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health matters

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Buying a Hearing Aid?

Here's What You Need To Know!

For the average person, getting their hearing tested and being told that they need hearing aids is a lot to absorb at one time. As they embark upon the journey of purchasing hearing aids, most people quickly realize that they don't have much experience or information on this subject. Between sorting through the plethora of advertisements and coming to terms with the unexpectedly high cost of hearing aids, the entire process can be confusing and overwhelming. In this first edition of Sound Tips, we will provide some guidance and advice so that the consumer hopefully feels better prepared in terms of what to expect.

During the hearing aid consultation visit (often called a hearing aid evaluation), the audiologist should walk you through quite a bit of information. The first thing you must have is a thorough understanding of your audiogram (hearing test). The audiologist should review the audiogram in detail and answer any questions about your overall communication ability. Don't be shy in this first step as understanding the audiogram is an important foundation to build upon as you pursue hearing aids. You should also come to the appointment with as much basic knowledge as possible. Do whatever homework you can and have a list of key priorities that you want addressed.

It's also a good idea to check in advance about any insurance benefits you may have that would offset the cost of the hearing aids. Having this information up front will help you set some parameters on pricing.



After explaining your audiogram, the audiologist should next review the various sizes and styles of hearing aids and get a feel for which ones you like the most from a cosmetic point of view. It is important to understand that some decisions will be driven by the amount of hearing loss you have and if you experience any dexterity or visual challenges. You will also be advised if you should wear one or two hearing aids and the pros and cons of each scenario. During the process, the audiologist will explain some practicalities of the hearing aid style and size you're leaning towards such as your color preference, the battery, volume control issues, options for using the hearing aid with the

telephone, if it comes with a remote control and any other buttons or switches that need to be discussed for ordering purposes.

At this point, you should be asked specific questions about your communication, lifestyle and what you want the hearing aids to accomplish in terms of your listening needs. Once the audiologist

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This publication is intended to keep RTO/ERO Health Plans participants current with matters considered at Health Services & Insurance Committee (HSIC) meetings and to share items of interest pertaining to Health and Wellness. Districts are encouraged to use any of this information in its communications with members at meetings or via local newsletters.

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Message from the Committee Chair

Mark Tinkess

Beginning with the April meeting, the HSIC receives a financial report from Johnson Inc. at each meeting, reporting how well the Plans are progressing for each of those five points in the year. The February meeting is particularly important and interesting, because it examines the year end statistics for the past year.

Since the in-house training sessions are tied to the financial reports due for each meeting, the fourth in-house training presented by Don Brooks and Lori MacDonald-Blundon in February focused on the financial aspects of Group Plan Management as seen from the positions of RTO/ERO as plan sponsor, the position of our consultant, Johnson Inc., and the position of our third party providers such as Manulife, and Allianz Global Assistance (which was called Mondial Assistance until February 1st).

We examined how each views Risk and Risk Reduction Methods as they affect the possible choices among the variety of Funding Methods. These led into discussions covering the relationships between premiums, claims, and reserves, the effects of the underwriting processes and the factors to consider in the Annual Renewal Processes. John Crouse of Johnson Inc. gave a detailed presentation regarding how the Actuarial Projection Model, developed specifically for RTO/ERO, works, and how it can be best used to manage our Plans. We then took an in-depth look at the variety of Health Plans Financial Reports provided by Johnson Inc. for the HSIC, and how to interpret the data contained in each.





