

2025 Benefits Update for Retirees

Your benefits coverage from the Public Sector Group Insurance Plan (PSGIP) plays a key role in your healthcare throughout your retirement years. That's why the PSGIP Trustees carefully manage health benefits coverage for you and your eligible family members.

The PSGIP Trustees, with consultation from the Retiree Advisory Committee, recently completed the annual review and renewal of your retiree benefits program. This notice includes the results of the renewal, including the rate changes effective **April 1, 2025**.

This notice summarizes the outcomes of the renewal, including the rate changes effective **April 1, 2025**.

This is your once-a-year opportunity to change your Health or Dental plan option for the next year. Review your choices carefully and make sure you're enrolled in the right coverage option for you and your family. If you plan to make a change, complete the *Coverage Change Request Form* included with this notice and return it to Johnson Inc. no later than **Monday, March 10, 2025**. Your new coverage takes effect starting **April 1, 2025**.

Important dates

Thursday, February 27, 2025

- Benefits information meeting: Charlottetown – 9 a.m. / Summerside – 1 p.m.
(See page 3 for details on the meeting locations)

Monday, March 10, 2025

- Coverage Change Request Form must be submitted by this date to Johnson Inc. if you want to change your Health or Dental Plan option

Monday, April 1, 2025

- Your new coverage takes effect

Retiree Advisory Committee representatives

Bill Harper
Don Scott
Jeannie Pitts
Miriam Lank
Pat Ellis

2025 rates

Each year the PSGIP Trustees review the benefits program to ensure that contribution rates are adequate to pay expected claims and expenses in the coming benefit year. Health and Dental premium rates are based on the claims actually paid for the group. The premium rates must be adequate to cover the claims made, as well as the administration costs required to keep the Plan running.

The following charts summarize the Health, Dental, and Travel rates effective **April 1, 2025**.

	Under age 65			Over age 65		
	Your current monthly cost	Your new monthly cost	Change	Your current monthly cost	Your new monthly cost	Change
Health						
Option 1						
– Single	\$278.05	\$296.40	+\$18.35	\$223.89	\$238.67	+\$14.78
– Family	\$592.17	\$631.25	+\$39.08	\$476.73	\$508.19	+\$31.46
Option 2						
– Single	\$238.38	\$254.11	+\$15.73	\$174.37	\$185.88	+\$11.51
– Family	\$513.18	\$547.05	+\$33.87	\$371.48	\$396.00	+\$24.52
Option 3						
– Single	\$168.18	\$179.28	+\$11.10	\$134.61	\$143.49	+\$8.88
– Family	\$358.11	\$381.75	+\$23.64	\$286.71	\$305.63	+\$18.92
Option 4						
– Single	\$33.86	\$33.86	\$0.00	\$33.86	\$33.86	\$0.00
– Family	\$72.18	\$72.18	\$0.00	\$72.18	\$72.18	\$0.00

	Under/ Over age 65		
	Your current monthly cost	Your new monthly cost	Change
Dental			
Basic Services			
– Single	\$33.54	\$34.48	+\$0.94
– Family	\$75.89	\$78.01	+\$2.12
Basic & Major			
– Single	\$37.21	\$38.33	+\$1.12
– Family	\$84.20	\$86.73	+\$2.53
Travel			
– Single	\$13.18	\$13.80	+\$0.62
– Family	\$26.36	\$27.62	+\$1.26

Life Rates Effective April 1, 2025
1. Dependent Life rates: +15%
2. Optional Life rates: +5%

Making changes to your benefits coverage

Each benefit year, you are eligible to change your level of Health and Dental coverage without having to provide medical evidence. If you would like to change your current Health or Dental Plan option effective **April 1, 2025**, complete the enclosed *Coverage Change Request Form* and return it to Johnson Inc. by **Monday, March 10, 2025**.

To help you decide which Health option is best for you, follow the steps below to estimate your total annual cost under each option and consider your tolerance for risk.

