

Below are facts about Insurance that you might not know!

#1: it is possible to have different Insurance plans from the same Insurance company

i.e. not all Sunlife plans are the same. Some could have a yearly cap of \$1000 and some can be unlimited

#2: It is the employer who picks what Insurance coverage they wish to purchase from an Insurance company

#3: All Insurance companies have similar offerings that are made available for purchase by an employer

#4: Insurance brokers assist employers in selecting what Insurance they want to get for their employees

#5: Insurance is considered a perk of employment and is a tool to entice employees to a job, but is not a requirement

#6: An employee can speak to their employer or Human Resources department to learn more about their Insurance

#7: Up until now, all Insurance companies have had their own criteria for biologics access (now they have all agreed to follow one set of criteria across the country in conjunction with CRA/ORA)

#8: Some employees are nervous about speaking out to their employers or HR about their chronic conditions as their large cost to the company could make them vulnerable

#9: The Ontario Rheumatology Association has had success speaking to Insurance companies to have them remove unnecessary obstacles to patient care such as needing elevated CRP/ESR to get biologics or to get yearly EAP refusals. Further work is still needed in this area, and we remind you to send us all your examples and issues.

#10: Insurance companies make more money when patients are on drugs than not, so they are not the barrier to access.

#11: The cost of benefits are the responsibility of the employer. They receive an annual renewal of their rates based on the claims paid for their plan every year. The more high cost claims they pay for, the higher their premiums.

#12: Unfortunately because of patient/plan member confidentiality - the employer has little insight into the types of claims they have paid or the patient benefit from having access to the medications. They don't know or understand their health conditions, or what the impact to their company might have been if their condition had not been treated. As a result they cannot access the "benefit" of these treatments - and really just view them as a "cost" to be managed.

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