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Legislation Updates

[Bill C-377 - Waiving of Reporting Requirements for Labour Organizations & Labour Trusts](#)

The Honourable Diane Lebouthillier, P.C., M.P., Minister of National Revenue, announced she has waived reporting requirements for labour organizations and labour trusts, arising from Bill C-377, An Act to amend the Income Tax Act (requirements for labour organizations), for fiscal periods starting on December 31, 2015 and through 2016. These requirements would have placed obligations on labour organizations and labour trusts to track their activities for fiscal years beginning on or after December 31, 2015. The Government of Canada has indicated its intent to repeal Bill C-377. As a result, this waiver ensures that unions and other stakeholders affected by the Bill will not be required to develop and submit detailed tracking of their activities to the Canada Revenue Agency (CRA) for these fiscal periods.

[Quebec Bill 20 - Receives Royal Assent on November 10, 2015](#)

This Act includes provisions to promote access to family medicine and to amend various legislative provisions related to assisted procreation. This legislation should improve access to medical services and change coverage of assisted procreation in Quebec. Women between ages 18 and 42 who qualify for in-vitro fertilization coverage will be able to receive an income-based tax credit.



Quebec Bill 28 – Amendment to Clarify Requirements of Private Payers to Cover Certain Professional Pharmacy Services

In addition, Bill 20 amended Bill 28 and clarifies the requirement of private payers in Quebec to cover some professional pharmacy services under their plan. *Please refer to the pseudo Drug Identification Number (DIN) list and associated fees that are being covered for Quebec residents, located on page 7 of this newsletter.*

QC pharmacists are now submitting claims using these pseudo DINs and must not charge over the published list price. These pseudo DINs will adjudicate according to the drug plan limitations as far as RAMQ out of pocket maximums, coinsurance & deductibles are concerned and will accumulate towards any drug maximums just like any other DIN. As of March 18, 2016, the Express Scripts Canada (ESC) claims system will be upgraded such that the system will reject any claims that are over the list price. Pharmacist's will then be expected to either reverse & resend the correct amount or have the patient pay and submit a paper claim. **Manion** will handle paper claims in the same manner as outlined above.

Prince Edward Island – Bill 39 Amends Employment Standards Act

Bill 39 that amends the Employment Standards Act, introduced legislation effective November 12, 2015 that allows eligible employees to take an unpaid leave if their child is critically ill (up to 37 weeks), or disappears (up to 52 weeks) or dies as the probable result of a crime (up to 104 weeks).

Nova Scotia Announces Changes to Labour Standards Code

On November 19, 2015, Nova Scotia made changes to the Labour Standards Code which extends the unpaid leave for employees to take care of a family member with a serious medical condition. They have extended compassionate care leave from 8 weeks to 28 weeks and also extended bereavement leave to 5 days.

Manitoba Announces Changes to Labour Standards Code

On November 25, 2015, Manitoba made changes to the Labour Standards Code to allow eligible employees who are victims of domestic violence to take a leave of absence up to 17 weeks. They can be taken all at once or periodically with 5 days paid by the employer and any additional leave to be unpaid. The leave may be used for any reason related to the domestic violence including legal, medical and/or psychological treatment.

Prescription Drug Trend Increasing

The traditional prescription drug trend increased in the U.S. from 2.4% to 6.2% and specialty drug trend increased from 12.2% to 19.2%, says the *Pharmacy Benefit Management Institute's (PBMI) 15th Annual Drug Benefit Report*. The report sites these increases were likely a result of the utilization of specialty medications such as new drugs to treat conditions like Hepatitis C as well as overall price inflation.

The PBMI also found that cost-sharing has become more complex and targeted over the past 5 to 10 years. Multi-tier structures were used by 28% of respondents, compared with 8% in 2008.

Although the average retail co-pay amounts for generics and preferred brands remained stable, it would appear that preferred brand co-pay amounts have doubled in the last 15 years from \$37.58 U.S. to \$56.65 U.S., adjusted for inflation.

