



JACFA GENERAL ASSEMBLY
Wednesday, November 18, 2009
PENFIELD 204
5:30 p.m.

The meeting was called to order at 5:40 p.m.

01. Adoption of Agenda

Proposed: Abe Sosnowicz Seconded: Alex Panassenko.

Adopted.

02. Adoption of the Minutes of October 7, 2009

Proposed: Jim Vanstone; Seconded: Abe Sosnowicz.

Adopted.

03. Announcements

H1N1: James Leeke

Presented the memo from administration signed by Annie Tam regarding the need for medical notes when sick for more than seven days. For the H1N1 pandemic, the administration has agreed to waive the need for a medical note for up to 10 days of absence. However, our request to not deduct sick days when the teacher is being socially responsible and respecting the seven days of staying home that is being suggested by government authorities, even if they are fit enough to work, the administration did not agree. Gerry Strachkowski said he was bringing this to Ginette Sheehy. The administration's main reason for refusing is that it would be too difficult to administer. How would we really know they are contagious or not? Bottom line is: We are expected to trust the students but the administration seems not to trust us.

Teaching and Learning Environments (Academic Council committee): Abe Sosnowicz

Abe is recruiting faculty members for anyone who is interested.

1. Insurance Renewal 2010

Faye Trecartin stated that we would proceed by debating and voting on the two motions one at a time. The first motion was a recommendation from the FNEEQ insurance meeting that we renew our insurance plan with La Capitale and choose between the following two options:

MOTION: Option 1

That health insurance rates increase by 4.6% and that the plan be modified by:

- a) *Giving active insured members 65 years and over a choice between:*
 - *coverage offered by La Capitale at a differentiated (higher) rate*
 - *RAMQ drug coverage plus complementary health insurance coverage from La Capitale.*
- b) *Covering 80% of the first \$2,000 (an increase from \$1,000) of the eligible prescription drugs and 100% thereafter (90% reimbursement for generic prescription drugs).*

OR

Option 2

That health insurance rates increase by 7.5% and that the plan be modified by giving active insured members 65 years and over a choice between:

- *coverage offered by La Capitale at a differentiated (much higher) rate*
- *RAMQ drug coverage plus complementary health insurance coverage from La Capitale.*

FNEEQ Motion

Our vote must be reported to FNEEQ as for one of the two options. If we amend the motion, we will be counted as voting against the insurance plan renewal.

Stephen Bryce noted that health insurance is only one part of our insurance: long-term disability, accidental death and dependent life insurance rates will remain the same in 2010 and life insurance rates will decrease by 8% in 2010. For health insurance, however, La Capitale proposed an 11% increase in premiums based on increased claims, mainly for drugs. To lower the increase to 4.6%, the FNEEQ insurance committee proposes to make two major changes to the plan: 1) giving members 65 and over the “choice” of paying more (about double) to stay with La Capitale or 2) moving to the RAMQ provincial drug plan and paying a lower premium to La Capitale for only the non-drug provisions of the health plan.

Clea Notar: Asked if the increase in claims is just from JAC?

Stephen: No, it is from all members of FNEEQ unions in the plan.

Stephen continues: The second change is to increase the “coinsurance” maximum limit (up to which members pay 20% of the cost, over which they are fully reimbursed) from \$1000 to \$2000. He noted that this measure was originally a JACFA suggestion, but they only took half of our suggestion and did not use the savings to increase coverage for paramedical services.

Roxane Millette asked what is the RAMQ limit?

Stephen: In RAMQ, reimbursement is 68% up to a monthly limit of \$79.53 per person or a maximum contribution per year of \$954, which translates to a coinsurance limit of about \$3000.

Paul Jones: Is this for those over 65 who are still teaching? How many are we talking about?

Stephen: Yes, for current teachers; retirees are under a separate plan and have been pushed onto RAMQ at 65 for the past ten years or so. We don't have complete numbers, but there are approximately 60 members aged 65+ across the plan (6800) who made claims last year.

Stephen concludes: The JACFA Executive does not have a position on the first two options. I will vote tomorrow at the FNEEQ insurance meeting following how you vote tonight.

Paul Jones: No matter what we vote, there will be an increase. Can we abstain?

Stephen: Yes, but a decision must be made regardless. We will register our dissidence, but only two options were recommended to us. Voting against both means rejecting the renewal, which means FNEEQ would have to go to tender with other companies.

Helen Ellis: What's the “much higher” and “higher” rate in the Insurance Report?

Stephen: That is our analysis – members 65 and over will end up paying more.

Helen Ellis: What would you advise me to do if I disagree with both options?

Mike Turner: What is “complementary Health Insurance”?

Stephen: All coverage other than drugs – travel, hospitalization, professional services, etc. Members over 65 will keep everything but drug insurance.

