critical Illness grandparented as at retirement date *

If you retired before June 1, 2018 and did not previously have retiree health and/or dental coverage, then you will not have that coverage under ONE-T

** subject to applicable insurance company maximums*

Member support

Resources and key contacts

Cowan Insurance Group is the plan administrator for ONE-T

Main responsibilities:

- Confirm benefits eligibility (based on rules set by the trust)
- Collect member information from school boards/employers
- Enroll eligible members in the plan
- Maintain member records
 - Including beneficiary designations
- Respond to member inquiries on enrolment and eligibility

- Toll free call centre: 1-888-330-4010
 - Monday to Friday, 8:00 a.m. to 5:00 p.m. EST
- Email: one-t@cowangroup.ca
- Mail: 700-1420 Blair Road
Ottawa, ON
K1J 9L8

Cowan's Group Benefits Member Access

Group Benefits Member Access

https://clients.cowangroup.ca/clients/content/login/login.cfm

Cowan Insurance Group

Sign up now | Contact Us | FR


Enjoy 24/7 access to your group benefits plan


[I'm a new user](#) | [Forgot my username](#) | [Forgot my password](#)


Username


Password

Sign In

 Submit a claim

 View Plan Features

 Print Certificate Card

 Provider Network

This site is in compliance with applicable privacy legislation. Information collected by Cowan is used exclusively for the purpose of administering your group benefits plan. You may review Cowan's complete privacy policy at www.cowangroup.ca

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My ePackage

- [Home](#)
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- [eStatements](#)
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- [My ePackage](#)
- [Group Benefit Statement](#)
- [Billing Statement](#)
- [Booklet](#)
- [Documents](#)
- [Links](#)
- [Contact Us](#)

Explore the below resources, including your personalized Welcome Memo, to find out more about your plan and the features available to you.

[View All](#)

Booklet

- [CAEAS-ECAB Basic and Voluntary AD&D Booklet](#)

eCard

- [eCard](#)

Forms

- [AD&D Beneficiary Designation Form](#)
- [Application for Over-Age Dependent Coverage](#)
- [CAEAS-ECAB Evidence of Insurability](#)
- [Dependant Change Form](#)
- [Life Beneficiary Designation Form](#)
- [Optional AD&D Application](#)
- [Optional Life Application For Non-Smoker Rate](#)
- [Pre-Authorized Debit Agreement for Members on Leave & Retirees](#)

Plan Information

- [CAEAS-ECAB Benefits at a Glance Brochure](#)
- [CAEAS-ECAB Optional Critical Illness Brochure & Rates](#)
- [CAEAS-ECAB Optional Life Brochure & Rates](#)
- [Enrolment Q&A - CAEAS-ECAB](#)
- [Fact Sheet - Optional Accidental Death and Dismemberment for Member and Spouse](#)
- [Fact Sheet - Optional Critical Illness for Member and Spouse](#)
- [Fact Sheet - Optional Life for Children](#)
- [Fact Sheet - Optional Life for Member](#)
- [Fact Sheet - Optional Life for Spouses](#)
- [Preparing for your vacation](#)
- [Travel Assistance Brochure](#)
- [Welcome Memo CAEAS-ECAB](#)

Submit a claim

- Home
- My Account
- Claims
- eStatements
- eProviders
- My ePackage
- Group Benefit Statement**
- Billing Statement
- Booklet
- Documents
- Links
- Contact Us

Group Benefits Statement

- > Personal Data
- > Group Insurance Benefits
- > Eligible Dependents
- > Costs Sharing
- > How To Contact Us
- > Printable Version

Please refer to the electronic booklet to obtain further information on the description of your group insurance plan.

In accordance with the Personal Information Protection and Electronic Documents Act Law, personal information collected by Cowan is kept in strict confidence and will only be used to administer your group insurance plan.

