

Health Matters

A Newsletter for RTO/ERO's District and Unit Health Representatives
Volume 5, Issue 5: December 2009 - Volume 6, Issue 1: February 2010

Mission Statement

The Health Services and Insurance Committee of the Retired Teachers of Ontario/les enseignantes et retraités de l'Ontario will provide a most cost effective, high quality and competitive Group Health Plan that meets the needs of the majority of the membership.

Purpose

This publication is intended to keep RTO/ERO Health Plans participants current with matters considered at Health Services & Insurance Committee (HSIC) meetings and to share items of interest pertaining to Health and Wellness. Districts are encouraged to use any of this information in its communications with members at meetings or via local newsletters.

Disclaimer

Information contained in *Health Matters* is intended to be used for general information and should not replace consultation with health care professionals. Consult a qualified health care professional before making medical decisions or if you have questions about your individual medical situation. RTO/ERO makes every effort to ensure that the information in *Health Matters* is accurate and reliable, but cannot guarantee that it is error free or complete. RTO/ERO does not endorse any product, treatment or therapy; neither does it evaluate the quality of services operated by other organizations mentioned or linked to *Health Matters*.

Availability

Download issues of *Health Matters* from your RTO/ERO Members' Only website

A Message from the Chair

Congratulations to our three new members to the Health Services & Insurance Committee, Gayle Manley, Gordon Near and Jim Sparrow who have successfully completed the 19-module on line primer with flying colours.

We have, also as a committee completed our third session of training with Don Brooks, One more session to be completed in April then we will evaluate and make any changes before continuing the new training cycle in September.

The 2009 financial year finished with a deficit of approximately 1.7 million dollars. We received the first list of suggested wording changes to the Plan booklet, and will receive a more complete list in April in preparation for the printing of the new booklet in the fall of 2010 for distribution in early 2011.

The sub-committee of Gayle Manley, Joanne Murphy and Joe Santone has been busily planning the D/UHR workshop for June. As well the sub-committee of Roger Pitt, Mark Tinkess, Gordon Near and Gerald Brochu has been reviewing the Governance Document. Marg Couture, Jim Sparrow and Tony Sawinski have assisted with both sub-committees.

For the first time any plan design changes submitted during 2010 will be researched for the 2012 policy year. The plan changes that we are researching and costing were submitted during 2009. We will, also be looking at the projected costing of these changes over the next three years.

May you enjoy the spring and look forward to seeing you at the workshop in June.

Back Pain? See Your Foot Specialist.

Seriously. Spinal care begins not in the back, but with the feet. When your feet hit the ground, the ground sends an equal force back up through your body. These forces are intensified during strenuous athletic activities such as running and can result in pain and sometimes even permanent damage to your spine.

Feet are designed to absorb shock through a motion called pronation. We all do it – or at least we are supposed to. But problems occur when we over-pronate or “roll in” too much. A slight misalignment of only 2-3 degrees in your feet can throw everything off. If you are rolling your feet in, you may have unperceived problems all the way up to your neck.

Remember the old song, “The foot bone is connected to the leg bone...”? Well this is true. Think of the bones in your body and how they are interconnected to one another. Now imagine one

bone misaligned, damaged or broken. What happens to that one bone will negatively affect the rest of your body. For instance, if the weak spot is in your feet, your legs will rotate inwardly causing your pelvis to tip forward. This does two things: first, it leads to excessive pressure in the discs of your lower back and causes premature wear. This sets off a chain of events in the nerves and muscles and leads to the second (and at times overlooked) result. In an attempt to pull the body back into the proper position, the muscles will fire at the wrong times or for too long leading to muscle fatigue, excessive strain in the joints and a general lack of stability. Over time, one can experience ankle sprains, plantar fasciitis (heel pain), knee, hip or back pain and even headaches.

In addition to the actual structural alignments of the feet, the movement of the joints should also be evaluated. In other words, the structure and function of the body are inseparable and act as a cohesive unit. With all the abuse that we put our feet through, changes become inevitable. Adhesions or scar tissue can develop in response to old injuries such as ankle sprains. As well to restricting the normal motion of the joints, blockages can occur and restricts the natural flow of fluids, which can lead to disease.