The use of pharmacy only deductibles has increased 157% in 2015 compared to 2014. Thirty-six percent of plan sponsors report having a deductible for prescription drugs compared to 14% in 2014.

Manion Claims Corner

Express Scripts Canada (ESC) Active Drug Prior Authorization Program

The following is information regarding the procedure for approval under the above program.

First, request your approval over the phone
Ask your doctor or pharmacist to call toll-free 1 855-550-MEDS (6337) Monday to Saturday, 7:30 a.m. to 9 p.m. ET.

Request for immediate approval:

- If approval requirements are met, then the prescription will be accepted immediately and no further action is required. Your medication will be covered by your plan.
- If approval requirements are not immediately met, you or your pharmacist must request that the doctor call Express Scripts Canada back with additional information.

If you are notified a form is required, one can be obtained from your pharmacist or at www.express-scripts.ca/ or by calling the Manion contact centre at 1-866-532-8999.

If not approved by phone, complete and submit this form. Any fees for the completion of this form are the responsibility of the plan member.

3 Easy Steps

Step 1 – Plan member completes section 1.

Step 2 – Prescribing doctor completes section 2.

Step 3 – Fax or mail the completed form to Express Scripts Canada

Express Scripts Canada
Fax:- (905) 712-6329

Mail: 2915 Argentia Road, Unit 7 Mississauga, ON L5N 8G6

Review Process

Completion and submission of this form is not a guarantee of approval. Plan members will receive reimbursement for the prior authorization drug through their private drug benefit plan only if the request has been reviewed and approved by Express Scripts Canada. The decision for approval versus denial is based on pre-defined clinical criteria, primarily based on Health Canada approved indication(s) and on supporting evidence-based medicine. Please note that you have the right to appeal the decision made by Express Scripts Canada.

Notification

The plan member will be notified whether their request has been approved or denied. The decision will also be communicated to the prescribing doctor by fax, if requested. You can expect to receive your notification approximately 5-10 days from the time your request is received.

Claims & Contact Center Turnaround Times

Historically, at the end of every year, the volume of claims submitted to **Manion's** claims department and member calls to our contact center are high. This year is no exception. Our claims staff and contact center staff are working hard to ensure that these claims and enquires are handled within our mandated turnaround times. We would like to remind our plan members that your health, dental, paramedical and vision care claims can be submitted electronically to claims@manionwilkins.com. To be accepted electronically, a fully completed, signed and dated claim form and legible copies of all of the related receipts being submitted for reimbursement must be included. To further expedite the claims process, we would recommend that if you have not already done so, that you set up Direct Deposit of your reimbursement. This can be done either through the MWAOnline system at <http://mwaonline.manionwilkins.com> and enter your direct deposit banking information and email address OR contact **Manion** to obtain the Direct Deposit Application Form.

NEW! Manion Pension Corner

In our October 2015 edition we brought you the *Manion Claims Corner*.....now we would like to present the *Manion Pension Corner*. The *Manion Pension Corner* will also be an ongoing section to the Manion Magazine.

Designation of a Pension Beneficiary - Minor Child

It is very important that the member's marital status and beneficiary information be kept up to date. In the event of pre-retirement death, if the member has a qualifying spouse on the date of death, the pension death benefit will be payable to the qualifying spouse. If the member does not have a qualifying spouse on the date of death (or the qualifying spouse has waived his or her rights to the pension), the death benefit is payable to the member's designated beneficiary.

The member may designate a child as a beneficiary. A child age 18 or older will receive the death benefit directly, while payments for a minor child are provided to the court-appointed guardian of the child's property. If there is no guardian, benefits are paid into court until the child reaches age 18. In most provinces, a parent is automatically the "guardian of the person" of his or her minor child. However, a parent is **NOT** automatically the "guardian of property" of his or her minor child's property. The guardian of property must provide the pension administrator with a copy of the court order or document validating that he or she is the court-appointed guardian of the child's property. Otherwise the death benefit is paid into the court.

A member should carefully consider the advantages and disadvantages of designating a minor child as a beneficiary and the member should seek independent legal advice before making such a decision.