This statement was prepared by Cowan on September 20, 2018

***Great-West Life** is the claims payer for life, dental and extended healthcare insurance*

Main responsibilities:

- Liaising with Cowan
- Paying claims
- Answering claims-related questions



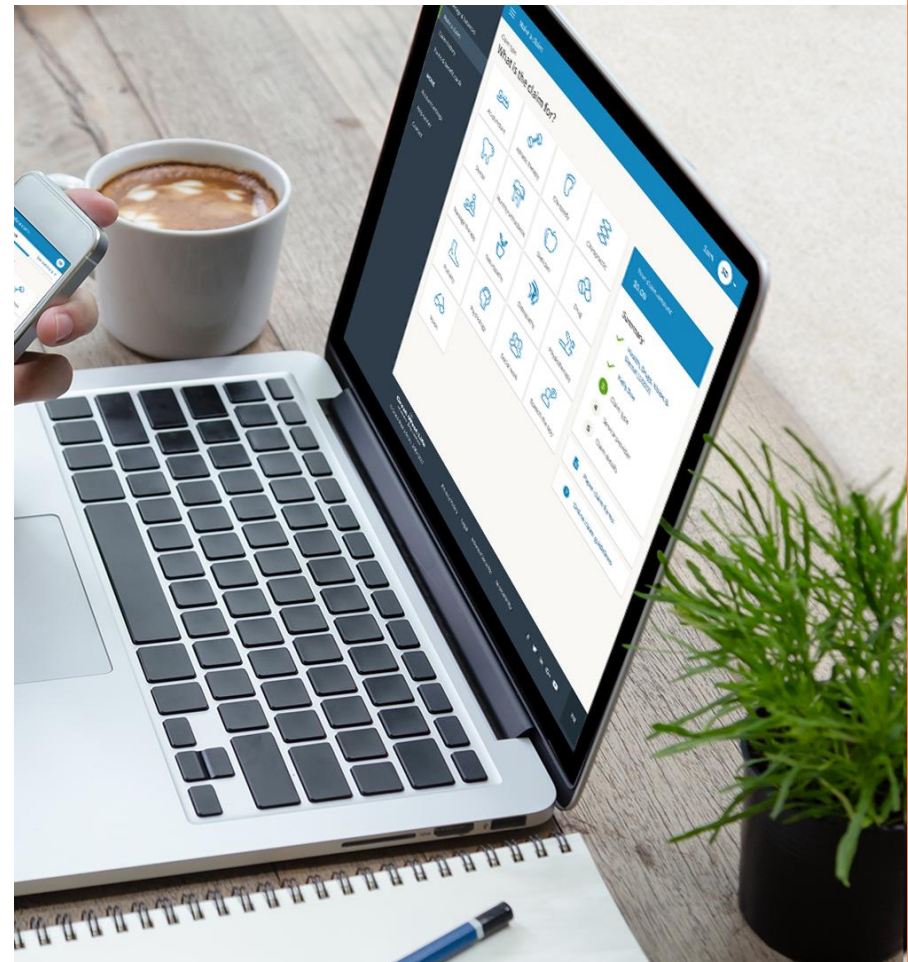
Dedicated Call Centre Line: 1-866-800-8086 (toll-free)

- 8 am to 7 pm, Monday to Friday
- 500 staff networked locations in 4 centres across Canada
- 4+ million contacts each year
- Inform callers on plan coverage, criteria for coverage
- Clarify claims assessment and handling
- Support inquiries for special handling (i.e., PA drugs)
- Self-serve options such as e-claims and GroupNet



