



Employees Prefer Benefits to Cash

Source Data: Benefits Canada

Every Canadian wants a little more money. But what if you were offered more money in lieu of your health benefits plan?

According to the 2011 *sanofi-aventis Healthcare Survey*, 59% of group health benefits plan members in Canada would rather keep their benefits plan than receive \$10,000 in cash. When the amount is doubled to \$20,000, 48% of those asked would still choose their benefits over cash.

The study explores what Canadian employees in a wide range of industries think of their health benefits programs and interprets the findings to help employers better manage employee health benefits.

“Understanding employers and demonstrating the value of improving the health of Canadians is fundamental to sanofi-aventis Canada,” said Hugh O’Neill, president and CEO. “The information in our survey highlights how employers and insurers can improve the satisfaction of their healthcare plans. Better healthcare plans mean healthier employees, better productivity and less pressure on Canada’s public healthcare system.”

Supporting wellness

The survey, meanwhile, indicates strong support for health promotion or wellness programs. Sixty percent of surveyed employers say they already offer such programs, and 68% plan to invest more money in this area within the next year.

However, fewer plan members report that their employers promote or provide wellness programs: this year’s result of 23% is down from 29% a year ago and 31% two years ago.

“This slide is very concerning; there is an undeniable need to better engage Canadians, both in their work and in their own health,” said Chris Bonnett, a member of the survey’s advisory board and president of H3 Consulting. “Many employers support this, but the survey suggests more effort is needed to

ensure their workforce investments are relevant, effective and visible for the employees who stand to benefit.”

Virtually all (96%) of the plan sponsors surveyed agreed that it would be useful to link the health status of their employees to measures of profitability in order to better demonstrate the value of health benefits, but it seems difficult to do so.

Adherence an issue

Almost half (45%) of plan members say they take at least one medication to manage a chronic disease such as diabetes or hypertension. Yet studies show that non-adherence is a real issue.

“Complications arising from unmanaged chronic diseases are a huge challenge for our public healthcare system,” said O’Neill. “For example, in Quebec, people with three or more chronic diseases account for 71% of all hospital admissions. We should address the question of how we will collectively manage this issue, beginning now.”

The government role

A clear majority (86%) of plan members agree that governments should actively support employers that promote better health and fitness. When asked what level of involvement governments should have in encouraging healthy workplaces and healthy employees, 93% responded that they should have a high level of involvement.

“Governments, employers, employees and unions all want the same thing—a healthier population and a sustainable health system,” said Bonnett. “Each party makes an important contribution. What’s needed now are a more collaborative spirit and better co-ordination among those who are already doing good work in this field.”

210-13900 Maycrest Way
Richmond BC V6V 3E2
Phone: 604.270.1142
Toll Free: 1.888.766.6390
Fax: 604.270.3662
Toll Free Fax: 1.888.636.1430
Website: www.dupuislangen.com
Email: info@dupuislangen.com

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The Cost of Critical Illness

Canadians appear more confident about their ability to physically survive a critical illness, than survive its impact on their net worth.

According to Desjardins Financial Security Health Survey, close to two-thirds of Canadians are confident they would survive a critical illness, while 67% say it would render them financially vulnerable and they would likely need to turn to family for financial support.

The study found cancer to be the biggest health fear, as identified by 24% of survey respondents, particularly those in good health. The other major conditions Canadians fear include Alzheimer's disease or dementia (12.1%), disability caused by an accident (9.9%), a chronic illness such as muscular sclerosis or diabetes (8.3%), aging (8%), a heart attack (7.9%) or a stroke (4.4%).

The findings of the study show that while Canadians feel they are doing what they can to improve their physical health, many aren't taking the necessary steps to ensure their financial well-being. Almost three-quarters of respondents doubt the healthcare system will adequately cover costs related to the treatment of a critical illness, while 64% are worried that they could not afford the balance.

There also appears to be a disconnect between planning and implementation when it comes to being financially secure with regards to critical illnesses. While 67% agreed that setting up an emergency fund for a future serious illness is important, almost three-quarters of Canadians have done nothing about it. Many feel a job loss would be more detrimental to their well-being than a critical illness diagnosis, the survey discovered.

The Public Health Agency of Canada estimates that the lifetime costs of cancer treatment in Canada is \$25,000 to \$30,000, depending on the diagnosis and other contributing factors.

A little over half (53%) feel they would be able to cover their day-to-day expenses like food, housing, transportation and clothing, or pay monthly bills. If faced with a critical illness that caused them significant financial hardship close to their ideal retirement age, 63% would remain in the workforce to rebuild their retirement savings.

On a more positive note, the survey suggested that 70% respondents have made significant personal changes to their lifestyle to improve their health, and more than two thirds feel that adopting a healthy lifestyle is a significant part of illness prevention.

"This is encouraging," said Dr. Robert Buckman of the Princess Margaret Hospital. "The results indicate that people no longer think of cancer as a death

sentence. However, I think we need to recognize that it's impossible to prevent all cancers."

The survey revealed some interesting regional results. Atlantic Canada has both the most physically and most psychologically healthy provinces. Quebecers are the most comfortable with the financial implications of critical illness as only 60.3% feel that not all the medical costs of a critical illness would be covered by the healthcare system. That compares to the national average of 73.5%.

British Columbians are highly concerned about the financial consequences of critical illness, 81.2% of them feel the healthcare system would not cover all of the medical costs of a critical illness, compared to 73.5% nationally.

Ontarians are the least confident that family and friends would take care of them through a critical illness. In the Prairies, 10.2% of people in Saskatchewan identified their physical health as being poor, compared to 4.9% nationally.

Caregiver burden

The cost of critical illness treatment is a growing concern, perhaps more so among Canadians who are providing care for aging relatives and friends. Assessing the emotional and financial impact of informal caregiving on an ongoing basis can be a tough task.

The RBC Retirement Research Centre at the University of Waterloo has developed the RBC Your CareGiving Planner, an interactive resource that helps Canadians evaluate their caregiving needs on an ongoing basis, and produces an individualized report to help manage those needs.

"Informal caregivers throughout Canada play a vital role in the quality of care that their loved ones receive; they must also be sure to take care of themselves in order to manage the various stressors associated with caregiving," said Dr. John Hirde of the University of Waterloo.

The planner ranks the weekly needs of those receiving assistance and examines some of the financial implications of the individual providing it.

"Providing informal care to a loved one is something that many of us will find ourselves doing in our middle or later years in life," said Lee Anne Davies, head, retirement strategies, RBC. "Our planner gives Canadians the chance to explore different caregiving scenarios to see what their lives as caregivers could look like – and better prepare for the emotional and practical impact."

Through a set of more personal questions, the planner also looks for any potential signs of caregiver distress.

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