



ace life

OUR BENEFITS – A YEAR IN REVIEW



Our benefit plan is continually evolving and being fine tuned to best respond to our members needs.

When you provide us with your insights or concerns on policy wordings, coverage or claims, we listen. Your input is valuable to us and to other members who might find themselves in your position at some future point.

Your comments provide valuable direction for negotiations of benefit enhancements and maintaining high service standards at ACE INA Life.

Thank you for your help. Please keep your comments and ideas coming.

Here are some of your general comments along with what we have done to address them.

- 1) Working members under contract may need paramedical treatment. Unless treatments began while under contract, these services were not covered, even if the treatment was needed as a result of this work. Starting treatment while working was not always possible.

Plan Change: Members receiving paramedical treatment within 7 days of the end of their contract are eligible for reimbursement of that practitioner's charges relating to that treated medical condition as if treatment had commenced during their contract.

- 2) Orthotics are custom-made medical equipment taking up to 10 days or longer to manufacture. If you were not under contract when orthotics were ordered and arrived, expenses were not eligible for reimbursement.

Plan Change: While orthotics must still be initially prescribed while under contract, orthotics ordered within 15 days of the end of your work contract are eligible for reimbursement.

- 3) Some members were receiving positive treatment results from athletic therapists and sports therapists as an alternative to physiotherapy, but services from these practitioners were not covered by our plan.

Plan Change: Athletic therapists and sports therapists are now an interchangeable option in lieu of physiotherapy.

- 4) Some members in some provinces advised that there was a growing difference between amounts charged to them for paramedical practitioner services, and the amount reimbursed as reasonable and customary claims for the province where the service was provided.

Plan Change: Based on an independent study effective April 2010, the level of reasonable and customary fees by province has been audited and updated by ACE claims. Claim reimbursement levels per treatment have generally increased.

- 5) Many of our older members working beyond the age of 70 still had a need for sickness disability protection.

Plan Change: Sickness disability protection has been extended to age 80. (Canadian residency is required.)

- 6) Some members expressed an interest in smoking cessation to improve their health and cited treatment costs as a roadblock.

Plan Change: A smoking cessation benefit has been added to our plan. You will be reimbursed 80% of the cost of your smoking cessation prescription drugs up to a lifetime reimbursement of \$400.00 Your requirement to pay 20% of the cost is to help ensure that you are serious and committed about quitting and to be fair to non-smoking members as smoking is a lifestyle choice that you have made. Yours savings on tobacco will more than offset your cost of this benefit.

- 7) You could be injured and “totally disabled” while under contract but able to complete your show contract by changing roles or modifying the role or set. By working through to the end of your contract, you become not totally disabled while under contract and therefore ineligible for disability benefits.

Plan Change: If you are disabled while under contract, but able to finish your contract through role or stage accommodations, you can maintain your eligibility to apply for disability benefits if you see a physician within 7 days of your contract end and if you submit a disability claim form within 30 days.

- 8) In late 2009, early 2010, the length of time to process medical claim reimbursements became too long, in part due to circumstances at ACE that were both unexpected and unavoidable.

Plan Change: ACE has acknowledged and apologized for the decrease to service levels. ACE has identified the causes and has addressed same.

ACE has assigned a dedicated claims examiner to Equity. This examiner's priority is to pay Equity claims first, before any other ACE account.

There is a fully trained back-up claims examiner in place.

ACE has established claim payment turnaround target of 10 business days or less, plus mail. There are ACE internal checks and balances to let senior claims management know immediately if these targets are not met.

Current ACE medical claim payments turnaround times are around 5 – 6 business days.

In addition to the above plan changes:

We withdrew money from the base plan to replenish our rate stabilization fund held internally at Equity for benefits.

Effective January 1, 2010, member weekly premium rates for the Top Up plan were reduced by about 25%.