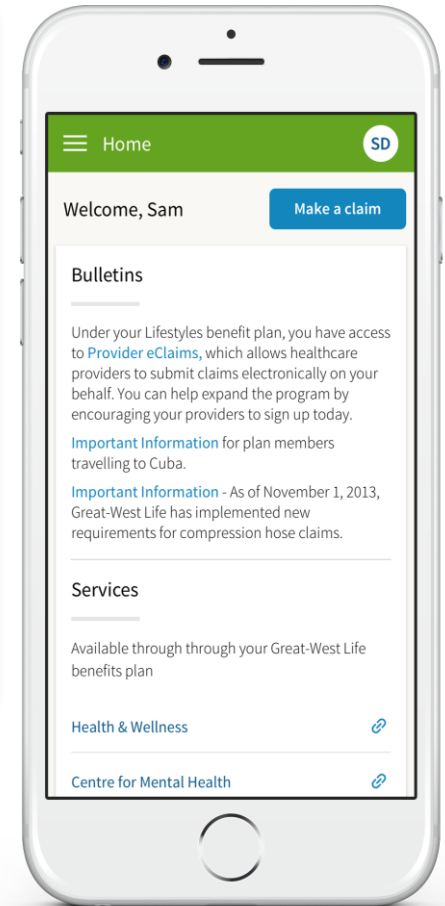
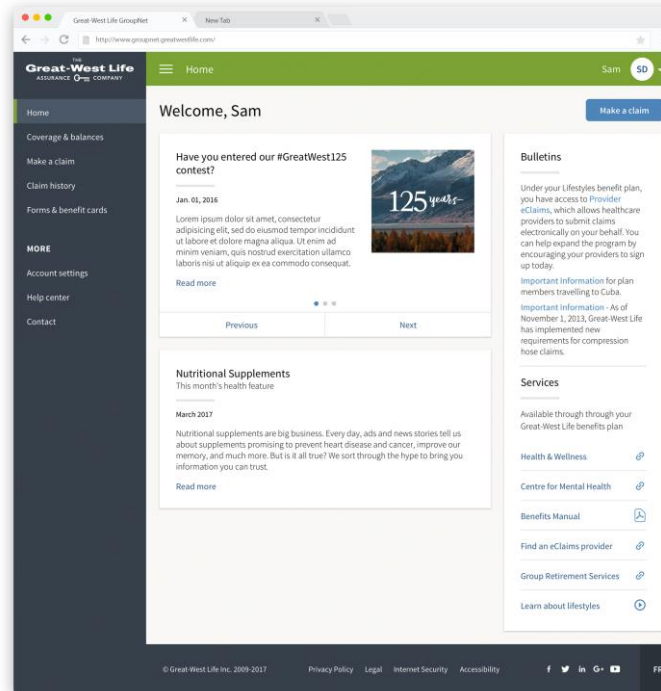
Updated GroupNet for Plan Members

- **Faster** – Users can quickly find information about their benefits, coverage, balances and claims history, thanks to improved navigation
- **User-friendly** – New site is easy to use and visually appealing, making claim submission process more streamlined



Updated GroupNet for Plan Members

- **Mobile-friendly –**
Can access the site on any device
- **Device optimized –**
Switching from laptop to tablet, website automatically accommodates new resolution, image size and scripting abilities



Members will receive email notifications:

Oct 30 – Notice to members

Nov 6 – Register now

Dec 6 – Reminder to register



We're excited to launch the new GroupNet™ – check out our new design and streamlined content that makes accessing your benefits information easier than ever.

Get started in 3 easy steps

1. Sign in to the current GroupNet site.
2. You'll be prompted to register. Click Register now.
3. Sign up with your email address and create a new password.

Sign in to get started

Bookmark the new site

For now, you won't be able to access the new GroupNet from the Great-West Life website or from a search engine, so remember to bookmark the new GroupNet site or save it to the home screen of your phone or tablet. Once you register, you'll also receive an email with a link to the new site.

