

2020 ANNUAL REPORT



**FEDERAL PUBLIC SERVICE
HEALTH CARE PLAN**
ADMINISTRATION AUTHORITY

pshcp.ca

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LETTER FROM THE CHAIRPERSON OF THE BOARD OF DIRECTORS AND THE CHIEF EXECUTIVE OFFICER

It is with great pleasure that we present the Administration Authority's 2020 Annual Report.

At the onset of 2020, one could not have predicted that we would be facing the most significant challenge of our lifetime on a number of fronts due to the impact of the COVID-19 pandemic. This worldwide pandemic has had an impact on every aspect of our personal life, our professional life as well as on the PSHCP and its membership.

In response to the pandemic, the Administration Authority supported and endorsed the implementation of temporary measures to the PSHCP at the end of March 2020. These measures were designed to ensure Plan members and their dependants continue to have access to their health care benefits, while at the same time minimizing social interaction with health care professionals. These measures include the broadening of the list of accepted mental health practitioners, the temporary suspension of the requirement to have a prescription for mental health or physiotherapy services, while existing prescriptions for medical services that expired on or after March 20, 2020 continue to be honored, and the uninterrupted eligibility of virtual services when provided by accepted medical practitioners.

Throughout the year, the Administration Authority closely monitored the impacts of the pandemic on the Plan experience. Significant utilization decreases were observed in most benefit categories, such as the Emergency Travel Assistance, Vision Care, and the Hospital benefits. Meanwhile, Plan costs continued to increase, a result of the consistent growth in membership and in the overall paid claims. In 2020, the PSHCP paid \$1,023M for drugs, a 6% increase over the previous year. This is a trend that can be expected to continue as new drugs are introduced each year. In 2020, the PSHCP's highest expenditures for claims for medical practitioners were for psychology (\$48.1M) and physiotherapy (\$46.8M) services. Claims for psychology services increased by 10.8% while claims for physiotherapy services decreased by 6.4% over the previous year, a direct impact of the pandemic. The Administration Authority remains committed to monitoring and reporting on these costs to Plan stakeholders.

The pandemic also prompted a new normal known as working from home. Zoom and Teams became part of our every day vocabulary. Our team found smart and safe ways of working together. Despite the challenges of this new environment, the Administration Authority continued to be a high functioning organization due in large part to the strength of our corporate culture, our planful approach to business continuity and our remarkable

adaptability. As an organization, we are constantly looking for ways to improve our processes and the value of our products and services. This report reflects the nature of our planned activities and the breadth of the expertise of our team, and the organization as a whole. Throughout this most challenging year, we managed appeals, oversaw a Data Warehouse and Reporting Integrity Audit, provided plan reporting information, communicated with Plan Members, managed an online survey, ensured the compliance of the Plan Administrator with the Contract's Statement of Work, evaluated Plan risk and conducted research, all activities that are within our mandate. Over and above these key functions, we also provided expertise in support of the ongoing renewal of the PSHCP and the retendering of the current contract.

In addition to meeting our objectives in a new and challenging work environment, the organization successfully moved its offices to a new location during the pandemic. Significant and thorough planning were instituted in 2017 to ensure a successful move in 2020. We are happy to report that, despite the many challenges presented by the pandemic, the relocation was only delayed by two months. Health and safety measures were put in place to ensure the safety of staff, movers, and construction workers and we expect to fully move into our new bright and modern facilities once the pandemic is behind us.

As we look forward to next year, we want to recognize the staff and the Board members of the Administration Authority for the nimbleness and creativity they brought to the new work environment, thus ensuring that we continue to meet our objectives. We have built a culture of competence together, and nowhere does that shine brighter than under the spotlight of significant challenges.



Caroline Curran
Chairperson, Board of Directors
PSHCP Administration Authority



John Lewis
Chief Executive Officer
PSHCP Administration Authority

EXECUTIVE SUMMARY

Early in 2020, concepts such as “lockdowns”, “mask mandatory” and “physical distancing” were unknown to most of us. What was also unknown was the impact that a global pandemic could have on our organization, our staff, and our daily activities. This Annual Report will illustrate the impact that COVID-19 has had on every department within the Administration Authority. It will also exemplify the resilience of our staff as they endeavoured to meet the objectives of the organization while still responding to requests that fell outside of the mandate. This includes our participation in the preparation for the contract’s retendering, and the assistance provided in preparation for the Plan’s negotiations that will take place in 2021, two activities that benefit from the organization’s expertise in the management of the PSHCP.

