RETIREE BENEFITS

At-A-Glance

October 2024

Who is SCIB?

The Standing Committee on Insured Benefits (SCIB) is comprised of employee and employer representatives, working to ensure that benefit plans are both effective and affordable.

SCIB collaborates with service providers to evaluate the financial health of each plan, assessing whether contributions from retirees adequately cover benefit costs.

Through this newsletter, SCIB aims to educate and inform retirees about their insured benefits.

Did You Know?

You can obtain a 3-month supply of reduce your out-of-pocket expenses and pharmacy dispensing fees.

about updating your

Health Coaching and Chronic Disease Management

If you participate in the Retiree Health Plan, this benefit offers you direct access to one-on-one coaching and education services from certified health professionals, without a doctor's referral.

For more information about this benefit, and to find providers and programs eligible for reimbursements, visit www.medaviebc.ca/livebetter. The benefit maximum is \$500 per calendar year for all programs combined and your plan co-pay (20%) applies. The price varies by programs. You will have to create an account to access your personalized portal and will be required to enter your credit card information to pay the 20% co-pay. For additional information on this benefit, refer to the **Benefit Booklet for Retirees** available at www.gnb.ca/employeebenefits.

For all questions related to this benefit and the portal, contact Medavie Blue Cross at 1-888-227-3400.

The benefit includes 4 different programs:

- Lung Health (asthma, chronic obstructive pulmonary disease (COPD) and smoking cessation)
- **Heart Health** (hypertension and weight management)
- **Diabetes Care** (type 1 and 2)
- **Menopause Care** (perimenopause and menopause symptoms)

Travel Tips!

- If you have an existing medical condition and will be travelling soon, it is important to contact CanAssistance and choose the 'Pre-Travel Questions' option.
- A Medical Consultant will review your existing medical condition with you (confidentially) along with the policy criteria and will advise whether your condition would be covered during your trip.
- Make sure to bring your Blue Cross Card. The travel assistance phone numbers are on the back of your card.
- During your trip, to avoid out-of-pocket costs (in most countries), should you need assistance and if possible, notify CanAssistance before you obtain service/treatment.
- This will allow CanAssistance to preauthorize the service and make direct billing arrangements (some exceptions apply depending in the area of travel).
- CanAssistance will direct you to the nearest accredited health care provider for care.

Are you living with diabetes?

If you are insulin dependent and using a Glucose Monitoring System (GMS), such as Free Style Libre or Dexcom, as of June 1st, 2024, the maximum coverage amount was increased to \$4,000 per calendar year.

Additionally, GMS transmitters and sensors are now eligible for direct payment through your Medavie Blue Cross Identification Card (often referred to as your drug card) at the point of sale, with the out-of-pocket expense (co-pay) of 20%.

Retiree Dental Plan: How are premiums determined?

Dental fees charged by dentists are based on the Dental Fee Guide established by the New Brunswick Dental Society. Historically, dental fees have increased annually.

SCIB conducts an annual review of the dental plan premium rates, which are determined based on the Dental Fee Guide, to maintain a balance between out-of-pocket expenses for retirees and their monthly premium costs. Implementing the most recent version of the Dental Fee Guide leads to an automatic increase in monthly premiums for all retirees enrolled in the dental plan.



Late Application Process

Retiree Health and Travel Coverage

Retirees who worked for the New Brunswick Public Service at the time of their retirement are eligible to submit a **late application for Health and Travel coverage** under the Retiree Benefit Plans, by providing proof of insurability (**Statement of Health for Retirees**). If you currently have coverage, you may add an eligible dependent to your coverage as a late applicant by providing proof of their insurability. Please note that as late applicants, the retiree and their eligible dependent may be at risk of being declined coverage by the Insurer.

*Participation in the Travel Plan is only permitted if the retiree is enroled in the Health Plan.

Retiree Dental Coverage

As of November 1, 2024, retirees who retired during 2024 will be eligible to apply as a late applicant for the Retiree Dental Plan. Dependents are also eligible to be added as late applicants, provided the retiree is already enrolled in the dental plan or is enrolling late themselves. Please note, for all late applicants there is a maximum reimbursement, per participant, of \$100 for all eligible dental expenses for the first 12 months of coverage.

For more information about this process and the eligibility criteria of dependents, refer to the **Benefit Booklet for Retirees** available at **www.gnb.ca/employeebenefits**.

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For more information on your benefits, please contact the Member Services team at Vestcor, our Plan's Administrator, at 1-800-561-4012 or 506-453-2296 or consult the **Benefit Booklet for Retirees** at **www.gnb.ca/employeebenefits**.

The **Benefit Booklet for Retirees** can also be accessed by scanning the QR code to the right with the camera from a smart mobile device (Apple iPhone or Android for example).

