

RTAM GROUP HEALTH & WELLNESS BENEFIT PLAN MEMBER

RTAM Member Survey Introduction

We have prepared a Member Survey to be completed prior to **March 31, 2010**, to seek your input on your needs and preferences for the future direction of the Benefit Plan. All RTAM Members are encouraged to complete this online survey, even if you are not covered by the RTAM Benefit Plan.

- RTAM's Benefits Committee is seeking your opinion and feedback on how the Voluntary Group Insurance Plan meets your needs, how it can be improved, and how it can adapt to the current public health care environment.

Note the links included in this survey require you have Adobe Acrobat Reader installed on your computer. If you do not have Adobe Acrobat, it is available free of charge [here](#).

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Glossary of Terms Used

The following terms are used extensively in this survey. Please refer to this page should you have any questions regarding the terms used.

RTAM Voluntary Group Insurance Plan - RTAM's insurance plan available to RTAM Members. It is special in that it is only available to retirees who meet RTAM eligibility criteria. Coverage details are available [here](#).

RTAM Member - Full membership in RTAM is available to certified teachers in receipt of a pension from TRAF, and to retired Manitoba-certified teachers who are not eligible to receive a pension from TRAF.

Deductible - Manitoba Pharmacare coverage is based on both your total family income and the amount you pay for eligible prescription drugs. Each year you are required to pay a portion of the cost of your prescription drugs. This amount will be your annual Pharmacare deductible. More information on the Pharmacare program is available [here](#).

TRAF - The Teachers' Retirement Allowances Fund administers the defined benefit pension plan for Manitoba's public school teachers. TRAF membership includes those actively teaching, those retired from teaching, and also former teachers who have benefits remaining in the plan.

Johnson Inc. - RTAM contracts with Johnson Inc. to administer the RTAM Voluntary Group Insurance Plan and to provide the Health and Wellness Benefits Committee with technical expertise and support services, including processing claims. Monthly premiums are established annually for the plan.

RTAM GROUP HEALTH & WELLNESS BENEFIT PLAN MEMBER

Introduction

In order to better meet the needs of RTAM Voluntary Group Insurance Plan Members, please complete the following survey.

The survey will take about 30 minutes of uninterrupted time to complete. Please complete this survey at any time between now and March 31, 2010. RTAM encourages all Members to participate so that the broadest cross section of input is received.

No personal information that can identify you is required for this survey. All responses will be kept confidential.

You may complete this survey from any computer with internet access. You can also visit the RTAM or Johnson websites where survey links will be posted. Leave yourself enough time to complete the survey all at once, as the survey does not allow you to save your answers for completion at a later date. The Member Survey analysis will be completed by Johnson Inc. and presented to the RTAM Benefits Committee.

Should you have any questions, please contact Johnson Inc. at 1-877-989-2600 or visit the website [the Johnson Inc. RTAM web-site](#) or [the RTAM web-site](#) for details on RTAM's Voluntary Group Insurance Plan. Once the survey analysis is complete, we will be posting the results.

[Johnson Inc.](#)
11120 - 178 Street
Edmonton, AB T5S 1P2

RTAM GROUP HEALTH & WELLNESS BENEFIT PLAN MEMBER

General Information

Please complete the following section as it applies to you (or to the Member if you are a spouse/partner), even if you are not a member of RTAM's Voluntary Group Insurance Plan.

1. Do you participate in the RTAM Voluntary Group Insurance Plan?

Yes

No

2. Please indicate your status for dependents, if any, covered by the Plan.

Single

Couple

Family

Not covered by the benefit plan

3. Are you covered by MTS or the Winnipeg School Division for any of the following benefits? (Check all that apply.)

Travel

Extended Health Care including Prescription Drugs

Dental Care

Other

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Your Opinion

4. Rate how IMPORTANT each of these benefits are to you, (or how important each of these benefits would be to you, if you are not currently a Plan participant).

