



Overview

- How group insurance coverage works
- Legal implications of a group insurance plan
- Arguments in favour of discontinuing the group insurance contract
- Arguments against discontinuing the group insurance contract
- Realities of individual disability coverage
- A few statistics
- Voting logistics





How Group Insurance Coverage Works

- Amount of insurance premium is determined
 - Total benefits paid out under specified coverage + administrative fees divided by number of participants
- Premiums paid by HCEs
 - Share of the Ministère de la Famille du Québec (MFQ) paid through the subsidy





MFQ's Share

COMPENSATION FOR SOCIAL PROTECTION PAYMENTS MADE BY THE MFQ TO HCEs (APRIL 1, 2018)

Social safeguards	MFQ's approximate	Payment per	Payment per year	Payment per year	Payment per year
	contribution	day/per child	(234 days) for 3	(234 days) for 6	(234 days) for 9
			children	children	children
Quebec Pension	5.175%	\$1.17	\$821.34	\$1,642.68	\$2,464.02
Plan					
Quebec Parental	0.434%	\$0.10	\$70.20	\$140.40	\$210.60
Insurance Plan					
Group insurance	4.0%	\$0.90	\$631.80	\$1,263.60	\$1,895.40
Retirement fund	5.9%	\$1.33	\$933.66	\$1,867.32	\$2,800.98
CNESST	2.775%	\$0.63	\$442.26	\$884.52	\$1,326.78
(occupational health					
and safety)					
Heath Services	\$150.00	\$150.00	\$150.00	\$150,00	\$150.00
Fund					
Total	18.284% + \$150.00	\$4.13			
Total received	18.593%	\$4.20	\$2,948.40	\$5,896.80	\$8,845.20

Fédération des intervenante en petite enfance du Québec (CSQ



Legal Implications of a Group Insurance Plan

Act Respecting Prescription Drug Insurance

- Section 15.1
 - Definition of a group
- Section 16
 - Mandatory participation if coverage is offered
- Section 42.2
 - Provision that an administrator may not offer, make available or maintain a plan that has one or more of the distinctive characteristics of group insurance without providing prescription drug coverage
 - Criteria: uniform annual premium, coverage offered without medical evidence, rates based on the history of the group, a contract negotiated between an insurer and an intermediary on behalf of the group





Arguments in Favour of Discontinuing the Group Insurance Contract

- 100% prescription drug coverage for children under RAMQ
- RAMQ prescription drug insurance less expensive in cases of minimal use, for products included in the RAMQ's list of insured medications
- RAMQ premiums based on net household income and paid via tax returns (\$648/adult)





Outcomes of Abolishing the Insurance Plan

RAMQ rates

As of July 1, 2020

Adults 18 to 64 not covered by a private prescription drug plan

Annual premium	Deductible	Co-pay	
\$0-\$648	\$21.75/month if medications purchased	37.0% of cost of medications	
Based on net household income	Maximum contribution: \$95.31/month		



Arguments Against Discontinuing the Group Insurance Contract

- Risk of being refused individual insurance coverage for a number of HCEs because of a medical condition
- RAMQ does not provide extras such as paramedical services or disability insurance





Arguments Against Discontinuing the Group Insurance Contract (cont'd)

- Group or individual disability insurance cannot be provided by ADIM or CSQ without also providing group prescription drug coverage
- Loss of services for members if a problem arises with the insurer
- More complex follow-up with SSQ and DSF for people currently receiving disability benefits





Disability Cases

- Should the group insurance plan be discontinued:
 - Benefits will continue for as long as a disability is recognized by SSQ or DSF
 - Insurance claims for prescription drugs will have to be submitted to the RAMQ or the spouse's insurance provider
 - In case of a relapse for an existing condition, it will be determined whether recurrence benefits still apply and whether the old plan is the one to continue to pay the corresponding amounts
 - Once the disability is no longer recognized and the recurrence period has lapsed, the insurer will no longer have any obligations toward the claimant





Recurrence Period

- Should the group insurance plan be discontinued:
 - 31 days of short-term disability coverage and 6 months of longterm disability
 - Applicable to relapse that occurs after return to full-time work
 - Definition of the nature of the new disability period
 - Cause related to or completely different from the previous disability
 - If there is a relapse after the recurrence period, the insurer will no longer have any obligation toward the insured; otherwise the insurer must resume benefits





Realities of Individual Disability Coverage

- The vast majority of individual insurance plans required satisfactory evidence of insurability
 - Factors that may lead an insurer to refuse or withdraw coverage:
 - Age, sex, weight
 - Lifestyle habits (smoking, drinking, drugs)
 - Previous disability claims
 - Current medication and medical situation (under/not under control)
 - Major surgery in the past 2 years
 - Birth defect in a major organ
 - Etc.





A Few Statistics

- 50% of this group are people who are exempt from health insurance
- The MFQ's share for childcare providers with 6+ children is higher than the annual premium for basic disability insurance plan 2 (short- and long-term disability combined), including taxes





A Few Statistics (cont'd)

- Health insurance exemption: 3,398 HCEs
- Basic plan: 1,533 HCEs
- Basic plan + optional 1: 562 HCEs
- Basic plan 1 + 2 : 1,326 HCEs
- Voluntary suspension: 57
- Suspension without pay (COVID-19, etc.): 155
- Total HCEs as of Dec. 31, 2019: 9,093 HCEs





Voting System and Implications Voting Conditions

- Quebec-wide vote by phone
- ➤ Will take place November 5–9, 2020
- A majority of votes across Quebec is required to maintain or discontinue the group insurance contract
- Results will be revealed on November 11, 2020, after the ADIM Sectoral Council (CSA) meets
- Should coverage be discontinued, the contract will terminate at the latest on June 30, 2021





Question to Be Put to a Vote

The question that will be put to members over the phone is the following:

Considering the choice to be made as to whether or not to maintain the current group insurance plan;

- Considering that I have read the documents and information sent to me by my ADIM via the usual means;
- Considering that the group insurance plan is the one that will be in effect on July 1, 2021, if the decision is made to maintain a plan;





Question to Be Put to a Vote

(Here are the two possible choices)

Yes, I want a group insurance plan.

OR

No, I do not want a group insurance plan.





Thank you for your attention!