Pension & Benefits Statistics – 2016 vs 2015

Pension and Benefits Statistics	2016	2015	Comments
Canada/Quebec Pension Plan			
Retirement pension at 65 (100% max pension)	\$1,092.50	\$1,065.00	Payable monthly
Early Retirement pension at 60 (64% of max pension)	\$ 699.20	\$ 694.38	2015 was 65.2% of max
Postponed Retirement pension at 70 (increased by 42%)	\$1,551.35	\$1,512.30	
Death benefit (maximum)	\$2,500.00	\$2,500.00	Lump Sum
Survivor pension (maximum, age 65 and over)	\$ 655.50	\$ 639.00	Payable Monthly
Survivor pension (maximum under age 65)	\$530.42 / \$881.09	\$581.13 / \$865.19	Payable Monthly, varies based on age of spouse & children
Orphan benefit	\$237.69	\$234.87	
Year's Maximum Pensionable Earnings (YMPE)	\$54,900.00	\$53,600.00	
Yearly Basic Exemption (YBE)	\$ 3,500.00	\$ 3,500.00	
CPP Maximum employee contribution to plan	\$2,544.30	\$2,479.95	4.95% employee from YBE to YMPE
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QPP Maximum employee contribution to plan	\$2,737.05	\$2,630.25	5.325% for 2016 / 5.25% for 2015
Old Age Security			
OAS (maximum at January 1)	\$570.52	\$563.74	Payable Monthly from 65 subject to residency test. Indexed quarterly to CPI
Lower threshold for OAS clawback	\$72,808	\$71,592	Income at which OAS clawback begins at 15% of amount exceeding
Upper threshold for OAS clawback	\$118,055	\$115,716	Income at which OAS is completely clawed back
GIS and Allowance (maximum) – single person	\$773.60	\$764.40	Payable monthly. Subject to income test.
GIS for pensioner with spouse also receiving GIS	\$512.96	\$495.89	
Allowance	\$1,083.48	\$1,070.60	
Allowance for survivor	\$1,213.00	\$1,198.58	
Income Tax Limits			
Maximum contribution to an RRSP	\$25,370	\$24,930	18% of earned income in prior year
Maximum contribution to a TFSA	\$ 5,500	\$10,000	
Maximum contribution - DC Registered Pension Plan (RPP)	\$26,010	\$25,370	Combined employee/employer limit
Maximum Deferred Profit Sharing Plan limit	\$13,005	\$12,685	
Employment Insurance			
Benefit Formula (as a % of insurable earnings)	55%	55%	Lower income families may qualify for an additional benefit
Maximum Insurable earnings	\$50,800	\$49,500	
Maximum Benefit (weekly)	\$537	\$524	
Employee premium Canada/Quebec	1.88%/1.53%	1.88%/1.53%	Quebec is lower – Province of Quebec collects separate premiums for maternity, parental and paternity benefits
Maximum Annual EI Premium	\$955.04/\$777.24	\$930.60/\$762.30	

Drug Identification Number (DIN) List

Further to the article titled *Quebec Bill 28 – Amendment to Clarify Requirements of Private Payers to Cover Certain Professional Pharmacy Services* found on page 2, the following two pages outline the pseudo DIN list and their associated fees.

