



## Highlights of the February 16, 2024, Trustees' Meeting

### 1. PLAN DESIGN – FIRST READING

- The ASEBP Trustees recognize the importance of supporting the health journey of the public education sector in Alberta. The Trustees are constantly striving for value and to make balanced decisions about plan benefits and the cost of investing in the current and future health of covered members.
- The ASEBP Trustees gave **initial approval** (first reading) to Extended Health Care, Extended Disability Benefits, and Supplemental Package changes. These changes will **not** impact premium rates.
- The following changes affect **Extended Health Care** for the **ASEBP Group Plan** and the **MyRetiree Plan** effective **January 1, 2025**. In summary, diabetic supplies will be recategorized and existing maximums will be redistributed; adjudication criteria for foot orthotics and orthopedic shoes will be revised; and a housekeeping change will be made to remove an outdated out-of-province limitation. The Trustees anticipate that covered members and dependants who most need these benefits will continue to have access to them with greater assurance about therapeutic efficacy.
  - **Diabetic supplies:** Three categories for diabetic supplies will be established, each with their own maximum. Two of these categories will also require insulin dependency for reimbursement. As the technology to support diabetes management has evolved and become more complex, the existing categories no longer adequately categorize the available products. The new categories and maximums will be:

**ASEBP TRUSTEES**

Daryl Scott, Chair  
 James Gerun, Vice-Chair  
 Meagan Kuik  
 Judy Muir  
 Brett Nixon  
 Kim Pasula  
 Rob Pirie  
 Natashya Shewchuk  
 Morey Terry  
 Brad Toone

**CHIEF EXECUTIVE OFFICER**

Kelli Littlechilds

Insulin Pumps	Glucose Monitoring Supplies	Diabetic Supplies*	
\$5,000 every four rolling years	\$6,000 every calendar year	\$1,000 every calendar year	
Insulin pumps	Continuous glucose monitor receivers, transmitters, and sensors  Flash glucose monitor sensors and readers	Test strips Lancets Syringes Reservoirs Infusion sets Blood glucose meters	Alcohol swabs Pen needles Cartridges Lancing devices Omni pods



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Insulin Pumps	Glucose Monitoring Supplies	Diabetic Supplies*
Insulin dependency a requirement	Insulin dependency a requirement	n/a

\*The examples provided represent the most common diabetic supplies rather than an exhaustive list

- Foot orthotics:** A written order by a recognized health care professional will be required for reimbursement. A wide range of orthotics are utilized for different foot problems, and they are usually dispensed by health care professionals experienced in this practice (e.g., podiatrists, chiropodists, physiotherapists, chiropractors, pedorthists). A biomechanical assessment is part of the process used to determine each patient’s unique medical requirements by analyzing the foot and body as a whole. Such assessments help identify any issues with alignment and structure and highlight any strengths or weaknesses, which, in turn, assist in designing a suitable product with therapeutic benefit. A fabrication form is typically completed by the company/lab that makes the orthotic or by the dispensing health care professional. A biomechanical assessment and fabrication form will need to be submitted with foot orthotic claims.
- Orthopedic shoes:** A written order by a recognized health care professional will be required for reimbursement. Orthopedic shoes are used to correct or manage a medical condition. Like foot orthotics, a biomechanical assessment is utilized to determine each patient’s unique medical requirements by analyzing the foot and body as a whole. This assessment will need to be submitted with orthopedic shoe claims.
- Out-of-province specialized treatment:** This housekeeping change will remove the limitation on out-of-province specialized treatment provided within Canada. This limitation applies when a covered member or dependant travels elsewhere in Canada to seek specialized treatment unavailable in their province or territory of residence unless prior Trustee approval has been provided. As the provision has not been used, the limitation will be removed. Note: this out-of-province specialized treatment limitation is unrelated to the emergency travel benefit. Reimbursement when a covered member or dependant travels for medical reasons will continue to be excluded from the emergency travel benefit.
- The following change affects **Extended Disability Benefits** for the **ASEBP Group Plan** effective **January 1, 2025**. In summary, adopting the Sick Leave Support Program will **not** cause premium rates to increase. Rather, the Trustees anticipate there may be reduced pressure on the Extended Disability Benefits Plan over the long term, as well as savings to employers through improved and timely return to work.