	Very Important	Limited Importance	Not Important At All
Emergency Medical Travel - \$1,000,000 lifetime maximum	jn	jn	jn
Trip Cancellation/Interruption - \$6,000 per insured per trip	jn	jn	jn
Prescription Drugs	jn	jn	jn
- Maximum \$500 per year	jn	jn	jn
- Maximum \$1,000 per year	jn	jn	jn
- Maximum \$1,250 per year	jn	jn	jn
Hospital - Max \$100/day	jn	jn	jn
Home Care/Nursing	jn	jn	jn
Paramedical Coverage	jn	jn	jn
Maximum of \$300/year per practitioner	jn	jn	jn
Vision Care - \$150 every 2 years	jn	jn	jn
Hearing Aids - \$1,000 every 5 years	jn	jn	jn
Other medical benefits	jn	jn	jn
Including Accidental Dental, Ambulance, and Medical Aids and Appliances	jn	jn	jn
Dental Care - to a combined annual maximum of \$1,000	jn	jn	jn
Basic and Preventative Services	jn	jn	jn
- 85% coverage	jn	jn	jn
Minor Restorative Services	jn	jn	jn
- 80% coverage	jn	jn	jn
Major Restorative Services	jn	jn	jn
- 65% coverage	jn	jn	jn
Dentures / Implants	jn	jn	jn
- 50% coverage	jn	jn	jn
Guaranteed Issue Life Insurance	jn	jn	jn
Term Life Insurance	jn	jn	jn
Long Term Care Insurance	jn	jn	jn

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Your Opinion

5. Tell us if these benefits MEET YOUR NEEDS.

	Yes	No
Emergency Medical Travel - \$1,000,000 lifetime maximum	<input type="checkbox"/>	<input type="checkbox"/>
Trip Cancellation/Interruption - \$6,000 per insured per trip	<input type="checkbox"/>	<input type="checkbox"/>
Prescription Drugs	<input type="checkbox"/>	<input type="checkbox"/>
- Maximum \$500 per year	<input type="checkbox"/>	<input type="checkbox"/>
- Maximum \$1,000 per year	<input type="checkbox"/>	<input type="checkbox"/>
- Maximum \$1,250 per year	<input type="checkbox"/>	<input type="checkbox"/>
Hospital - Max \$100/day	<input type="checkbox"/>	<input type="checkbox"/>
Home Care/Nursing	<input type="checkbox"/>	<input type="checkbox"/>
Paramedical Coverage	<input type="checkbox"/>	<input type="checkbox"/>
Maximum of \$300/year per practitioner	<input type="checkbox"/>	<input type="checkbox"/>
Vision Care - \$150 every 2 years	<input type="checkbox"/>	<input type="checkbox"/>
Hearing Aids - \$1,000 every 5 years	<input type="checkbox"/>	<input type="checkbox"/>
Other medical benefits	<input type="checkbox"/>	<input type="checkbox"/>
Including Accidental Dental, Ambulance, and Medical Aids and Appliances	<input type="checkbox"/>	<input type="checkbox"/>
Dental Care - to a combined annual maximum of \$1,000	<input type="checkbox"/>	<input type="checkbox"/>
Basic and Preventative Services	<input type="checkbox"/>	<input type="checkbox"/>
- 85% coverage	<input type="checkbox"/>	<input type="checkbox"/>
Minor Restorative Services	<input type="checkbox"/>	<input type="checkbox"/>
- 80% coverage	<input type="checkbox"/>	<input type="checkbox"/>
Major Restorative Services	<input type="checkbox"/>	<input type="checkbox"/>
- 65% coverage	<input type="checkbox"/>	<input type="checkbox"/>
Dentures / Implants	<input type="checkbox"/>	<input type="checkbox"/>
- 50% coverage	<input type="checkbox"/>	<input type="checkbox"/>
Guaranteed Issue Life Insurance	<input type="checkbox"/>	<input type="checkbox"/>
Term Life Insurance	<input type="checkbox"/>	<input type="checkbox"/>
Long Term Care Insurance	<input type="checkbox"/>	<input type="checkbox"/>