Based on our three-year risk-based audit plan, the organization was to conduct an audit of the PSHCP Call Centre, a spot audit of physiotherapy claims and a privacy audit of Allianz. Given the restrictions imposed by COVID-19, site visits were not possible, thereby jeopardizing the validity of the findings. As a result, these audits were postponed post pandemic. In addition, delays on the Data Warehouse and Reporting Integrity Audit were observed as Sun Life had to temporarily close their offices. Close monitoring of this audit ensured that work remained on track and the results will be available in the first half of 2021.

The pandemic also had an impact on our appeals function. The organization received 407 appeals in 2020, which is a 19% decrease from the previous year. This reduction can be attributed to the pandemic which caused a significant reduction in the overall claims volumes for non-drugs claims, which directly had an impact on the volume of appeals. The temporary measures which expanded the types of eligible mental health practitioners under the Plan also contributed to a reduction in the submission of appeals. While the volume may have been reduced, the committee met virtually throughout the year, and resolved 333 appeals.

Under its reporting and research function, the Administration Authority conducts periodic and ad hoc analysis of the Plan experience. In 2020, this included extensive monitoring to assess the impact of the pandemic on the Plan experience. This included measuring the impact of the temporary measures, as well as evaluating the effect on different benefit categories, where a significant decrease was observed, namely in the Emergency Travel Assistance, Vision Care, and Hospital Benefits. This undertaking is in addition to other new initiatives, such as developing and refining a modeling tool that will have the capability to project plan costs into the future.

In an effort to ensure that the lines of communication with the Plan membership remained strong during the pandemic, the Administration Authority made good use of its website by publishing nine articles related to the pandemic on topics ranging from mental health to coverage for overage dependants. This information was intended to supplement the Info Notice published by the government of Canada. The organization also conducted an online survey to gauge how satisfied Plan members were with the temporary measures that had been put in place and with the overall level of member communication during the pandemic. These activities reinforced the need to consider our approach to PSHCP communications in order to improve members' awareness of their benefits.

The initiatives and activities detailed in this Annual Report clearly demonstrate how the staff of the Administration Authority met the challenges of 2020 head-on while continuing to deliver and to be resilient in times of crisis and change.



THE FEDERAL PUBLIC SERVICE HEALTH CARE PLAN ADMINISTRATION AUTHORITY

The Federal Public Service Health Care Plan Administration Authority is a corporation without share capital whose mandate is to oversee the administration of the PSHCP. The Administration Authority ensures that the Plan Administrator delivers benefits efficiently and effectively to PSHCP members in accordance with the Plan provisions. The Administration Authority is accountable to the Partners Committee.

It has several operational and reporting responsibilities which include, but are not limited to:

- Ensuring that service standards outlined in the Contract are met;
- Conducting audits and evaluations regarding the payment of PSHCP benefits;
- Processing appeals submitted by Plan members;
- Communicating with Plan members about their benefits;
- Providing accurate, comprehensive, and up-to-date information on Plan performance;
- Providing direction to Sun Life on the interpretation of Plan provisions; and
- Reporting incidents of fraud.

ORGANIZATIONAL STRUCTURE

The Administration Authority prides itself on the capacity and competence of its personnel. The staffing complement at the Administration Authority in 2020 comprised 12 full-time employees with expertise in numerous fields including finance, management, audit, compliance, communications, and group benefits administration. A list of the names and roles of the employees is available under Annex B.

In order to meet its strategic objectives, the Administration Authority's work is divided into three main functional areas:

Business Management: This function includes the management and oversight of the organization's strategic and operational processes, its internal financial and human resources management activities, and the overall monitoring of Sun Life's compliance within the parameters of the Contract.

Operations and Audit Management: This function includes the management of Contract compliance of the Plan. Staff within the function oversee the audit program of the PSHCP, the implementation of the Risk-Based Audit Plan, risk analysis and management, fraud investigations and prevention, research, analysis, and reporting.

Communications and Member Services: This function coordinates the planning and execution of communications initiatives across a range of audiences, manages the appeals process, provides oversight of claims processing and call centre-related issues, addresses member inquiries, and facilitates the correct interpretation of Plan provisions.