HSIC Meeting Highlights

February 8-9, 2012

1. Lori MacDonald-Blundon (Senior Consultant for Johnson Inc.) presented a report detailing the services provided to both RTO/ERO and to Johnson Inc. by Manulife, as grouped under the topics of Insurance Protection, Financial, Services, and Resources.
2. The HSIC recommended that the Provincial Executive sign the 2012 Letter of Agreement between the Manufacturers Life Insurance Company and RTO/ERO.
3. The HSIC recommended that the Provincial Executive sign the 2012 Agreement for the Group Benefits Program between Johnson Inc. and RTO/ERO.
4. John Crouse presented Benefits Funding 101, covering the topics of the RTO/ERO Funding Policy, Understanding Plan Reserves, the Actuarial Model, and Introduction to Investments.
5. Simon Leibovitz handed out a copy of a previous member survey regarding the Health Plans, and requested that the committee provide input into a new survey being prepared for distribution.
6. Over the last three years, the committee has debated the merits of including either the Manulife Health Services Navigator or the Best Doctors as part of the Extended Health Care Plan. Although it is clear that some of our members would benefit from either of these programs, the financial burden that such an inclusion would cause to the majority of our members, and to the Extended Health Care Plan, would be fiscally unjustifiable.
7. The committee examined the 34 Health Plan Enhancements received from members. Over the next series of meetings these enhancements, along with other possible plan changes, will be further reviewed for potential implementation in January 2013.
8. The committee received 2011 year-end reports regarding the Premium and Claims breakdown, Johnson Inc. Consulting Remuneration, the Financial Statements for the Group Benefits Plans, and the Health Plans Financial Review and the Benefit Utilization Report which ties all of the preceding reports together in order to produce a comprehensive overall look at how well our Health Plans have done in the year 2011. It should be noted that the Health Plans have ended the year in a strong positive position.
9. Plans for the June 10-11, 2012 DHR/URH workshop were finalized. Participants in this workshop will have received registration forms by the time that you read this.

Message from Johnson Inc.

Pfizer Continuity of Care RxHelp Program

Upon enrollment, Pfizer will cover the excess cost of the following medications, beyond the generic drug price. RTO/ERO members qualify for this Program.

- Lipitor®
- Norvasc®
- Effexor XR®
- Zoloft®
- Alesse®
- Depo-Provera®
- Xalatan®
- Caduet®
- Cordarone®

This program is currently available in BC, AB, ON, SK and the Atlantic provinces. Note: Norvasc® is not available in SK.

You have the option of registering online or by phone:

- online by clicking www.rxhelp.ca/EN/Programs/Program.aspx?ProductID=3
- by phone by calling 1-866-RxHelp4 (794-3574)
When you enroll online or over the phone you will automatically be registered to receive your Pfizer Continuity of Care Program card.



Heart & Stroke Foundation's Risk Assessment

The Heart&Stroke Risk Assessment helps you find out what is putting you at risk of heart disease and stroke - and how you can take action to live a longer and fuller life.

Just answer some simple questions about your health and lifestyle to get your customized report today. It's free, confidential and takes about 10 minutes to complete. Simply go to www.heartandstroke.com.



Buying a Hearing Aid?

Here's What You Need To Know!

CONTINUED FROM PAGE 1

knows your goals, they will let you know what's realistic. Although hearing aids have made significant improvements over the years, they are still an imperfect solution to a complicated problem.

Depending on your overall communication goals, the audiologist will make some recommendations around the level of technology that will be required to suit your needs as best as possible. When I refer to the level of technology, I don't mean the style or size of the hearing aid. Instead, I'm referring to what's inside of the hearing aid. Today, most hearing aids are digital and have computer chips inside of them which process sounds and speech. Depending on the complexity of the chip, the hearing aid has access to different functions and options to assist in your hearing.

This is when price is usually discussed. In a perfect world, cost wouldn't be an issue but like many other products on the market, hearing aids have different price points as well. Basically, there are three levels of technology; entry, mid-range and advanced. Based on all of the information you've discussed leading up to this point, the audiologist will advise you on which level of technology that would work best for you. Many people fall into the entry or mid-range device category. However, if you have a particularly busy lifestyle with high demands on communication relating to work, school, recreational or social interactions, then advanced technology may be recommended.

You may feel a little uncomfortable discussing what you can or cannot afford, but you have to be honest and forthcoming with your audiologist so that you're both on the same page. Having said that, you don't want to buy a hearing aid for a lifestyle you don't have. For instance, if you aren't concerned about Bluetooth connectivity with your hearing aid, say so as this can be an expensive option. Some hearing aids have the capability to work in synchronicity with each other in that if you adjust the volume on one ear, the hearing aid in the other ear is also automatically adjusted. If this isn't critical to you, then say so! However, if you do pursue advanced hearing aids, then make a commitment to using all the features, programs and options.