  - Sick Leave Support Program:** Based on the success of the Sick Leave Support Pilot, which will conclude on December 31, 2024, the Early Intervention Program will be replaced with the Sick Leave Support Program (SLSP). The SLSP will provide supportive and return-to-work services to covered members during the elimination period, which may extend beyond the usual 90 continuous calendar days without jeopardizing their eligibility for Extended Disability Benefits. Over the course of the pilot, these supports have assisted members in their recovery and, in many cases, they were able to return to the workplace

sooner, with employers also reporting positive outcomes and increased collaboration. The ASEBP Trustees and Administration are pleased to be able to make the SLSP available across the province. More details about the new program will be provided through other communications following the Trustees' meeting in March 2024.

- The following change affects the **Supplemental Package** for the **ASEBP Group Plan** effective **September 1, 2024**, to coincide with the upcoming school year, and will **not** impact premium rates.
  - Eligibility will be expanded so that Supplemental Package participants can enrol in all lines of benefit that comprise the package.
  - The Supplemental Package is available on a voluntary basis to substitute teachers, casual staff, part-time employees, employees serving a waiting period, and working retirees. These individuals typically pay the premiums for the package, which includes:
    - A flat \$25,000 or \$50,000 benefit for Life Insurance (Life) and Accidental Death & Dismemberment Insurance (AD&D).
    - 80% reimbursement for prescribed drugs and 100% for hospital accommodation and other medical services and supplies under Extended Health Care (EHC).
    - 100% reimbursement for basic dental services and 50% for major services to a combined maximum of \$2,500 under Dental Care.
  - Eligibility is currently tied to those lines of benefit offered by the employer to other employee groups. It is mandatory for a Supplemental Package participant to enrol in all lines of benefit in the package, excluding Dental Care, when eligible to do so. The following examples illustrate the effect of these two current requirements:
    - Example A: If an employer offers all benefits to teachers, a Supplemental Package participant must enrol in Life, AD&D, and EHC while having a choice about Dental Care.
    - Example B: If an employer only offers income replacement benefits to teachers, a Supplemental Package participant must enrol in Life and AD&D and cannot enrol in EHC and Dental Care.With expanded eligibility, under Example B, the Supplemental Package participant would be able to enrol in EHC and Dental Care.
- **Please note** that final approval (second reading) is required, and changes may occur between readings.

## 2. PREMIUM RATES – FIRST READING ASEBP GROUP PLAN

- The ASEBP Trustees gave **initial approval** (first reading) to September 1, 2024, premium rates for the **ASEBP Group Plan**. Instead of an overall base rate increase of 9.2% (which, based on claims experience, would be breakeven), the ASEBP Trustees have limited the base increase to 7.8% for 2024-25. Inflationary pressures have continued to put upward pressure on costs for prescription drugs, medical service providers, and dental services. Plans across the country are experiencing similar pressures. Here are the premium rate changes by line of benefit:
  - Life Insurance: no change



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- Accidental Death & Dismemberment Insurance: no change
  - Extended Disability Benefits: no change
  - Extended Health Care: 10.7% increase
  - Dental Care: 12.0% increase
  - Vision Care: no change
  - Employee and Family Assistance Program: no change
- Please note that while the overall base increase equates to 7.8%, this does not mean that premiums may increase by only this amount—there are other factors that may impact a covered member or employer’s premium rates, such as being in a surcharge position in ASEBP’s Experience Adjustment System. Alternatively, a covered member or employer’s premium rates may not increase by a full 7.8%, or at all, if they are in a discount position in the Experience Adjustment System.
  - The ASEBP Trustees have been able to subsidize premiums for some time, largely due to excess investment returns. Premium subsidies over the last five years totaled just over \$95 million. ASEBP cannot continue to provide subsidies to the same magnitude as those historically.
    - The plan design changes coming into effect January 1, 2025, as noted above, represent no increase in costs. However, medical inflation continues to have a significant impact on Extended Health Care and Dental Care as it increases at a rate higher than regular inflation.
    - The overall increase to premium rates continues to be lower than trends within the industry.
  - Future premium rates will be dependent on claims experience, investment returns, plan design changes, and other factors.
  - A breakdown of the monthly premium rates, except as noted, is provided below:

Life		
Plan 2	per \$1,000 of coverage	\$0.113

Accidental Death & Dismemberment		
Plan 2	per \$1,000 of coverage	\$0.011

Extended Disability Benefits		
Plan D	% of monthly earnings	1.96%
Plan E	% of monthly earnings	1.96%