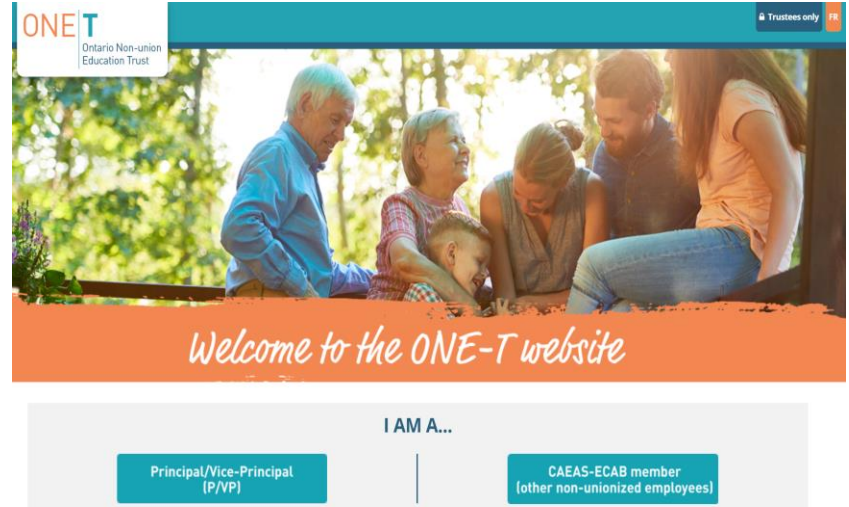
What about the current GroupNet for Plan Members?

After you've registered on the new GroupNet site, you can say good bye to the old site. New GroupNet is faster, easier to use and mobile friendly!

Trouble registering?

If you're having trouble registering or signing in, call 1-877-614-4305.

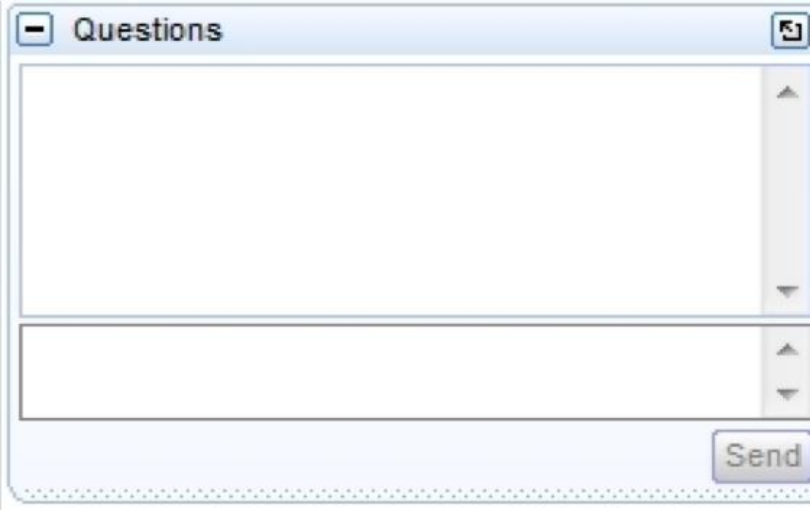
- Communications now centralized through ONE-T
- ONE-T website launched in spring 2018: www.one-t.ca
 - Central hub for benefits/trust information
 - Info on benefits/ONE-T
 - Key contacts
 - Links to helpful resources
 - Updated as new developments occur



- Regular (biweekly or monthly) member updates on topical issues
 - Incorporating members' feedback
 - Available in French and English
 - Distributed via email to CAEAS-ECAB membership
 - Posted on ONE-T website for future reference: www.one-t.ca
- Website updates
 - Targeted content
 - More user-friendly navigation

*Are there other topics we should be covering?
Email and let us know! info@one-t.ca*

To ask a question, type it into the **Questions** box....



A screenshot of a web interface element titled "Questions". It features a large, empty text input area with a vertical scrollbar on the right side. Below the input area is a smaller, empty text input area, also with a vertical scrollbar. At the bottom right of the interface is a button labeled "Send".

Thank you for joining us!

- **Claims-related questions:**

Great-West Life:
1-866-800-8086

<https://groupnet.greatwestlife.com>

- **Enrollment and eligibility questions:**

Cowan: 1-888-330-4010
one-t@cowangroup.ca

- **ONE-T operations:**

Corina Feiger
General Manager
info@one-t.ca



www.one-t.ca