Once you have agreed upon the hearing aid, the audiologist should provide you with information about the warranty and trial period. It is mandatory that you receive at least a thirty day trial period on your new hearing aids. You will need to pay for the hearing aids before taking them home, but just in case things don't work out as planned, you have the option of returning them, less a nominal fee.



Today, most hearing aids are digital and have computer chips inside of them which process sounds and speech. Depending on the complexity of the chip, the hearing aid has access to different functions and options to assist in your hearing.

The return fee should also be discussed in advance so that there is no misunderstanding at a later date.

In summary, there are three important factors to being successful in buying a hearing aid. First, as the consumer, you have to be motivated and open to addressing your communication challenges. Secondly, the hearing aid itself has to be the right match with all the appropriate features necessary to address your desired communication outcome. Finally, the audiologist has to be someone you connect with and trust is truly listening to what you want and has the tools to help you. If all three of these things fall into place, your hearing aid purchasing experience should run smoothly and set the stage for a positive outcome. ●

Article by: Rex Banks M.A.CCC-A, Reg. CASLPO
 Chief Audiologist, The Canadian Hearing Society



Know your RTO/ERO Health Plans

Benefit Statement and Income Tax Letters

Each year Benefit Statements and Income Tax Letters are mailed to every RTO/ERO member who is enrolled in one or more of RTO/ERO's insurance plans. The mailing for the 2011 taxation year will be sent to over 50,000 participants during the first two weeks of February 2012. The mailing will be staggered over the two week period to allow the Plan Benefit Service and Plan Benefit Claims staff to manage the flow of incoming calls.

The Benefit Statement outlines the insurance plans available to RTO/ERO members, the coverage they've chosen and the monthly deduction amounts, effective January 2012. The Income Tax Letters are sent to all participants in RTO/ERO's Group Insurance Benefits. The first section of the letter summarizes the premium payments made in the 2011 taxation year broken down by benefit. The second section details the claims paid, by benefit, and is subtotaled by person.

For any further inquiries call Johnson Inc. **Premium & Service** at 416-920-7248 or 1-877-406-9007, and **Claims** at 905-764-4888 or 1-800-638-4753.

When to enroll without medical evidence?

You may enroll without medical evidence of insurability, provided Johnson Inc. Plan Benefits Service receives your application within 60 days of the termination of your previous "group insurance" plan (either your coverage, or your spouse's coverage). The RTO/ERO Group Benefits Program will commence the day after the termination of your group plan.

To ensure there is no gap in your coverage, premiums and coverage will be back-dated to the day following the termination of your "prior" group plan, regardless of when your application is received in the 60 day period.

Date of departure – from your province of residence

RTO/ERO's Out-of-Province/Canada benefit provides travel coverage automatically for those who participate in the Extended Health Care Plan. The benefit includes coverage for trips of up to 62 days in duration. For those travelling on longer trips, additional coverage is available for purchase under the Supplemental Travel Plan.

Travellers, in general, can be caught off guard, not realizing that their trip begins the day they leave their province or territory of residence. This oversight could be detrimental and leave travelers without coverage.

For example, suppose you plan to travel from your home in Ontario, first to visit relatives in New Brunswick for seven days and then on to your 60 day sightseeing trip in the United States. In this case, your trip is deemed to be 67 consecutive days in duration and under your Extended Health Care Plan, you are covered for the first 62 days. To ensure you are covered for the entire duration of your trip, you would need to purchase an additional five days of coverage under the Supplemental Travel Plan.

Welcome to HSIC Norbert Boudreau



Norbert Boudreau retired in 1998 after 32 years as a High School French teacher, department head, language consultant and coordinator with the Carleton Board of Education and the Lanark County Board of Education/Upper Canada District School Board. He joined the Ottawa-Carleton, District 27, RTO/ERO in 2000.

Norbert has well served District 27 as newsletter editor, Executive and Board member and as President in 2006. In 2010, he received the District 27's Service Award for Exceptional Service to RTO/ERO.

In 2006, Norbert was appointed to the Provincial Communications Committee where he served for five years, the last two as Chair. He successfully organized two provincial workshops.