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Potential Future Benefits - Your Opinion

6. Please provide your opinion of the Retired Teachers' Association of Manitoba Voluntary Group Insurance Plan.

	Very Good	Good	Fair	Poor	Don't Know
Overall, I would rate the RTAM benefit plan as:	jn	jn	jn	jn	jn

7. In terms of importance, rank the following three coverage levels. We recognize that all benefits are important; however, we would like you to choose relative importance so that the Trustees have an idea of which benefits are of greater value to you.

You can only use each answer once.

	Most Important	Second Most Important	Relatively Least Important
a. Coverage for discretionary health related expenses, such as elective services including laser eye surgery, upgrade to a private hospital room, paramedical services for proactive health care such as massage, and medications could include medications for smoking cessation, weight loss, and treatment for erectile dysfunction (ED).	jn	jn	jn
b. Coverage for catastrophic events, such as out-of-country / province emergency medical and travel, life, and long term care insurance.	jn	jn	jn
c. Coverage for medically necessary health related products and service expenses, such as drugs requiring a prescription, ambulance, medical equipment such as a wheelchair, hearing aids and vision care.	jn	jn	jn

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Potential Future Benefits - Your Opinion

8. RTAM is reviewing possible enhancements to Voluntary Group Insurance Plan coverage. Please rank the degree to which each of the following additional benefits would meet your needs, (1) being the lowest.

NEEDS MET?

	1 (Lowest)	2	3 (Highest)
Medications for smoking sensation, weight loss, erectile dysfunction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Paramedical coverage for other services such as clinical social workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Second opinion on diagnosis/treatment plans (e.g. Best Doctors)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elder Care, including services such as housing options assistance, relocation assistance, care management and advocacy, and planning for long-term care, estates, wills, and funerals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Travel Concierge to assist you with your personal travel planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Travel maximum \$2 million	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stand-alone Trip Cancellation / Trip Interruption Insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Critical Illness Insurance - provides a lump-sum payment should you become seriously ill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. Are there other additional benefits which you believe should be considered by the RTAM Benefits Committee?

10. Please provide any additional comments on the Retired Teachers' Association of Manitoba Voluntary Group Insurance Plan which you would like to share with the Committee.

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Additional Information

11. For Information on the geographic location of members, please provide your Postal Code here.

12. Please indicate your current age.

54 and under

65 to 74

55 to 64

75+

13. For purposes of the Manitoba Pharmacare Program income tested deductible, please indicate the range of your family's taxable income (total taxable annual income of you and your spouse), from line 150 of your last Canada Revenue Agency Notice of Assessment.

Taxable Income of \$0-\$15,000

Taxable Income of \$15,001-\$21,000

Taxable Income of \$21,001-\$29,000

Taxable Income of \$29,001-\$40,000

Taxable Income of \$40,001-\$47,500

Taxable Income of \$47,501-\$75,000

Taxable Income of over \$75,000

14. What were your household's total out-of-pocket Prescription Drug expenses over the past year (i.e. Prescription Drug costs not covered by the Manitoba Pharmacare Plan)?

\$0-\$250

\$1,751-\$2,000

\$4,501-\$5,000

\$251-\$500

\$2,001-\$2,250

\$5,001-\$5,500

\$501-\$750

\$2,251-\$2,500

\$5,501-\$6,000

\$751-\$1,000

\$2,501-\$3,000

\$6,001-&7,000

\$1,001-\$1,250

\$3,001-\$3,500

\$7,001-\$8,000

\$1,251-\$1,500

\$3,501-\$4,000

\$8,001-\$10,000

\$1,501-\$1,750

\$4,001-\$4,500

Over \$10,000

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15. Has this survey raised your awareness of the RTAM Voluntary Group Insurance Plan?

Yes

No