Step ①	Estimate your annual health expenses for you and your family.
Step ②	Determine the annual premiums for each option.
Step ③	Calculate the amount you will pay (co-pay/deductible) for your estimated health expenses under each option. Add this amount to your annual premiums.
Step ④	Think about how much risk you are comfortable taking for unforeseen health events and expenses. Option 1 provides the most protection against unforeseen health risk.

When determining your level of coverage, don't forget to take into account the different coverages and limitations of the Health Plan options. You also need to consider your level of comfort with expenses that cannot be foreseen. See *Your Retiree Benefits Options At-a-Glance* on page 4 of this notice for a brief summary of coverage under each Health and Dental option.

Manage your health

Canada Life has a wealth of information and tools ready to help manage your overall wellbeing. If you would like to learn about the resources available, the first step is to login to My Canada Life at Work at www.mycanadalifeatwork.com. If you are not registered, you will need to follow the steps outlined to register an account before gaining access to the information. Once you are logged in, the information can be accessed by clicking on Resources located on the left-hand side of the page.

A Personal Health Risk Assessment is an easy first step to take stock of your current health and set a course to improve it. Click under Resources and select Wellness which will bring you to the Health Connected site.

More information

For more information about your benefits, visit the PSGIP website at www.mybenefitplan.ca or consult the Benefits Summary for Retirees. You can also contact Johnson Inc. for benefits information at **902-628-3537** (or toll-free at **1-800-371-9516**) and Canada Life for questions about claims at **1-800-957-9777**.

Benefits Information Meeting

To learn more about the available benefits under the PSGIP or upcoming rate changes, attend an information session on February 27th (weather permitting).

Thursday, February 27, 2025
9 a.m. to 10:30 a.m.

Murchison Centre
17 St Pius X Avenue
Charlottetown

Thursday, February 27, 2025
1 p.m. to 2:30 p.m.

Loyalist Inn
195 Heather Moyse Drive
Summerside

If there is a storm on February 27, the meetings will be rescheduled to Friday, February 28 and an announcement will be made on radio stations: CFCY (FM 95.1), K-Rock (FM 105.5), Ocean (FM 100.3) and SPUD (FM 102.1). The announcement will also be posted on the CBC PEI Storm Centre located on the website page <https://www.cbc.ca/news2/interactives/stormcentre/?region=PE>.

Your retiree benefit options at-a-glance



Health and Dental Plans

Health Plan	Option 1	Option 2	Option 3	Option 4
Prescription drugs	80% reimbursement of the first \$150 per eligible drug expense, and 100% reimbursement thereafter (\$500 lifetime maximum per person for vaccines)	You pay an annual* deductible before drug coverage begins: \$300 single \$600 family 80% reimbursement of the first \$150 per eligible drug expense, and 100% reimbursement thereafter (\$500 lifetime maximum per person for vaccines)	You pay the first \$50 per eligible drug expense, and 100% reimbursement thereafter (\$500 lifetime maximum per person for vaccines)	Coverage for vaccines only: 80% reimbursement, to a \$500 lifetime maximum per person
Hospitalization	No coverage (Options 1, 2 & 3)			100% reimbursement of the difference between a ward and semi-private room 80% reimbursement of the difference between a semi-private and private room
Eye exams	80% reimbursement, for one eye exam once every two calendar years (every calendar year for children under age 18)			
Eye glasses or contact lenses	80% reimbursement, to \$80 once every two calendar years (every calendar year for children under age 18)			
Medical services and supplies	80% reimbursement, to specified annual maximums (includes paramedical services and private nursing care)			
Ambulance services	100% reimbursement of the first \$50 of eligible expenses per calendar year, and 80% reimbursement thereafter			

* Annual deductible runs April 1 to March 31.