In these cases, it is necessary to incorporate Functional Manipulative Therapy or Manual Foot Therapy into the overall pain management plan. The aim of manual foot therapy is to restore the natural function, release joint tension and stop muscle strain. An essential component of this therapy is the movement of body fluids to and from each area of the foot to promote healing. This is achieved by moving the joints through a series of gentle movements past the abnormal pathologic barrier though not beyond its normal range of motion. Typically 6 sessions (2 per week for 3 weeks) are performed. After 2-3 sessions are completed, it is often necessary to place additional support within the shoes to help keep the feet functioning as they should. This support may come from a high quality over-the-counter arch support such as Lyncos or Powersteps that is properly fitted by a qualified foot specialist. If your feet alignment is moderate or severe, custom orthotics are the most effective treatment to initiate after the joint function is restored.

Orthotics are corrective insoles that are designed specifically for your feet following a complete biomechanical examination and gait analysis. The primary function of orthotics is to improve the mechanics of your feet so that your body can function more efficiently. This will help keep your feet, knees, hips, and spine in alignment so you can maintain a proper state of balance in your body. Any variation that occurs will create undue stress not just to your feet but sometimes to other parts of your body. Nothing incapacitates you as much as sore and painful feet because “The leg bone is connected to the knee bone and the knee bone is connected to the thigh bone...”

So the next time you have back pain, consider what is going on with the rest of your body. Instead of going to get your back temporarily fixed, wonder what was the catalyst to your back problem and seek out help with a chiroprapist or podiatrist who may be able to shed more light and treat your back pain.

Tony Abbott, Chiroprapist
705.444.9929
www.AbbottFootClinic.ca

Message from Johnson Inc.

Ontario Health Initiatives Highlight – Diabetes

When you want to know more about diabetes, would you think of going to the Ontario Ministry of Health and Long-Term Care's website?

Nearly one million Ontarians had diabetes in 2007/08 and that number is rising. As part of their overall diabetes strategy, Ontario designed their Stand up To Diabetes website to help educate Ontarians, provide a credible source of information, and link to other sites that could prove useful to you.

The website includes information on:

Managing Diabetes

For those newly diagnosed with diabetes, there are fact sheets and videos that show you how to modify certain ethnic diets to make them more diabetes-friendly, how to manage your medication, your stress levels, your lifestyle, and how to work with your healthcare team. For those already living with diabetes, this portion of the website provides information on government programs available to assist Ontarians.

We would recommend reviewing both sections of the managing diabetes portion of the website. Both have valuable information to help manage diabetes.

Diabetes Education

At last count, there were 203 diabetes education centres in Ontario. Each centre has a team of educators available to teach Ontarians the special skills they need to help them care for themselves as diabetics. You can search for one here.

You can access the Stand Up To Diabetes website at www.health.gov.on.ca/en/ms/diabetes/en/index.html, or you can go to www.health.gov.on.ca and click the diabetes link on the right-hand side.

Your health matters to RTO/ERO and Johnson Inc. For more information on the coverage available under the RTO/ERO Group Benefits Program, review your most recent Health Insurance Plans booklet, or turn to the back page of the booklet for Johnson Inc.'s contact information.

Highlights from 12-2009 and 02-2010 Meetings of the HSIC

Benefit Statement and Income Tax Mailing

The Benefit Statements and Income Tax Letters for the 2009 taxation year were mailed to participants the week of February 5, 2010. The mailing was to be spread over 5 days, allowing the Plan Benefit Service and Plan Benefit Claims staff to maintain their call answer rate. This mailing also included information on the RTO/ERO Long Term Care and Home-Auto Insurance..

Health Services & Insurance Committee Training

The third successful training session with Don Brooks was held on Tuesday, February 9, 2010.

2009 Financial Year

The 2009 financial year ended with an overall deficit. The Semi Private Hospital and Dental Plans showed a surplus, however the Extended Health Care Plan ended the year in a deficit.

January 2011 Health Insurance Plans Booklets

We reviewed the first changes to the Health Insurance Plans booklet which will be printed late 2010 and distributed to members in February 2011.

Health Plans Enhancement Submissions (HPES)

We reviewed the health plan submissions to be considered for 2011. A costing of these changes will be presented in April as well as a projection to the plan for the next 2 to 5 years. Since we have established this process of projections, any suggestions for plan changes received between January 01, 2010 and December 31, 2010 will be considered in 2011 for the 2012 benefit calendar year. We hope by initiating this process we may be able to manage future deficits and surpluses in a timely manner.

