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My Three Wishes for A Healthier Health Care System

A few things caught my eye this month... 'Unhappy Employees Get Sick' was the headline in one newspaper; another article touted the revelation that 'High Drug Costs Could Be Cut'; and yet another espoused the virtues of e-medicine. The common thread, and this isn't news, is the disconnect in our medical system.

"Soaring drug costs could be cut in Canada if doctors paid attention to the cost of the medications they prescribe", says a federal report. The study, commissioned by Industry Canada, found that Canadian physicians are generally oblivious to drug prices and often prescribe an expensive drug when a cheaper one would do. "There really isn't a formal mechanism that credibly brings cost into the physician's decision-making process when issuing prescriptions", says a report by IMS

Health Consulting Inc. The United States and Britain do use health management systems that take drug prices into account, thereby helping to reduce pharmacy bills. Incorporating appropriate cost considerations into the medical decision-making process could offer reduced costs to the health-care system and should be considered by each of the provinces.

The study examined what happens to drug sales when cheaper generic versions of pharmaceuticals go on sale after the expiry of Canada's eight-year patent protection for the brand-name equivalent. After several months, the generic version typically supplants the brand-name, and brand-name drug companies stop promoting their own version. This process is driven by the fact that provincial drug formularies allow pharmacists to quietly substitute the generic version even though a doctor may have prescribed a brand name, allowing the provinces to save on pharmaceutical programs.

Doctors are bombarded with marketing materials promoting brand names. They don't have the time to consider the cost burden to the patient or to government pharmacare plans when writing prescriptions. Perhaps we need a mechanism to make them aware? How about computer systems that allow doctors to check drug prices before they prescribe?

Brand name drug companies

need revenues to invest in research. Government, employers and patients will save money due to the savings that are created due to an e-drug system. Surely there is a fix here?

Speaking of electronic systems... Sapphire Health Group, a Waterloo-based private health firm, has created a plan to manage health files for patients that raises issues that doctors and patients might like to consider. They are promoting the idea of accumulating patient health records and then making them available to whichever doctor or hospital needs them. The information could include test results, adverse drug reactions, past procedures and 'do-not resuscitate' orders.

The idea has some merit from several different perspectives. From a patient's perspective, the advantage of having a doctor or nurse with more information, rather than less, would seem to be undeniable, providing that the patient can rely upon the provider of the information to not release it improperly. The electronic transfer of records would speed up the usual 'question and answer' method of obtaining information that doctors and nurses have used when they need to understand a patient's problem.

This proposal has to be looked at from a broader perspective that goes beyond legal issues. Why, in an age when just about every type of information is available electronically, are medical records not among them?



Mon. Dec. 24 - Closed -12:30pm
Tues. Dec. 25 - Closed all day.
Wed. Dec. 26 - Closed all day.
Mon. Dec. 31 - Closed -12:30pm
Tues. Jan. 1 - Closed all day

The staff at RWAM Insurance Administrators Inc. would like to wish you a safe holiday season & the best of health and happiness in 2008.

Ontario Residents 2008

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Premium Summary

RENEWAL RATES - Designed specifically for the Self-Employed & Small Group Employer

MANDATORY BENEFITS

Life Insurance, Dependent Life, AD&D, Extended Health Care & Out-of-Canada

All Eligible Employees

Single Coverage	\$ 65.00 /month
Family Coverage	\$ 139.90 /month
Exempt Coverage	\$ 14.00 /month

OPTIONAL BENEFITS

Dental

All Eligible Employees

Single Coverage	\$ 43.40 /month
Family Coverage	\$ 107.00 /month

Long Term Disability

Some occupations are not eligible for Disability coverage due to the nature of the risk.

All Eligible Employees \$2.85/\$100 of benefit

* Rates are subject to Provincial Sales Tax

* \$10.00 per month Standard Administration Fee per group, subject to GST

* Rates effective Jan. 1, 2008 and are reviewed annually

An employee may opt out of Health Care &/or Dental benefits ONLY if he/she has coverage under a spouse's Health Care &/or Dental plan.

Revision to Standard Orthotics Benefit For All RWAM Groups Under 25 Lives

Effective Jan. 1, 2008

As part of RWAM's ongoing efforts to manage and control the costs of plan sponsors' group Extended Health Care benefits packages, we audit claims data for trends and possible over usage.

Orthotics awareness is on the rise. If an employee requires orthopedic shoes or just orthotic inserts, your Extended Health Care plan does provide a valuable benefit.

However, as orthotics usage has risen, the risk to a plan sponsor's overall costs can be significant. Many plans currently have no dollar limit for orthotics.

Reference to the EHC Schedule of Benefits in your Employee Benefits Booklet will probably indicate a "2 pair per calendar year" maximum for orthotics and/or orthopedic shoes, without any dollar limit. Historically this has been the standard.

There are claims controls as described in the EHC Details section of your Employee Benefits Booklet, such as requiring a prescription by an orthopedic surgeon, podiatrist, pedorthist, or chiropodist. Unfortunately, based on today's trends and the increasing prices of just one pair of orthotics, these controls no longer sufficiently address the escalating risk to your plan's costs.

Therefore, effective January 1st 2008, your standard 2 pair per year benefit will have the added control of "\$500 total per calendar year".

For most employees, this additional control should not affect their ability to still enjoy some significant cost relief for their prescribed orthotics.

Please note you will see this change reflected in any renewed supplies of Employee Benefits Booklets you order after January 1st.

Please contact RWAM's Group Administration Department with any questions or concerns.

My Three Wishes, continued

Ontario Conservative leader John Tory did raise this question a few months back. He's not the first person to do so. E-health records were recommended by the Romanow report in 2002. Alberta and Prince Edward Island plan to have electronic systems by 2008 and British Columbia hopes to have its system running by 2009.

Setting up an electronic network for maintaining health files won't be cheap, but then... what in health care is these days?

Lastly, "Unhappy workers get sick". Again, not a shocker, but with a New Year soon to be upon us, it's worthy of revisiting.

Giving workers a sense of control over what they do is the key to reducing health problems. Employers tend to focus on the symptoms, such as high absenteeism rates, when they should deal with the underlying cause - the design of the jobs.

"If you're a company that is spending your time wondering how you will reduce

employee absence by a quarter of one per cent, you are looking at the problem completely backwards", says Stephen Bevan, a director of research at the Work Foundation in the United Kingdom. He says people with low-status jobs and with a low level of control over their work environment are the ones who suffer the most from serious health problems such as cardio-vascular disease and mental stress.

Job satisfaction is the biggest factor in predicting how quickly a person will return to work. Everything I've read suggests that any health initiatives that employers put into effect will have little impact if they don't provide people with a greater sense of control, autonomy and flexibility. On any working day, between three and five per cent of the workforce will be absent from work because of a physical problem or mental stress, and a further twenty-five per cent of workers may be at work, but will be performing sub-optimally.

When employees are highly satisfied and committed to their jobs, it leads to greater customer satisfaction. Giving employees greater control over their work environment is one way employers can make a difference. One way to give employees control is to design 'teams'. Every individual is given the big picture and their contribution is broken down and seen as part of the overall plan.

The biggest barrier to change continues to be ourselves. Maybe the answer lies in looking outside the nine dots? As a great coach once said, "Yesterday's touchdowns don't win tomorrow's football games".

Connecting makes sense, whether it is from an e-system of some kind, or by creating teams to ease the stress at work. Step back, take stock, and plan the changes you would like to make for yourself, your family and your job.

Make 2008 the best year you can.

Until next year...