Gisèle Samson-Johnson: Do members 65+ make more drug claims than those under 65?

Stephen: La Capitale's statistics show that they do. When we looked at this in our old JACFA plan it was also the case, but the differences were not very great.

Mike Turner: Reimbursement for generics is less than reimbursement for non generic drugs?

Stephen: Yes, 90% instead of 80% to encourage members to use the less expensive option.

Clea Notar: Why are rates increasing?

Steve: People are making more expensive drug claims. FNEEQ “owns” the plan and pays La Capitale to administer it (costs plus a guaranteed profit). FNEEQ keeps any surplus or has to make up any deficit by increasing premiums.

Steve Luxton: To what degree is the increase in drug costs contributing to this?

Stephen Bryce: Hugely. Our former broker says across the industry, drug costs have been increasing 10-20% per year since the patent laws were changed in the late 1980s.

Ryan Young: I preferred the old plan as it covered alternative medicine better. Can we go back?

Stephen: The main reason we gave up our old plan was that as a small group. We did not have much bargaining power and we were facing annual increases over 10% each year. Our former broker says his plans have continued to have annual increases of 10% or more, but with FNEEQ we had no increase in the first two years and just a 2% increase last year.

Paul Jones: For family coverage, what does an 8.5% increase work out to?

Stephen: Annually from \$2398 to \$2602, plus 9% tax.

Paul: So the status quo would cost about \$200 per year, or about \$10 per pay. It is important to put this in perspective. It amounts to "ageism" to push out the members 65 and over.

Stephen: In JACFA we did this also in the past.

Abe Sosnowicz: For those over 65, is there an option to opt out of the health insurance plan?

Stephen: No. The government requires all collective agreements to include a health plan.

John Buskard: Asked to call the question.

Faye: There is only one more person on the speakers' list. There was no seconder, so the debate continued.

Faye: I interpret this discussion as indicating that we do not support any other option except possibly 1-B only. We do not accept kicking off over 65s.

Andy Cuk: If it is also being discussed at other union meetings, can this be changed tomorrow, and come back to us for another vote?

Stephen: Given the short time period and the fact that just these two options were given, the decision will almost certainly be made tomorrow.

Abe Sosnowicz: I have a horrible problem with the process here. We are pandering to a corporation. We have effectively gone through a process where FNEEQ shows us what they think of their veteran teachers.

Stephen: *La Capitale* is indifferent as to what decision we make regarding coverage. They provide a service for which they are compensated. FNEEQ needs the health insurance plan to finance itself – otherwise we would have to pay it out of our union dues. JACFA had higher coinsurance limits and pushed members 65 and over to RAMQ when we ran our own plan. The real enemies here are the pharmaceutical companies that keep increasing drug prices.

Roxane Millette: It's FNEEQ that gave us these options.

Paul Jones: This deal is better than what private companies would give us. Why isn't there an option 3 for keeping everyone but accepting a larger increase? Was it teachers that made this decision?

Faye: I was at that meeting and FNEEQ really pushed the 4.6 option. Daniel and I were the loudest at complaining with a larger increase; it was clear we were in the minority.

Andy Cuk: I think what Abe said was very clear and good. I think we should include that language in our dissidence: Firing squad or death by lethal injection. Disposable teachers.

Abe clarified his earlier statements: Said creating a group of disposable veteran teachers. Used given the choice of death by hanging, firing squad or lethal injection. This is despicable.

Jim Leeke: Questioned whether it is worth doing this to save a lousy 1%. The increase in costs for over 65s could be up to 35%, if they reach the RAMQ coinsurance limits. In solidarity, it is not worth it to kick them out. This is not about disposable teachers, it is about dollars and cents.

There being no further debate, the President put the question to the assembly.

VOTE: 24 votes in favor of Option 1, 5 votes in favor of Option 2, and 4 abstentions.

The President declared that our advice to FNEEQ is therefore **Option 1**.

Faye Trecartin: The second insurance motion is a recommendation from the JACFA Executive:

MOTION: *That JACFA register its dissidence with changing coverage for members over 65 years.*

JACFA Executive Motion

Stephen Bryce: This motion will mandate JACFA's representatives to speak against the fact that we were given no option that excluded removing drug coverage for members 65 and over. If other unions have passed similar motions, this may be reversed, but this is unlikely – most union representatives will come to the meeting with a mandate only to vote for one of the two options presented. JACFA will, however, clearly make its point that we oppose this change.

There being no further debate, the President put the question to the assembly.

The President declared that the motion **PASSED UNANIMOUSLY**.

Abe Sosnowicz moved, seconded by *Alain André* that the meeting adjourns.

Adopted.

The meeting adjourned at 7 p.m.