**Association canadienne des enseignantes et des enseignants retraités**



**Canadian Association of Retired Teachers**

HEALTH SERVICES COMMITTEE

2018 AGM Report

**Membership**

**James MacAulay Chair**

**Terms of Reference**

ACER-CART seeks to promote the optimal health of retired teachers and seniors. The Health Services Committee shall:

1. provide Members with links to reliable information on personal health and well-being;
2. advocate for health goals identified in ACER-CART’s strategic plans and Member resolutions; and
3. prepare for the Executive proposals, position papers and appropriate recommendations related to health concerns.

**Report**

The guidelines for the Health committee at ACER-CART states that the committee is to provide member organizations with information and advice regarding health plans. It is also required to study the health care and insurance plans of the member organizations. The committee is mandated to prepare for the executive proposals and position papers related to health insurance plans with appropriate recommendations.

The committee has reviewed the plans of our various member organizations and have found that there is a common thread though then that states that the coverage is eighty percent of the cost of services. Member organization plans are unique to each member and differ in many ways at the wish of the member. All these plans offer our members excellent coverage on a user pay system. Far be it from the committee to interfere in any of these individual plans. At the national level it is rewarding to be able to study the individual plans and get an overall perspective of the coverage provided across the country. The committee wishes to congratulate our member organizations on the detail and coverage that goes into each individual plan.

The committee concerns itself with the overall health situation as it exists across Canada. As a committee and as an organization we are committed to a National Health Care Plan, a National Pharmacare Program and support for the efforts of each of our members towards these objectives. We are also prepared to ally our organization with other senior organizations which promote the same objectives. We were saddened to learn that the National Health Accord that expired in 2014 was not renewed. The situation we now have with bilateral agreements with each individual jurisdiction leads to differences in the way service is applied in this country. Originally the Federal Government funded fifty percent of the program. However, this declined over the years to ten percent. According to Canada’s health coalitions this move to bilateral agreements has created a funding shortfall of $32 billion to the provinces and territories over the next ten years.

When you add this to the lack of universality that will appear in the thirteen regions, it is hard to believe that we are coming forward. It is true that the provinces and territories receive funding for areas which were not originally covered. Governments will argue that this is a step forward, however, we believe that the principles set out in our original accord will be eroded.

Submitted by:

James MacAulay