Over the past two years as a member of the Provincial Executive, Norbert has been part of a team which makes decisions and guides the entire RTO/ERO organization. Presently, as Second Vice-President Norbert is the liaison officer for the Pension and Retirement Concerns Committee. He also chairs the Executive Sub-Committee on Transparency and serves on the Personnel Committee and the Policies and Procedures Sub-Committee.

Norbert is also a member of the Health Services and Insurance Committee and as such he is undergoing a very intense training on Insurance. As the number of participants in RTO/ERO insurance plans increase in number and the insurance coverage broadens, it is crucial to ensure that the RTO/ERO Health Plan continue to be the best health insurance available to retired educators.

In 2011, he received the Swim Ontario Lifetime Achievement Award. Norbert enjoys being with his three children and three grand-children. He also loves walking, cycling and traveling with his life partner Louise. ●

Falls Prevention

British Columbia Ministry of Health

Winter Safety Tips

Top ten tips for staying fall-free this winter

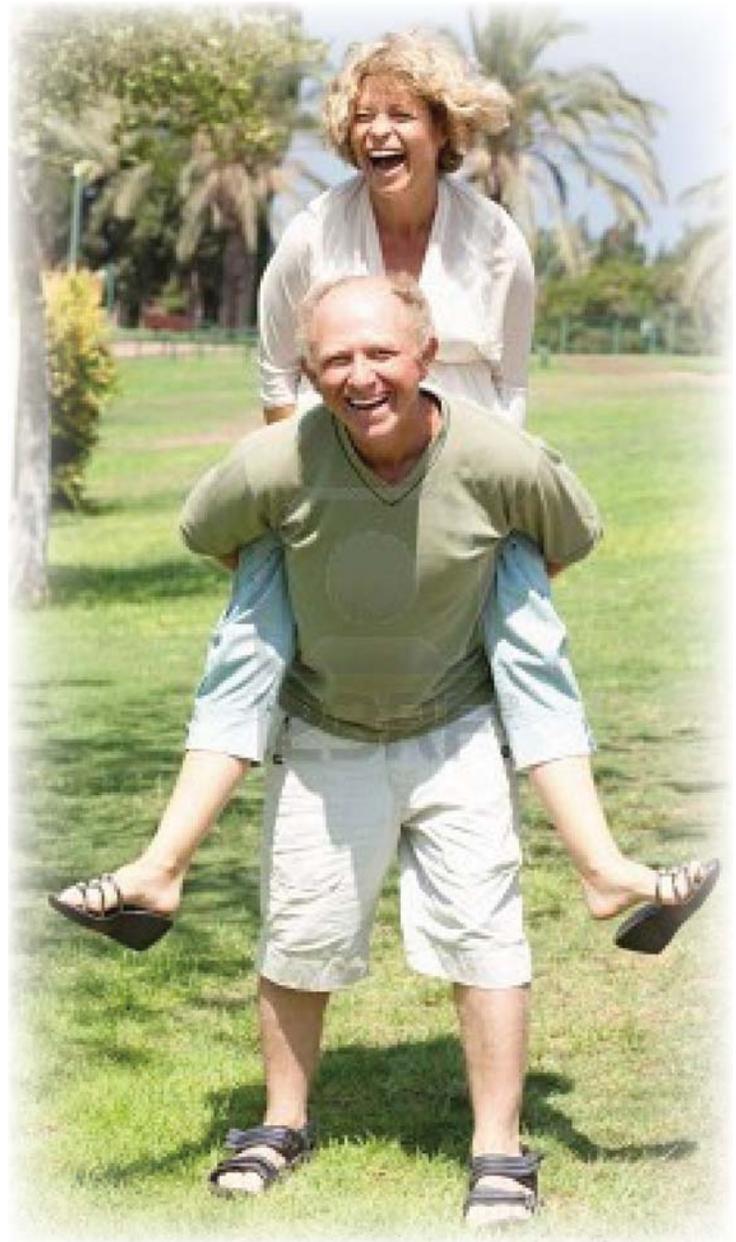
Falls are the most common cause of injury among British Columbia seniors and are the main reason why older adults lose their independence. Each year, one in three seniors over the age of 65 experiences at least one fall and nearly 40 per cent of fall-related hospitalizations involve a hip fracture - which greatly impacts the health and well-being of the senior as well as the B.C. health-care system.