Dental Plan	Plan A	Plan B
Coverage	Basic services only 80% recall exam once every 5 months 80% maintenance services (e.g., fillings, oral surgery and periodontic and endodontic care)	Basic and Major services 80% recall exam once every 5 months 80% maintenance services (e.g., fillings, oral surgery and periodontic and endodontic care) 50% Major restorative services (e.g., dentures, crowns and bridges) to a maximum of \$500 per year



PSGIP COVERAGE CHANGE REQUEST FORM

RETIREE HEALTH AND DENTAL COVERAGE

EFFECTIVE APRIL 1, 2025

Under the terms of the Public Sector Group Insurance Plan (PSGIP) Retiree Health and Dental Care, you are eligible to change your level of coverage each year effective April 1st without being subject to medical evidence of insurability.

If you wish to change your current Health and/or Dental Plan Option, please complete the information outlined below and return this form to our office **no later than Monday, March 10, 2025** to allow Johnson Inc. time to make necessary premium changes for your April deductions. Please note, any forms received after April 30th will make you ineligible for changes in 2025.

NOTE: If you are not making changes to your current Option, please do not return this form to Johnson Inc.

COVERAGE CHANGE REQUEST

I hereby authorize my current Option to be changed to the Option I have requested below and authorize any necessary premium deduction adjustments required as a result of this change.

Name (please print): _____

Date of birth: _____

DD/MM/YYYY

Address: _____

Street

City/Province

Postal code

Place an "X" in the box for the new coverage you are enrolling for effective April 1, 2025.

	Coverage			
	Under age 65	Over age 65 Drugs covered under the PEI Provincial Seniors' DCAP* are <u>not covered</u> under the over 65 health plans		
HEALTH	SINGLE (MONTHLY)	FAMILY (MONTHLY)	SINGLE (MONTHLY)	FAMILY (MONTHLY)
Option # 1 <ul style="list-style-type: none">Health coverage, <u>excluding</u> semi-private hospital coveragePrescription drug co-payment of 20%, to a maximum of \$30/prescription for eligible prescriptions	<input type="checkbox"/> \$296.40	<input type="checkbox"/> \$631.25	<input type="checkbox"/> \$238.67	<input type="checkbox"/> \$508.19
Option # 2 <ul style="list-style-type: none">Health coverage, <u>excluding</u> semi-private hospital coveragePrescription drug co-payment of 20%, to a maximum of \$30/prescription for eligible prescriptions, after an annual deductible has been satisfied \$300 Single/\$600 Family	<input type="checkbox"/> \$254.11	<input type="checkbox"/> \$547.05	<input type="checkbox"/> \$185.88	<input type="checkbox"/> \$396.00
Option # 3 <ul style="list-style-type: none">Health coverage, <u>excluding</u> semi-private hospital coverageRetiree pays the first \$50 of each eligible prescription drug	<input type="checkbox"/> \$179.28	<input type="checkbox"/> \$381.75	<input type="checkbox"/> \$143.49	<input type="checkbox"/> \$305.63
Option # 4 <ul style="list-style-type: none">Health coverage, <u>including</u> semi-private hospital coverageNo prescription drug coverage	<input type="checkbox"/> \$33.86	<input type="checkbox"/> \$72.18	<input type="checkbox"/> \$33.86	<input type="checkbox"/> \$72.18
DENTAL	SINGLE (MONTHLY)		FAMILY (MONTHLY)	
Retirees are eligible to change their dental benefit option annually effective April 1 st .				
Plan A <ul style="list-style-type: none">Basic services only	<input type="checkbox"/> \$34.48		<input type="checkbox"/> \$78.01	
Plan B <ul style="list-style-type: none">Basic and Major services	<input type="checkbox"/> \$38.33		<input type="checkbox"/> \$86.73	

*Drug Cost Assistance Program

Signature

Date (DD/MM/YY)

Return form no later than Monday, March 10, 2025 to:

In Person: Johnson Inc., 201 Buchanan Drive (Buchanan Plaza), Charlottetown, PEI C1E 2E4 / Fax: (902) 368-8941/email: pei@johnson.ca

By Mail: Johnson Inc., PO Box 4319 STN A, Toronto, ON M5W 3G5