STRATEGIC PLAN FOR 2020

In consideration of ever-changing circumstances within the public sphere and the group benefits industry, the Administration Authority strives to be flexible and responsive to the needs of the Partners Committee, the Project Authority, Plan members, and the Plan Administrator. The Administration Authority updates the Strategic Plan on an annual basis and aligns its Operations Plan accordingly.

The Strategic Plan includes the Administration Authority's vision, mission, and strategic objectives for the year. Specific deliverables and initiatives are identified by the organization in order to achieve these goals. The Administration Authority then submits the Strategic Plan to the Partners Committee for approval, as required under the Letters Patent.

VISION

Serving the Partners Committee and Plan members by adding value to the administration of the Public Service Health Care Plan through superior knowledge, experience, and innovation.

MISSION

To ensure that benefits and services to Plan members and their covered dependants, as defined in the PSHCP documentation, are delivered in a manner that ensures the effective and efficient administration of the Plan.

STRATEGIC OBJECTIVES

PLAN STEWARDSHIP

To be recognized for reliable contract stewardship.

STAKEHOLDER RELATIONSHIPS

To strengthen key relationships.

EXPERTISE

To be a knowledge leader on the Plan and related industry trends.

GOVERNANCE

To provide excellence in governance and management.

STRATEGIC OBJECTIVES AND ORGANIZATIONAL GOALS FOR 2020

PLAN STEWARDSHIP

To be recognized for reliable contract stewardship

- Provide program oversight and compliance monitoring.
- Develop a three-year Operations Plan and a corresponding budget.
- Develop a Plan risk assessment and produce a three-year Risk-Based Audit Plan.
- Produce an Annual Report.

STAKEHOLDER RELATIONSHIPS

To strengthen key relationships

- Produce quarterly reports for the Partners Committee.
- Review the Communications Strategy.
- Launch an online survey of the membership and conduct the data analysis.
- Conduct stakeholder outreach activities.

EXPERTISE

To be a knowledge leader on the Plan and related industry trends

- Provide technical support to the PSHCP retendering initiative.
- Provide technical support to the PSHCP renewal initiative.
- Complete the rewrite of the Plan Directive.

GOVERNANCE

To provide excellence in governance and management

- Provide support to the Partners Committee.
- Hold an annual strategic planning session.
- Complete an assessment of the Board of Directors.

HIGHLIGHTS FOR 2020

MANAGEMENT

- Maintained productivity amid global pandemic.
- Successfully completed office relocation.
- Obtained a high-level estimate of costs associated with possible Plan design modifications.
- Worked in partnership with TBS to develop the Request for Proposal (RFP) for the next PSHCP Contract and participated in the technical bid evaluation process in late 2020.

AUDIT

- Completed a detailed risk assessment, which informed the development of the Three-Year Risk-Based Audit Plan.
- Developed the 2021-2023 Risk-Based Audit Plan.
- Launched the Data Warehouse and Reporting Integrity Audit.

REPORTING

- Quantified the potential annual financial impact of certain policy changes introduced to provincial and territorial health insurance plans.
- Completed research and analysis on the impact of specialty drugs overall for the PSHCP.
- Conducted research related to emerging medications.

APPEALS

- Received 407 appeals in 2020, a 19% decrease over 2019.
- 66.2% of appeals were related to the level of benefit or a decision by the Plan Administrator, 33.8% of appeals concerned the effective date of coverage or a request for a refund of contributions.
- The Appeals Committee heard 333 appeals, of which 11.1% were upheld, 87.7% were denied, and 0.9% were deferred pending additional investigation.

COMMUNICATIONS

- Updated the PSHCP Administration Authority's website to increase its user experience.
- Updated the PSHCP Communications Strategy.
- Conducted an online survey to gauge members' overall satisfaction with communications related to temporary Plan changes during the pandemic.

GOVERNANCE

- Supported the development of a stakeholder outreach strategy to seek the Partners Committee support for ongoing and upcoming initiatives.
- Reviewed the strengths and areas for improvement identified in the 2020 Board Peer Assessment.
- Supported the organization as it adapted to the new work environment imposed by COVID-19.

LOOKING AHEAD TO 2021: STRATEGIC OBJECTIVES AND ORGANIZATIONAL GOALS

PLAN STEWARDSHIP

To be recognized for reliable contract stewardship

- Produce an Annual Report and a Compliance Report.
- Conduct comprehensive contract monthly reporting and oversight.
- Update the Risk Assessment and three-year Risk-based Audit Plan.
- Complete audits scheduled for 2021, including implementation of a specific digital services audit program.

