

CONTRACT Y9999-R

Retired Management Personnel of the Quebec Government

Subject: Modifications to your accident and health insurance plan taking effect on January 1, 2017

Dear Sir/Madam:

As you may have learned from the last publication by the Advisory Committee for Retirees (ACR), modifications will be made to the reimbursement of prescription drug expenses under the accident and health insurance plan of the Retired Management Personnel of the Quebec Government.

The purpose of these changes, which were proposed jointly by the members of the ACR, the Intersectoral Parity Committee and the *Secrétariat du Conseil du trésor*, is to curb premium increases for management staff retirees who are members of the group insurance plan.

Below are the new rules that will take effect on January 1, 2017, as well as the possible impact they will have on your prescription drug claims.

1. Mandatory generic substitution

As of January 1, 2017, a plan member who opts for a brand-name drug* will only be reimbursed the amount for its generic equivalent, which means that they will have to pay the difference out of pocket. Here are the most typical situations that may arise, depending on your use of generic drugs and the impact on your reimbursements.

*** Definitions**

Generic drug: A low cost copy of a brand-name drug (first on the market) whose patent is expired.

Brand-name drug: Patented drug for which there is a generic equivalent.

Single-source drug: Drug for which there is no generic equivalent.

Your situation	Impact on your reimbursement
You don't take prescription drugs	No impact
You already use generic drugs when available	No impact
Your prescription drug doesn't have a generic equivalent (it is single-source drug)	No impact
You opt for the brand-name drug even though a generic equivalent exists	The reimbursement will be based on the cost of the generic equivalent.
You purchase the brand-name drug because your medical condition prevents you from using the generic equivalent	In order to receive your usual reimbursement, please have the Reimbursement Request for Brand-Name Prescription Drugs (PDF) form completed by your doctor, then send it to SSQ for evaluation. This form is available at ssq.ca . Simply click DOWNLOAD A FORM in the <i>Essentials</i> section on the homepage. Once the form is approved by SSQ, you will receive your reimbursement. Please note that even if you send your form ahead of time, the confirmations will be sent in December only.

2. Changes made to eligible drugs under the Enhanced plan

As of January 1, 2017, the definition of prescription drugs eligible for reimbursement will be modified to **include prescription-only drugs**. Therefore, if an attending physician prescribes a drug that can also be obtained without a prescription (over the counter), it will no longer be reimbursed as of January 1, 2017.

3. Changes made to maximum annual reimbursements

Starting January 1, 2017, the amount at which prescription expenses are reimbursed at 100% (currently \$3,000 for the Enhanced plan and \$2,700 for the Basic plan) will change. The reimbursement limit will no longer be calculated based on the eligible expenses submitted, but rather on the amounts paid by the plan member. As of January 1, this amount will be \$1,046, per insurance certificate, per calendar year. It will be adjusted every January 1 and will be revised in accordance with the amount set by RAMQ's Basic Prescription Drug Insurance Plan on July 1 of the previous year.

Therefore, a plan member who reaches the health and accident insurance plan's threshold for reimbursement at 100% will have to pay more than in previous years.

The new rates for 2017 as well as the changes made to your plan will be sent to you, as usual, during the month of December.

We hope that this information will allow you to better understand the nature of the changes that will be made to your plan and help avoid any unpleasant surprises on your first claims in 2017.

Sincerely,

**Customer Service Department
SSQ Financial Group**