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<b>Extended Health Care</b>		
Plan 1	Single	\$155.75
	Family	\$374.75
Plan 2	Single	\$113.75
	Family	\$272.25
Plan 5	Single	\$140.50
	Family	\$336.00

<b>Dental Care</b>		
Plan 1	Single	\$59.00
	Family	\$147.50
Plan 2	Single	\$77.00
	Family	\$187.25
Plan 3	Single	\$77.00
	Family	\$209.50

<b>Vision Care</b>		
Plan 2	Single	\$6.00
	Family	\$14.50
Plan 3	Single	\$12.00
	Family	\$29.50

<b>Early Retirement Benefits Package 2*</b>		
	Single	\$125.00
	Family	\$200.00

\*Closed to new participants as of September 1, 2011



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<b>Supplemental Package</b>		
<i>Without Dental</i>		
Package 1	Single	\$129.00
Package 2	Family	\$297.15
Package 3	Single	\$132.10
Package 4	Family	\$300.25
<i>With Dental</i>		
Package 1	Single	\$227.00
Package 2	Family	\$528.40
Package 3	Single	\$230.10
Package 4	Family	\$531.50
<i>Over Age 70</i>		
Extended Health Care Only	Single	\$125.90
	Family	\$294.05
Extended Health Care and Dental	Single	\$223.90
	Family	\$525.30

<b>Blanket Life Insurance for School Trustees</b>		
	Annual	\$60.00

<b>Employee and Family Assistance Program</b>		
Provided by ASEBP at no cost		

- **Please note** that final approval (second reading) is required, and changes may occur between readings.



# ASEBP Trustees' Report

- Notification to employers about their final 2024-25 premium rates, including any discounts and surcharges, will be sent following final approval in late March or early April 2024. Preliminary information is available by contacting your ASEBP client consultant. A presentation about premium rates will take place for employers in early April 2024, and will provide more detail about the factors that influence premium rate setting.

### 3. PREMIUM RATES – FIRST READING MYRETIREE PLAN

- The ASEBP Trustees gave **initial approval** (first reading) to September 1, 2024, premium rates for the **MyRetiree Plan**. A breakdown of the monthly premium rates is provided below:

Extended Health Care	Enhanced			Core		
	Single	Couple	Family	Single	Couple	Family
Ages 50-64	\$179.25	\$340.50	\$411.50	\$99.50	\$189.25	\$228.50
Ages 65-84	\$142.75	\$271.00	\$327.50	\$82.00	\$155.75	\$187.50
Ages 85+	\$140.50	\$266.00	\$322.50	\$79.75	\$151.25	\$183.00
Vision Care	Single	Couple	Family	Single	Couple	Family
All Age Categories	\$9.50	\$18.00	\$22.00	\$2.25	\$4.25	\$5.00

Dental Care	Enhanced Option 1			Enhanced Option 2			Core		
	Single	Couple	Family	Single	Couple	Family	Single	Couple	Family
All Age Categories	\$83.75	\$158.50	\$191.75	\$79.25	\$150.25	\$181.75	\$46.75	\$89.00	\$107.75

Life and Accidental Death & Dismemberment Insurance	Plan 2
	per \$1,000 of coverage
All Age Categories	\$0.152

- Please note** that final approval (second reading) is required, and changes may occur between readings.

### 4. SPENDING ACCOUNTS' ADMINISTRATION FEES – NO CHANGE

- The ASEBP Trustees agreed that the monthly administration fees for spending accounts will remain unchanged:

Spending Accounts		
Standalone Health Spending Account (HSA)	Per employee	\$2.75
Combined HSA/Wellness Spending Account (WSA)	Per employee	\$3.00



# ASEBP Trustees' Report

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The ASEBP Trustees' Report provides an overview of topics discussed at all ASEBP Trustees' Meetings. These meetings provide the opportunity for ASEBP Trustees to come together to discuss matters of importance at ASEBP—from the financial health of the benefit plan to the introduction of new benefits and programs. While all information in each report is an accurate account of decisions made at the meetings, there can be changes that occur between first and second readings of certain topics, which may result in differences between their reporting. To learn more about the ASEBP Trustees, please visit the Governance page, found in the About section of our website, [asebp.ca](https://asebp.ca).

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