STAKEHOLDER RELATIONSHIPS

To strengthen key relationships

- Deliver Partners Committee reporting program.
- Continued execution of Partners outreach activities.
- Investigate modernizing the appeals process.
- Update the Communications Strategy.
- Establish a Communication Advisory Committee reporting to the Partners Committee.

EXPERTISE

To be a knowledge leader on the Plan and related industry trends

- Update the reporting, research and analysis plan and research/analysis products.
- Provide active support to the PSHCP contract retendering process.
- Complete the Plan Directive re-write.
- Support Partners in Plan renewal activities.
- Conduct a bi-annual data analytics update.
- Implement refinements to internal forecasting/modelling capability.

GOVERNANCE

To provide excellence in governance and management

- Update the Strategic Plan.
- Update the Operations Plan and provide semi-annual updates.
- Establish a 3-5 year budget.
- Complete the transition of the Data Management System to a new platform, including appeals management.
- Complete a Privacy Impact Assessment.
- Update the Professional Development Plan.
- Update the Succession Plan.
- Complete phase I of the Board of Directors assessment cycle.



OPERATIONAL ACCOMPLISHMENTS IN 2020

BUSINESS MANAGEMENT

PLAN RENEWAL SUPPORT

Following a request from the Partners Committee's Renewal Committee at the end of 2019, the Administration Authority obtained a high-level estimate of costs associated with possible Plan design modifications for the PSHCP. These estimated operational costs were not shared with the Renewal Committee as their activities were suspended throughout 2020 while they were awaiting a mandate to negotiate. When the Committee's activities resume, the estimated expenses associated with possible Plan design modifications will need to be updated to reflect the current PSHCP environment. Similarly, previously shared cost-containment opportunities will also need to be updated.

RETENDERING OF THE PSHCP

Throughout early 2020, the Administration Authority continued to work in partnership with TBS to develop the Request for Proposal (RFP) for the next PSHCP Contract. This involved participation in more than 10 working groups including Claims, Reporting, Communications, Positive Enrolment, Provider Registration and Audit. Following the posting of the RFP on September 1, 2020, the Administration Authority collaborated with TBS to prepare responses to a significant volume of questions received from industry during the RFP solicitation period.

The Administration Authority began participating in the technical bid evaluation process in late 2020. It is expected that the Administration Authority's efforts in the retendering of the PSHCP will continue throughout 2021 to further support the bid evaluation process and begin working toward implementation of the next PSHCP Contract.

IMPACT OF THE COVID-19 PANDEMIC

At the onset of the pandemic, when working remotely became mandatory, the Administration Authority had to pivot and adapt to the situation in order to maintain its regular activities, thus ensuring it met its objectives. The technology infrastructure held up and scheduled meetings, including Board and Board Committee meetings, were conducted via videoconferencing. Staff rose to the occasion, productivity was not affected, and creativity and innovation were heightened. As we look to 2021, and hopefully a gradual return to our new office environment, we can affirm that the pandemic has helped to inform the possibility of alternate work arrangements for our staff.

REVIEW OF HR POLICIES

Business management also involves ensuring the well-being and the retention of our staff. Human resource policies are essential as they provide structure, control, consistency and fairness to staff. They also inform personnel of the organization's responsibilities. Given the rapid evolution of the Administration Authority over the past decade, as well as the labour relations landscape, it became essential that current policies be reviewed and complemented with new ones that would reflect our current environment. The new suite of HR policies comply with employment, workplace health and safety, and other related legislation applicable in Ontario. These will be reviewed on a five-year basis or as required to ensure that they remain relevant to our ever evolving environment and that they continue to be compliant with legislation.

AUDIT AND EVALUATION

THREE-YEAR RISK-BASED AUDIT PLAN

Each year, the Administration Authority conducts a Plan risk assessment which helps to inform a three-year Risk-Based Audit Plan. The plan establishes the nature of the audits that are to be performed over this three-year period and estimates their timing, scale, and scope. Once complete, the plan is tabled with TBS and subsequently shared with Sun Life. This advance planning allows for the allocation of sufficient resources and ensures that Sun Life and its subcontractors are in a position to support the audits. It also enables the Administration Authority to carry out the Audit Plan in an orderly fashion. The Risk-based Audit Plan is also shared with the Partners Committee as part of our regular quarterly report distribution.

