



# FREQUENTLY ASKED QUESTIONS

## Renewal on January 1, 2021

### **\$5 DEDUCTIBLE PER PRESCRIPTION DRUG**

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# FREQUENTLY ASKED QUESTIONS

## Renewal on January 1, 2021

### **\$5 DEDUCTIBLE PER PRESCRIPTION DRUG**

- **How does the deductible work?**

- A deductible is the amount that you're responsible for paying in the event of a claim. This is the portion of the claim you must pay and SSQ Insurance pays the remainder. As of January 1, 2021, when you purchase prescription drugs, you will have to pay the first \$5.00 of each drug as well as the non-insured portion of the medication.

While a \$5.00 deductible per drug purchase may seem trivial, this amount was carefully calculated in an effort to mitigate effects, both real and potential, on your group plan's financial health and its members' experience.

In short, this deductible influences the cost of your insurance plan. Applying a deductible to the Pro-Health Plan reduces your premiums.

**BACK**

- **Does the deductible apply to both brand name and generic drugs?**

- Yes. The \$5.00 deductible per drug purchase applies to both brand name and generic drugs.

**BACK**

- **Does the deductible apply to all family members?**

- Yes. The \$5.00 deductible per drug purchase applies to every member of your family.

**BACK**

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## Renewal on January 1, 2021

- **Will this affect my claims for other medical expenses?**

- The deductible only applies to prescription drugs. Other medical expenses covered by your policy will not be subject to this deductible, which takes effect on January 1, 2021.

**BACK**

- **If I reach the maximum yearly contribution, do I still have to pay the deductible?**

- No. Once you reach the maximum, you no longer pay the deductible on prescription drugs for the remainder of the year (until December 31).

**BACK**

- **How can I keep my health insurance group plan rates from increasing?**

- Opting for generic drugs makes a difference in the cost of your group insurance plan. Why? Because generic drugs can cost up to 75% less than their brand name bioequivalents. The active ingredient in a drug, whether generic or brand name, must meet the same scientific standards set out by Health Canada. In sum, generic medications have the same quality, purity, efficacy and safety profile as brand name drugs.

**BACK**

# FREQUENTLY ASKED QUESTIONS

## Renewal on January 1, 2021

### **CHANGE TO WAIVER OF PREMIUMS' WAITING PERIOD**

- **What does this change represent?**

- Under the previous FP-CSN group plan, members on disability had their premiums waived on the first day of the premium period that coincided with or followed the sixth business day after the start of their disability. As of January 1, 2021, the waiver of premiums will take effect after 24 months on disability leave, when members start receiving their long-term disability benefits.

**[BACK](#)**

- **My disability began before January 1, 2021; will this change affect my waiver of premiums?**

- No. Any disability leave that began prior to January 1, 2021, remains eligible for the waiver clause in effect at the time.

**[BACK](#)**

- **I'm already on disability; will the change to the waiting period affect my benefits?**

- No. Disability benefits are not affected in any way.

**[BACK](#)**

# FREQUENTLY ASKED QUESTIONS

## Renewal on January 1, 2021

### TWO LONG-TERM DISABILITY COVERAGES COMBINED

- **What does this change represent?**

- Under the previous FP-CSN group plan, members could choose between two coverage options: basic or superior. As of January 1, 2021, these will be combined into a single mandatory option.

Prior to January 1, 2021	→ As of January 1, 2021
<b>Basic disability coverage</b> <ul style="list-style-type: none"> <li>• Mandatory</li> <li>• <b>80%</b> of the net benefit received from the employer on the 105th week of disability</li> <li>• Ending at <b>age 61</b></li> </ul>	<b>Disability coverage</b> <ul style="list-style-type: none"> <li>• Mandatory</li> <li>• <b>80%</b> of the net benefit received from the employer on the 105th week of disability</li> <li>• Ending at <b>age 65</b></li> </ul>
<b>Superior disability coverage</b> <ul style="list-style-type: none"> <li>• Mandatory</li> <li>• <b>100%</b> of the net benefit received from the employer on the 105th week of disability</li> <li>• Ending at <b>age 65</b></li> </ul>	

The combined long-term disability coverage will apply to all members.

**BACK**

- **My disability began before January 1, 2021; will this change affect my future benefits?**

- Your future benefits will be determined based on the plan and coverage option (basic or superior) in effect at the start of your disability leave.

**BACK**



# FREQUENTLY ASKED QUESTIONS

## Renewal on January 1, 2021

### GENERAL QUESTIONS REGARDING POLICY CHANGES

- **Will these changes apply to all modules of the Pro-Health Plan and Disability Plan?**

- Yes. Regardless of your choice of coverage, these changes will apply to all modules as of January 1, 2021.

**BACK**

- **I've read the changes that take effect on January 1, 2021. The coverage options I have suit me perfectly; do I need to contact you or notify you about my choice to maintain these options?**

- No. No action is required from you if you wish to maintain your current coverage selection.

**BACK**

- **If I want to make changes to my coverage selection, what do I have to do?**

- To make changes to your current coverage, you must submit a request directly to your employer. Changes and new premiums will apply according to the policy's terms and conditions.

**BACK**

- **Where can I see information about my plan with SSQ Insurance?**

- The [Customer Centre](#) at **ssq.ca** is the fastest way to access your insurance file.

You only need your **email address** and **certificate number** to register. It takes two minutes to sign up.

Your online account is a simple, quick and convenient way to:



# FREQUENTLY ASKED QUESTIONS

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- Submit claims and get reimbursed by direct deposit within 48 hours (most claims)
- Access all your insurance documents (statements, receipts, card, etc.)
- Track the progress of your claims
- Consult the details of your coverage anytime

**BACK**

- **What is the minimum participation period for Pro-Health coverage?**
  - Members with Global Pro-Health and Global + Pro-Health coverage must maintain their participation for at least 36 months before they can decrease their coverage, unless they experience a specific life event (marriage, birth, etc.).

**BACK**