Vacation Supply Forms Now Available Online

For those participants who are planning on taking a lengthy vacation and need more than the allowed 100 day supply of their prescription medication, an extended supply can be approved by completing a 'Vacation Supply' form. Previously, participants accessed the form through their pharmacist. The pharmacist was required to call Johnson Inc and the form was faxed to the pharmacy for completion by both the participant and the pharmacist.

Direct Deposit

Just a reminder that claim payments can be deposited directly into your bank account if you send a void cheque to Johnson Inc to keep on file but remember if you should change bank accounts then need to update this information.

Catastrophic Drug Plan

We are continuing to investigate the costing and the feasibility of implementing a catastrophic drug plan. in Appendix A.

Media Corner

Your RTO/ERO Health Services and Insurance Committee shares as part of five meetings per annum, general health and wellness information items in the form of articles, PDFs, podcasts and websites.

The Committee would like to take this opportunity to share some of these items with you, RTO/ERO's Health Plans Participants and D/UHRs. For direct access to the links below, visit **RTO/ERO's Members' Centre** website, and view/download your June issue. Online issues have active links! Just click and you will be automatically directed to your chosen link.

Canada's Physical Activity Guide to Healthy Active Living for Older Adults

It is a Guide to help you make wise choices about physical activity. Choices that will improve your health, help prevent disease, and allow you to get the most out of life.

The Guide provides a rainbow of physical activities that can help you have more energy, move more easily, and get stronger. It tells you how much activity you should strive for and how to get started. It also lists the many benefits of physical activity and the health risks of inactivity. This Handbook provides additional information to help you make the best use of the Guide.

<http://www.phac-aspc.gc.ca/hp-ps/hl-mvs/pag-gap/pdf/guide-handbook-older-eng.pdf>

Eating Well with Canada's Food Guide

Eat well with *Canada's Food Guide*! Learning more about Canada's Food Guide will help you and your family know how much food you need, what types of foods are better for you, and the importance of physical activity in your day.

http://www.hc-sc.gc.ca/fn-an/alt_formats/hpfb-dgpsa/pdf/food-guide-aliment/print_eatwell_bienmang-eng.pdf

Active Living Coalition for Older Adults (ALCOA)

The Active Living Coalition for Older Adults (ALCOA) works to help encourage older Canadians to maintain and enhance their well being through a lifestyle that embraces daily physical activities. For more information, call toll-free 1-800-549-9799 or visit the ALCOA website.

www.alcoa.ca

Know Your RTO/ERO Health Plans

Surviving Dependent Process of RTO/ERO Member

Notification of death may be received by RTO/ERO, Johnson Inc. or OTPP from a surviving spouse, family member, executor etc. Continuation of the surviving dependent's current RTO/ERO Health Plans is offered. If any additional benefits are applied for, late entrant restrictions will apply.

Received from OTPP

A monthly list of deceased members is produced by OTPP and sent to Johnson Inc. and RTO/ERO.

Johnson Inc. will identify names of surviving dependent and forward a copy to RTO/ERO within three to five business days.

Process followed by Johnson Inc.

Once notification of the death of the RTO/ERO member is received the following process is followed:

A confirmation of letter of the RTO/ERO Health Plans together with the RTO/ERO Membership and Benefits Continuation Form (BCF) is printed and mailed to the surviving dependent.

Once the completed BCF form is received by RTO/ERO and verification is complete, a small red stamp is affixed to the BCF form and the Associate Membership number is written beside the stamp.

The form is date stamped by RTO/ERO and delivered within two business days to Johnson Inc. Signature by Johnson Inc. on the RTO/ERO tracker is required to verify receipt of applications. The deceased RTO/ERO member's benefits are terminated as of the date of death. Any premium received after the date of death is refunded to the Estate of the deceased RTO/ERO member.

The surviving dependent is then set up using the associate membership number provided by RTO/ERO. Coverage is effective the day after the date of death. Coverage must be continuous. Any eligible claims incurred will be covered.

BCF not received by Johnson Inc.

An abeyance of 30 days is set up under the RTO/ERO deceased member's file for follow up of the receipt of the BCF. 2. A telephone call is made and a reprinted BCF form is mailed out again. Another 30 day abeyance is set up.

A registered letter of closing file is then sent. This letter advises the surviving dependent of late restrictions. Due to various circumstances if received within the next 30 days Johnson Inc. will allow for coverage however, premiums must be paid as of the day after the date of death.