When conducting a Plan risk assessment, the Administration Authority considers a wide variety of factors. Elements such as contractual requirements, year-over-year trends, and volumes of claims by benefit category are assessed to identify financial risk. Knowledge obtained from industry research and Plan experience allows for a more qualitative assessment of risk. The results of previously conducted audits are also taken into consideration to develop a comprehensive evaluation of the Plan risks.

The ensuing three-year Risk-based Audit Plan includes audits of financial operations, privacy, reporting services, mechanisms supporting claims adjudication as well as specific benefits such as psychology, drugs and physiotherapy. As a result of the COVID-19 pandemic in 2020, many of the planned audits could not be conducted on site, nor could the auditors physically access the required documentation. These unexpected limitations have resulted in most of the planned audits for 2020 being deferred or having their priority revised.

In 2020, the Administration Authority developed the 2021-2023 Risk-Based Audit Plan. This Audit Plan took into consideration the expiration of the current contract in 2023 and the implementation period of the subsequent contract. Given these atypical circumstances, many of the scheduled audits in 2022 and 2023 are dependent on the outcomes of the PSHCP retendering process.

DATA WAREHOUSE AND REPORTING INTEGRITY AUDIT

The PSHCP data and reports produced by Sun Life are widely utilized by TBS and the Administration Authority for analytics, research and Plan monitoring. This audit verifies the accuracy, integrity, validity and completeness of PSHCP data stored in Sun Life's data warehouse. In addition, the audit validates that the data is accurately reflected in the standard reports and the ad hoc reporting tool that are made available on Sun Life's Plan Sponsor website.

While originally scheduled for the fall of 2018, the audit was first delayed beyond 2019 to ensure that data security concerns expressed by Sun Life were fully addressed. Tentatively scheduled for April 2020, the audit was further delayed due to the onset of the pandemic which led to temporary closure of Sun Life's office. As a result of these lengthy delays and the challenges encountered during the audit preparation phase (i.e. complexity and size of the data warehouse, data integrity issues, and unavailability of some technical documentation), the project timeline was extended and the initial budget was materially adjusted to account for the auditing firm's incremental efforts. Following the successful on-boarding of the PSHCP data in June 2020, the audit work officially began in August 2020. A final audit report is expected at the end of the second quarter in 2021.

PRIVACY AUDIT – SUN LIFE FINANCIAL

The current contract between Sun Life and the Government of Canada stipulates that a privacy audit of the Contractor and its subcontractors must be conducted on an annual basis. Sun Life and its subcontractors, namely Millennium 1 Solutions (M1S), Allianz and TELUS were audited on an annual basis between 2014 and 2018. These audits were followed by a Privacy Audit Framework Assessment to determine whether Sun Life, TELUS and Allianz had implemented the recommendations of the previous audits. The 2020 Privacy Audit was to be exclusive to Allianz. Unfortunately, a site visit to examine Allianz' call centre and claims operation was not possible due to the COVID-19 pandemic. Consequently, physical evidence would not be collected, thereby jeopardizing the validity of the audit. With the assurance that the results of the 2014 audit were favourable, and the implementation of the minor recommendations for improvement, the 2020 Privacy Audit was deferred.

FRAUD

Fraud Management is a critical component in the oversight of a publicly funded health care benefit plan, particularly one as large as the PSHCP. It aims to minimize the incidence of fraud and misuse of the Plan. It also ensures that suspected fraud cases are investigated and managed effectively as this is a high priority for the Administration Authority.

In collaboration with Sun Life and TBS, the Administration Authority ensures effective and efficient fraud case management and resolution. The Administration Authority evaluates case information, determines risk, and prepares case summaries with recommendations for review by TBS. Once a fraud case is identified, the Administration Authority receives regular status updates from Sun Life and TBS as they oversee the recovery process and reimbursement. Each case is managed individually based on its circumstances. All incidents of fraud are reported to the Partners Committee through a Quarterly Fraud Report.

For efficient management and resolution of suspected fraud cases, the Administration Authority is currently collaborating with TBS to develop a policy framework for the management of false claims. The Administration Authority also continues to closely monitor results to ensure that anti-fraud strategies and enhancements made to Sun Life's data-mining tool and fraud detection capabilities effectively address PSHCP risks.

The incidence of detected cases of fraud identified remains much lower than expected for a health care plan as large as the PSHCP in relation to industry. In order to enhance its fraud management capability, the Administration Authority retained the services of a Chief Financial and Compliance Officer who has the required qualifications of a Certified Fraud Examiner. The Administration Authority engages in regular professional development activities to ensure that it remains informed of trends and patterns, as well as evolving technologies in the field.