Falls usually happen due to factors that can be prevented. Identifying fall risk and taking the appropriate action to prevent falls can help seniors to stay independent and increase their overall health and well-being.

Top ten tips to help seniors stay fall-free this winter:

1. Check your traction - wearing appropriate shoes and boots for slippery sidewalks and stairs can help to avoid a fall. Research has shown that wearing an anti-slip shoe device can reduce the risk of a fall in icy conditions.
2. Slow down - falls often occur when you're in a rush.
3. Stay connected - letting people know your plans and taking a cellphone with you when you leave the house are great ways to keep in touch with friends and family this holiday season.
4. Vitamin D and calcium - research has shown that Vitamin D and calcium play an important role for muscular strength and bone health. During the winter months, it is especially important to eat foods high in Vitamin D and calcium and/or take supplements to get the recommended daily intake.
5. Stay active - strong muscles and bones are important in preventing falls and getting around safely. If winter conditions make it unsafe to exercise outdoors, stay active with an indoor routine that includes strengthening and balance exercises.
6. Bring in the salt - keep your salt and shovel indoors to avoid slipping while on your way to the garage or storage shed to get it.
7. Shovel the walkway - keep your steps and pathways clear. Check your railings and ensure they are sturdy, as they may save you from an unexpected slip or trip.
8. Ask for help - most people are happy to help an older person navigate across a slippery sidewalk or parking lot.
9. Have a plan - if you experienced a fall what would you do? Being prepared in the event of a fall can assist in getting help as quickly as possible, and may even save your life.
10. Ask yourself if you are at risk - check your risk for falling with the Staying Independent fall risk assessment tool: www.seniorsbc.ca/stayingindependent

Source: British Columbia Ministry of Health, December 2011



Stay active - strong muscles and bones are important in preventing falls and getting around safely. If winter conditions make it unsafe to exercise outdoors, stay active with an indoor routine that includes strengthening and balance exercises.



media corner @

Your RTO/ERO HSIC shares as part of five meetings per annum, general health and wellness information items in the form of articles, PDFs, podcasts and websites.

Ministry of Health and Long-Term Care

<http://www.health.gov.on.ca/en/public/programs/drugs/funded.aspx>

The Ontario Drug Benefit Program

What does the program cover?; What is not covered?; Who is eligible?; What costs will I pay?

<http://www.health.gov.on.ca/en/public/programs/drugs/programs/odb/odb.aspx>

The New Drug Funding Program (NDFP)

The NDFP covers certain approved intravenous cancer drugs administered in hospitals. You will find a list of cancer drugs covered and the type of cancer they are used for in the Cancer Drugs section of the Cancer Care Ontario website.

<http://www.health.gov.on.ca/en/public/programs/drugs/programs/ndf.aspx>

The Special Drugs Program (SDP). The SDP covers the full cost of certain outpatient drugs used to treat a number of serious conditions. These conditions include:

- cystic fibrosis (a lung disease) • thalassaemia (a blood disease)
- HIV infection (a disease of the immune system) •end stage kidney disease • a solid organ or bone marrow transplant •children with growth failure • schizophrenia •Gaucher's disease (a genetic disorder).

<http://www.health.gov.on.ca/en/public/programs/drugs/programs/sdp.aspx>

The Visudyne (Verteporfin) Program. This program covers the full cost of the drug verteporfin, used to slow the advance of age-related macular degeneration (an eye condition). The drug must be provided under specific circumstances. <http://www.health.gov.on.ca/en/public/programs/drugs/programs/verteporfin.aspx>

The Canadian Hearing Society (CHS/SCO) offers 17 programs and services to meet the needs of people who are culturally Deaf, oral deaf, deafened, or hard of hearing. Click on the link below to find out more about the programs.

http://www.chs.ca/index.php?option=com_content&view=article&id=40&Itemid=54&lang=en ●

Important Reminder about Weight-Loss Health Products

As the rate of obesity has increased in Canada, so has the market for weight-loss products. While authorized health products for weight loss may provide benefits when used properly as part of a weight management program, the use of unauthorized health products may pose serious risks to your health.