Notice Board

RTO/ERO June 2010 DHR/UHR Workshop Registration – ONLINE!

This year we are using Survey Monkey to register our Workshop Participants. Many of you may recognize Survey Monkey as the program you used for the electronic submission of Fall 2009 Senate's feedback forms – a quick, safe and simple process that was well received by all. Registration instructions were emailed to all registered District/Unit Health Representatives and Presidents in February 2010. If you have any questions or concerns, please contact Melanie Johnson (mjohnson@rto-ero.org), RTO/ERO Administrative Assistant to the HSIC/Benefits.

DATE JUNE 14-15, 2010 @ THE MARRIOTT TORONTO BLOOR YORKVILLE HOTEL

MEALS Dinner begins at 5:30 PM and the Guest Speaker kicks off the workshop at 6:30PM on MONDAY, JUNE 14, 2010

Roloids Antacid Tablet Recall

Health Canada is informing Canadians that Roloids antacid tablets packaged in bottles of 150 and 100 counts are being voluntarily recalled in Canada by the distributor, McNeil Consumer Healthcare (Canada), Division of Johnson & Johnson Inc. The recall comes in light of reports in the U.S. of an unusual mouldy, musty, or mildew-like odour that was, in some cases, associated with nausea, stomach pain, vomiting and diarrhea.

Based on an ongoing investigation by the U.S. manufacturer, McNeil Consumer Healthcare, the unusual smell has been linked to the presence of trace amounts of a chemical called 2,4,6-tribromoanisole. The source of 2, 4, 6-tribromoanisole is believed to be the breakdown of a chemical used to treat wooden pallets that transport and store packaging materials used in the affected product.

The health effects of this chemical have not been well studied. According to the U.S. manufacturer, all of the reactions reported in the U.S. to date have been temporary and non-serious.

Consumers who have purchased any of the above-listed products and who have concerns about their health should speak to a health care professional. The distributor advises consumers who have purchased bottles of Roloids antacid tablets to stop using the product and to contact McNeil Consumer Healthcare (Canada) at 1-800-661-4659, Monday-Friday 8a.m. to 8p.m. EST for instructions on how to return or replace the product. Consumers can also visit www.injcanada.com.

Source: Health Canada, January 2010

Ontario: Bill 179 - Increases Access to Health Care

Ontarians will soon have better access to health care and more choices in who provides it, as Bill 179 was passed with unanimous support in December 2009. Upon proclamation, the bill will give nurse practitioners, pharmacists, physiotherapists and other health professionals the freedom to provide a wider range of health care services. Bill 179 was introduced in the Ontario legislature in May 2009.

The *Regulated Health Professions Statute Law Amendment Act, 2009* will increase access to care for Ontarians by:

- Allowing nurse practitioners, pharmacists, physiotherapists, dietitians, midwives and medical radiation technologists to deliver more services than they are now qualified to provide;
- Changing the rules for administering, prescribing, dispensing, selling and using drugs in practice for chiropodists and podiatrists, dental hygienists, dentists, midwives, nurse practitioners, pharmacists, physiotherapists and respiratory therapists;
- Removing restrictions on X-rays that can be ordered by nurse practitioners and enabling physiotherapists to order X-rays for specific purposes; and
- Removing restrictions on the drugs nurse practitioners may prescribe, dispense, compound and sell.

Source: Ontario Ministry of Health and Long-Term Care, December 2009

Health Canada Reminder of the Dangers of Carbon Monoxide

Each year, numerous people die or become ill as a result of carbon monoxide (CO) poisoning. Health Canada reminds Canadians of the importance of installing CO detectors in their homes, as well as the safe housekeeping practices that can help in the prevention of poisoning from this gas.

Carbon monoxide is a toxic colourless and odourless gas. It can interfere with the delivery of oxygen by the blood to the body. Exposure to low levels of CO can cause nausea, dizziness, headaches, confusion, fatigue, and shortness of breath. High level exposure can cause impaired vision, convulsions, coma and possibly death.

The possibility of the presence of CO in a home can increase during the cold winter months. Houses in Canada are typically heated by furnaces, water heaters/boilers or wood stoves that

most often run on fuels, such as wood, oil, propane or natural gas. Generally, any appliance or device that burns a fuel can potentially produce CO.