REPORTING, RESEARCH, AND ANALYSIS

Under its reporting, research and analysis functions, the Administration Authority conducts periodic and ad hoc analyses, and oversees reporting initiatives to support the evolution of the information needs of its stakeholders.

To meet the requirements listed in the Letters Patent, the Administration Authority developed a reporting structure whereby reports are provided to the Partners Committee on a monthly, quarterly, annual and an as-needed basis. In addition, the Administration Authority began distributing its Monthly Paid Claims Analysis Report to the Partners Committee in 2020. The organization also developed a delivery management plan that enables TBS to evaluate the performance of the Administration Authority against predetermined accountabilities. Discrete research projects and ad hoc analysis initiatives are also undertaken at the request of the Board of Directors and the Partners Committee.

DRUG BENEFIT

In 2020, the Administration Authority regularly conducted research related to emerging medications ranging from traditional drugs to specialty drugs and biosimilars (previously referred to as Subsequent Entry Biologics drugs or SEBs). Biosimilars are similar but not identical versions of the reference originator biologic. Research was conducted on new specialty drugs for the treatment of cardiovascular disease and depression to better understand the therapeutic value of these drugs and their potential cost implications for the PSHCP. The research focused on *Vyndaqel* and *Spravato*. The estimated cost of these new drugs ranges from approximately \$44,000 to more than \$225,000 per year.¹

The Administration Authority also completed research and analysis on the impact of specialty drugs overall for the PSHCP. In recent years, spending on these higher-cost medications has continued to increase and the proportion of drug spending attributable to specialty drugs has grown significantly. The Administration Authority's assessment included a trend analysis as well as an evaluation of the impact of specialty drugs across different member groups.

Research related to orphan drugs for the treatment of rare diseases, such as *Luxturna* and *Zolgensma*, was also performed in order to assess the potential impact of these ultra-high cost drugs. This research included the potential PSHCP population that could be affected by these rare diseases and the annual cost associated with treatments. Research also included, where applicable, a review of the recommendations provided by the Canadian Agency for Drugs and Technologies in Health (CADTH) for these drugs. CADTH provides evidence-based information about the cost-effectiveness of drugs to provincial and territorial drug plans.

Additional research and analysis were completed to quantify the potential annual financial impact of certain policy changes introduced to provincial and territorial health insurance plans. These changes included the redesign of OHIP+ in April 2019 to no longer offer drug

¹ TELUS Health. The Drug Pipeline: What private plans can expect in 2020. Spring 2020.

coverage to individuals age 24 years or younger with private drug coverage. Changes were also implemented in British Columbia and Alberta with the introduction of biosimilar switching programs which require patients to transition to less expensive biosimilars if they wish to continue to receive coverage under the public drug plan. In British Columbia, a phased approach was implemented in 2019-2020 that applies to a number of biologic drugs, including Remicade, Enbrel and Lantus. Alberta's biosimilar initiative was implemented in 2020 and applies to the same three drugs covered by British Columbia's biosimilar initiative as well as a number of additional biologic drugs. The Administration Authority's cost impact analysis also included an assessment of changes to Alberta's Seniors Drug Benefit Program, which ended coverage for non-senior dependants of covered seniors in March 2020.

The Administration Authority also followed with interest the evolution and introduction of new Patented Medicines Prices Review Board (PMPRB) guidelines required to operationalize the amended Patented Medicines Regulations. These regulations were set to take effect on January 1, 2021, however implementation has been delayed until at least July 1, 2021. Once implemented, the revised regulations are expected to reduce the cost of patented medicines in Canada over the next several years, which should translate into savings for private plans such as the PSHCP.

In 2020, the Administration Authority performed extensive reviews of many additional aspects of the PSHCP Drug Benefit claims experience for the 2019 calendar year. Included in these reviews was in-depth analysis of key drug therapeutic classes presenting the most notable change, the top 10 drugs by paid amount, the fill rate of brand versus generic drugs, the average paid amount by province and territory, and many other statistics used to evaluate the changes and trends in the PSHCP drug claims experience. Much of this analysis was presented to the Board of Directors throughout 2020 and will continue to inform the Board on an annual basis.