DIN	ESC Name English	ESC Name French	Unit Price
969818	PROC.-RX MINOR ACNE	ACTE-RX ACNE MINEURE	\$ 16.00
970239	PROC.-RX ANTIBIOTIC - VALVE	ACTE-RX ANTIBIOTIQUE VALVE	\$ 16.00
969524	PROC.-RX CANKER SORES	ACTE-RX APHTES BUCCAUX	\$ 16.00
969435	PROC.-EXTEND RX >30 DAYS	ACTE-PROLONG. RX PLUS 30 JRS	\$ 12.50
969532	PROC.-RX URINARY TRACT INFECT.	ACTE-RX INFECTION URINAIRE	\$ 16.00
969575	PROC.-RX TRUSH	ACTE-RX MUGUET	\$ 16.00
969621	PROC.-RX COLD SORES	ACTE-RX HERPES LABIAL	\$ 16.00
969648	PROC.-RX DYSMENORRHEA	ACTE-RX DYSMENORRHEE	\$ 16.00
969680	PROC.-RX ALLERGIC RHINITIS	ACTE-RX RHINITE ALLERGIQUE	\$ 16.00
969699	PROC.-RX VAGINAL YEAST INFEC.	ACTE-RX VAGINITE A LEVURES	\$ 16.00
969745	PROC.-RX HEMORRHOIDS	ACTE-RX HEMORROIDES	\$ 16.00
969869	PROC.-RX DIAPER RASH	ACTE-RX ERYTHEME FESSIER	\$ 16.00
969907	PROC.-RX ALLER. CONJUNCTIVITIS	ACTE-RX CONJONCTIVITE ALLERG.	\$ 16.00
969974	PROC.-RX ATOPIC DERMATITIS	ACTE-RX DERMATITE ATOPIQUE	\$ 16.00
970026	PROC.-RX EMERGENCY CONTRACEPT.	ACTE-RX CONTRACEPTION HORM.	\$ 16.00
970034	PROC.-RX TRAVELER'S DIARRHEA	ACTE-RX DIARRHEE VOYAGEUR	\$ 16.00
970077	PROC.-RX SMOKING CESSATION	ACTE-RX CESSATION TABAC	\$ 16.00
970085	PROC.-RX MALARIA PROPHYLAXIS	ACTE-RX PALUDISME	\$ 16.00
970123	PROC.-RX LICE TREATMENT	ACTE-RX PEDICULOSE	\$ 16.00
970131	PROC.-RX ALTITUDE SICKNESS	ACTE-RX MAL MONTAGNES	\$ 16.00
970182	PROC.-RX CYTOPROTECTION	ACTE-RX-CYTOPROTECTION	\$ 16.00
970190	PROC.-RX PRE-NATAL SUPPLEMENTS	ACTE-RX SUPPL. PERINATALITE	\$ 16.00
970298	PROC.-RX PREGNANCY N/V	ACTE-RX N/V GROSSESSE	\$ 16.00
970875	PROC-ADJUST THER. MONTHLY CAT 3	ACTE-AJUSTEMENT MENSUEL CAT 3	\$ 16.00
971197	PROC-FEE HYPERTENSION	A-FORFAIT HYPERTENSION ARTER.	\$ 20.00
971200	PROC-FEE DYSLIPIDEMIA	A-FORFAIT DYSLIPIDEMIE	\$ 20.00
971219	PROC-FEE HYPOTHYROIDISM	A-FORFAIT HYPOTHYROIDIE	\$ 20.00
971227	PROC-FEE F/U HYPERTENSION	A-FORFAIT ADDITIONNEL HTA	\$ 10.00
971235	PROC-FEE F/U DYSLIPIDEMIA	A-FORFAIT ADD DYSLIPIDEMIE	\$ 10.00
971243	PROC-FEE DIABETES NON-INSULIN	A-FORFAIT DIABETE NON INSULINO	\$ 20.00
971251	PROC-FEE MIGRAINE PROPHYLAXIS	ACTE-FORFAIT MIGRAINE PROPHYL	\$ 20.00
971278	PROC-FEE DIABETES INSULIN	A-FORFAIT DIABETE INSULINODEP	\$ 16.67
971286	PROC-FEE F/U HYPOTHYROIDISM	A-FORFAIT ADD HYPOTHYROIDIE	\$ 10.00

971316	PROC-ADJ INITIAL MULTI CAT 1-2	ACTE-REN INIT MULTI CAT 1-2	\$	19.50
971324	PROC-FEE F/U DIABETES INSULIN	A-FORFAIT ADD DIABETE INSULINO	\$	8.33
999990	PROC-ADJUST INITIAL CAT 1-2	ACTE-REN INIT CAT. 1-2-AJUSTEMENT	\$	15.50
999993	PROC-ADJUST INITIAL CAT 3	ACTE-REN INIT CAT. 3-AJUSTEMENT	\$	18.50