The vast majority of natural health products (NHPs) have a history of safe use and are responsibly marketed. But some products in Canada are marketed or represented as NHPs have been adulterated. Products that are adulterated contain substances that may not be declared on the label, including prescription medications or other potentially dangerous ingredients.

As a result, Health Canada has identified and taken action on a number of unauthorized health products promoted for weight loss (for a complete list check www.hc-sc.gc.ca/ahc-asc/media/advisories-avis/_2012/2012_06pl-eng.php). A number of these products have been found to contain the undeclared pharmaceutical ingredient sibutramine and/or an undeclared pharmaceutical ingredient similar to sibutramine.

Sibutramine was previously used to treat obesity but is no longer authorized for sale in Canada because of its association with an increased risk of cardiovascular side effects such as heart attack and stroke. In addition to heart attack and stroke, side-effects associated with sibutramine include increased blood pressure and heart rate, dry mouth, difficulty sleeping and constipation.

Source: Health Canada, January 2012

Name Change for Mondial Assistance

Effective February 1, 2012, Mondial Assistance is adopting the brand of their global parent, Allianz. In all go-forward communications, Mondial Assistance will now be referred to

Allianz Global Assistance

P.O. Box 277 ♦ Waterloo ON N2J 4A4
1.800.249.6556 from Canada and the U.S.

You will be able to use the same telephone numbers and mailing address located on the back page of your Insurance Plans Booklet. Any further inquiries can be made by contacting Johnson Inc. at 416-920-7248 or toll-free at 1-877-406-9007.

Get some sodium sense

The Province of British Columbia is continuing to make the healthier choice the easier choice with a new online, interactive sodium tool.

Using the Sodium Sense tool, visitors to www.healthyfamiliesbc.ca/sodium-sense.php can gauge how much sodium they consume throughout the day. This interactive tool allows families to create low sodium meals for breakfast, lunch and dinner.

British Columbians consume more than double the amount of sodium considered adequate to promote good health. So consume more fresh foods, fewer processed or packaged ones and read those labels. Use the Sodium Sense tool to create meals that have the recommended 500-800 mg of sodium, and aim for a total daily sodium intake of 1,500-2,300 mg.

Healthy Families BC is targeted at reducing chronic diseases and obesity levels in the province through healthy eating and physical activity. The \$68.7-million strategy will see the implementation of a variety of healthy living measures to improve health and promote wellness in every part B.C.

Quick Facts:

- Chronic diseases such as diabetes, high blood pressure and heart disease are the largest causes of disability and death in British Columbia.
- Excess sodium is linked to high blood pressure, the major cause of cardiovascular disease and a risk factor for stroke and kidney disease.
- There is also evidence that a diet high in salt is a risk factor for osteoporosis, stomach cancer and asthma.
- The recommended daily sodium intake for an adult is 1,500 mg, but the majority of British Columbians consume more than twice that amount, at 3,400 mg. This means that the average British Columbian consumes the equivalent of 11 cups of salt a year.
- Evidence shows that if we are physically active, achieve and maintain a healthy body weight, enjoy a healthy diet and refrain from smoking, we can reduce our risk factors for most chronic diseases by up to 80 per cent.



Evidence shows that if we are physically active, achieve and maintain a healthy body weight, enjoy a healthy diet and refrain from smoking, we can reduce our risk factors for most chronic diseases by up to 80 per cent.

Source: British Columbia Ministry of Health, January 2012

Ontario Offering Seniors A Simpler Way To Renew Health Cards

ONTARIO IS NOW MAKING IT EASIER FOR SENIORS - AGE 80 AND OVER - TO RENEW THEIR HEALTH CARDS FROM THE COMFORT OF THEIR OWN HOMES.

The Province's new mail-in renewal service for seniors age 80 and over allows them to apply for their new cards by completing and signing the back of their renewal notices and returning them to Service Ontario in a pre-addressed envelope. This means they won't have to wait in lines or make trips through winter weather to renew their health cards anymore -- instead, they can spend more time doing the things that matter most to them while ensuring seamless access to health services.

Seniors who prefer to renew their health cards in person can still visit a Service Ontario centre.

Source: Ontario Ministry of Health and Long-Term Care, January 2012.