The table below lists the top ten drugs paid by the Plan in 2020. The Plan experience was calculated by combining all of the claimed dosage forms for each drug. Out of the top ten drugs in 2020, seven were expensive specialty drugs.

2020 TOP TEN DRUGS BY PAID AMOUNT

RANK	DRUG NAME	DISEASE NAME
1	HUMIRA*	Rheumatoid Arthritis
2	REMICADE*	Rheumatoid Arthritis
3	STELARA*	Psoriasis / Psoriatic Arthritis
4	ROSUVASTATIN	High Cholesterol
5	OZEMPIC*	Type 2 Diabetes
6	EYLEA*	Macular Degeneration
7	ATORVASTATIN	High Cholesterol
8	XOLAIR*	Allergies / Asthma
9	ENTYVIO*	Ulcerative Colitis / Crohn's Disease
10	ELIQUIS	Blood Clots

*Specialty or biologic drug

REPORTING INITIATIVES

Throughout 2020, the Administration Authority developed and refined a modeling tool with the capability to project plan costs into the future. The Administration Authority defined the requirements, conducted extensive testing, and identified numerous enhancements to improve the tool's precision. The modeling tool will allow the Administration Authority to assess what the Plan's future cost curve might look like, and how various measures could alter the trajectory of that curve. This is critical information for the Administration Authority in order to evaluate the Plan experience and risks. As part of a second phase for the modeling tool, the Administration Authority will be focusing on enhancements that will allow for the modeling of various Plan design changes.

In 2021, the Administration Authority will partner with a data analytics firm to undertake a five-year data analytics program of the PSHCP drug and medical supplies benefits experience. This data analytics program will commence with the 2019-2020 Plan experience and it will be conducted every two years thereafter. The findings from the data analytics initiative will allow the Administration Authority and Plan stakeholders to better understand utilization of the PSHCP's drug and medical supplies benefits, which represented more than 70% of paid claims in 2020. The analytics initiative will involve a review of the Plan's drug and medical supplies data to gain insight into any new emerging concerns, to identify trends evident in the most current data, and to understand whether the key strategic areas of opportunity identified in previous analytics projects are growing, lessening, or remaining stable. The additional years of data will allow for a better prediction of future risks and claims utilization trends with respect to the drug and medical supplies benefits.

The data analytics work is complementary to the modeling tool that has been developed. The projections derived from the data analytics will inform the variables of the modeling tool to allow for more precise Plan projections. This work will also inform the ongoing Plan analyses the Administration Authority conducts when certain events occur within the environment, for example changes to provincial and territorial health insurance plans that have an impact on the Plan's drug and medical supplies benefits.

CLAIMS AND PLAN MEMBERSHIP

In 2020, the Administration Authority produced its annual key performance indicators (KPI) report that outlines the change in Plan expenditures, the annual cost per member and the relative change by benefit and member groups over the last three calendar years. Staff presented this information to the Board of Directors and will continue to do so on an annual basis. Along with the KPI report, summary Plan tables were distributed to the Board. These tables include high-level Plan experience by benefit and Plan type (e.g. Supplementary and Comprehensive), and more detailed data for the top two benefits, namely the Drugs benefit and the Medical Practitioners benefit.

Throughout 2020, ongoing paid claims analyses were performed and outcomes were presented to the Board of Directors on a monthly basis. Paid amounts for claims, fees and taxes were evaluated and reported against the same period in the previous year. The change in cost per member was assessed and cumulative results were updated. Standard reporting results were compared against ad hoc data to validate the accuracy and consistency of the reports.

A review of Plan expenditures, Plan membership data and an in-depth analysis of certain PSHCP benefits was performed and presented to the Board of Directors on a quarterly basis. This review included average Plan cost per member, distribution of paid amount by member group, paid amount growth trends for all benefit categories, and a more in-depth analysis of the Drug benefit and Medical Practitioners benefit. In 2020, the Administration Authority's Reporting team also conducted extensive monitoring to assess the impacts of the COVID-19 pandemic on the PSHCP experience. This included measuring the impact of temporary Plan changes introduced in response to the pandemic (e.g. broadening the list of accepted mental health practitioners), as well as evaluating the effect of the pandemic on different benefit categories. While utilization decreased in most benefit categories as a result of the pandemic, the decreases were most significant in the Emergency Travel Assistance, Vision Care, and Hospital benefits.