Following a few safety precautions for proper maintenance, ventilation and use of your fuel-powered items and by installing CO detectors, can help prevent carbon monoxide poisoning. Health and safety tips on detectors:

- Make sure to choose detectors that bear the certification mark of an organization that is accredited by the Standards Council of Canada, such as the Canadian Standards Association (CSA) or Underwriters Laboratories of Canada (ULC).
- Follow the manufacturer's directions for installation, care, testing and replacement of the detector, generally every five or seven years, depending on the model.
- At a minimum, install CO detectors in the hallway outside each sleeping area, ensuring that the detector cannot be covered up by furniture or draperies.
- A CO detector is different from a smoke detector. Ensure to have both CO detectors and smoke detectors available in your home.
- Test your detectors regularly, and for battery-powered detectors, follow the manufacturer's instructions for battery replacement.

How to prevent the build-up of carbon monoxide:

- Have fuel-burning heating equipment exhaust vent pipes and chimney flues inspected every year by a qualified service technician.
- During and after a snow storm, inspect the exhaust vents for the dryer, furnace, stove, fireplace and heat recovery ventilator to ensure they are not obstructed by snow build-up.
- When using a wood burning fireplace, open both the flue and fresh air intake for adequate ventilation.
- Never operate a generator indoors. Use well-ventilated locations outdoors, away from doors, windows and inlet vent openings.
- Do not idle cars in the garage, especially when the garage door is closed.
- Never use portable fuel-burning camping equipment inside unless it is specifically designed for use in an enclosed area. Follow the manufacturer's instructions for safe use in enclosed areas.
- Never run gas-powered equipment such as snow blowers or lawn mowers in the garage.

- Never use a gas appliance, such as an oven or clothes dryer to heat your home.

What to do if the CO alarm sounds:

- Leave your home immediately and move to fresh air. Do not try to locate the source of CO.
- Once you are outside the home, call your emergency services, fire department or 911.
- Do not return to your home until the source of CO has been identified by a professional and the problem has been corrected.

Source: Health Canada, December 2009

Your Wellness Matters – EatRight Ontario

EatRight Ontario is a bilingual website designed and maintained by the Government of Ontario to help improve the overall health and quality of life of Ontario residents through healthy, nutritious eating. This service provides easy-to-use nutrition information to help you make healthier food choices. It covers topics such as:

- Diabetes prevention
- Digestive health
- Disease prevention and health conditions
- Food and Nutrition FAQs
- Healthy Eating
- Healthy Weights
- Menu planning
- Recipes
- Resources
- Vitamins and minerals
- Well being and mental health

EatRight Ontario allows you to ask a Registered Dietitian nutrition-related, non-emergency, health questions and receive feedback by phone or email. This service provides general nutritional health information and should be used for informational purposes only. The Email a Dietitian service does not provide any medical diagnoses, symptom assessments, health counseling or medical opinions for individual users. Phone service is available Monday to Friday 9am-5pm ET, with evening hours Tuesday and Thursday to 9 pm ET. Outside these hours you may leave a voice mail message and a Registered Dietitian will return your call the next business day.

Nutrition tools and links offer many additional resources to support you in developing healthy eating habits for you and your family. The website is updated monthly. EatRight Ontario can be accessed at www.ontario.ca/eatright or by calling 1-877-510-510-2.

Source: Ontario Ministry of Health, January 2010

Nutrition Facts: A guide to food labels

The Nutrition Facts label is a boxed panel, on most packaged food and beverage products, required by the Food and Drug Administration. This label provides detailed information about the nutrient content of the product. It is intended to help you make healthier choices. The required information is standard, but the specific nutrients vary depending on the food product.

Knowing the amount of nutrients in specific products can help you decide whether a food or beverage fits in to your eating plan or is appropriate if you have certain health conditions, such as high blood pressure or high cholesterol. It also enables you to compare similar products to see which one might be a healthier choice.

At a minimum the product must list the amounts of total fat, saturated fat, trans fat, cholesterol, dietary fiber, sugars, protein, vitamins A and C, calcium, and iron that are in one serving.

Ingredients to limit are:

- Saturated fat
- Trans fat
- Cholesterol
- Sodium
- Sugars

Beneficial ingredients are:

- Dietary fiber
- Vitamins A and C
- Calcium
- Iron

The footnote at the bottom of the panel is a reminder that the Percent Daily Value is based on a 2000 calorie-a-day diet. Keep in mind that a nutrient requirements vary based on a person's particular calorie needs.

Source: Mayo Clinic, January 2010

2009-2010 RTO/ERO HSIC

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