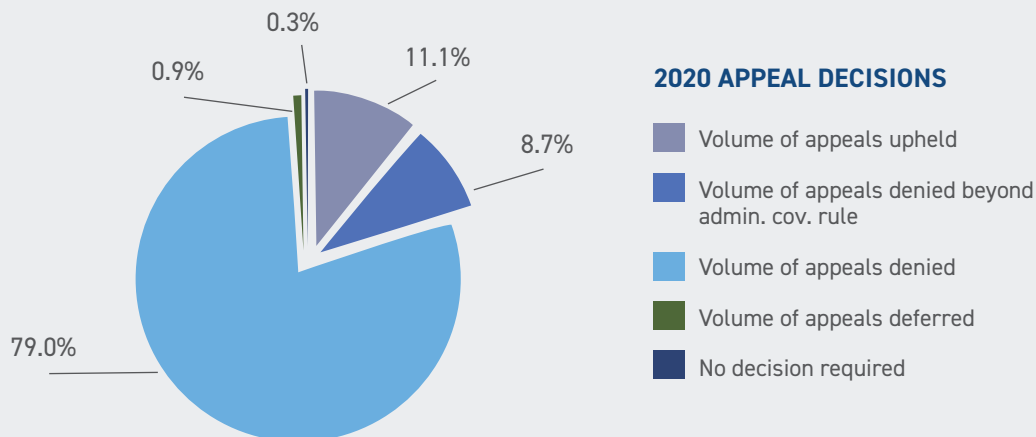
The Administration Authority calculated the taxable benefit amount for PSHCP members who reside in Quebec and participate in the Veterans Affairs Canada (VAC) group. The Government of Canada performs this task for employees and pensioners, however, they cannot complete this task for the VAC group because contributions are remitted directly to Sun Life rather than pension or salary deductions. Therefore, the Administration Authority has been completing this task for a number of years. Based on the data extract provided by Sun Life, the Administration Authority performed calculations per the number of months a member was covered under the new and previous contribution rate, taking into account changes in their coverage (i.e. single, family, employee, pensioner, etc.). The final report was provided to VAC in January 2020.

APPEALS

The primary function of the Appeals Committee is to consider, when requested by a Plan member, an appeal of a decision of the Plan Administrator regarding a benefit entitlement and/or a decision relating to their coverage. The Appeals Committee is mandated to review and make recommendations on all appeals, consistent with the provisions of the Plan Directive, and to report to the full Board of Directors. All decisions are considered final and binding.

The Administration Authority received 407 appeals in 2020, a decrease of approximately 19% compared to 2019. This reduction can partially be attributed to the onset of the COVID-19 pandemic and a decrease of appeals received from March to June 2020. Additionally, the pandemic caused a significant reduction in the overall claims volumes for non-drug claims, which also had an impact on the volume of appeals received. Finally, the temporary measures introduced in March 2020 expanded the types of mental health practitioners allowed under the PSHCP; this likely decreased the volume of appeal submissions relating to psychology rendered by an ineligible practitioner.

The Appeals Committee met four times in 2020 via videoconference and reviewed 333 appeals, a decrease of 9% from 2019. Of the appeals presented in 2020, 66.2% were related to either a decision rendered by the Plan Administrator or to the level of benefits offered under the Plan. The remaining 33.8% of appeals concerned the effective date of coverage or a request for a refund of contributions. Of the 333 appeals heard by the Appeals Committee in 2020, 11.1% were upheld, 87.7% were denied, 0.9% were deferred pending additional investigation, and 0.3% did not require a decision. The slight increase in approval rates when compared to 2019 can be attributed to an influx of appeals regarding Sun Life's change of adjudication practice relating to the dispensing requirements for custom orthotics.



The most common types of appeals reviewed in 2020 are listed below in order of frequency:

- Requests for a refund of contributions (81 appeals);
- Late claims (29 appeals);
- Requests for backdated coverage (16 appeals);
- Acupuncture by a non-physician (14 appeals);
- Orthotics dispensed by an ineligible practitioner (12 appeals);
- Psychology by an ineligible practitioner (11 appeals);
- Viscosupplementation device (11 appeals).

A total of 106 cases submitted to the Administration Authority did not constitute appeals and were handled without being presented to the Appeals Committee. Approximately 49% of the cases stemmed from administrative errors made by representatives from various employee departments, the pension office, and the Plan Administrator. These cases represented situations where the member's complaint was warranted and should have been corrected by either the Plan Administrator or the appropriate department or pension office without involvement from the Administration Authority. The remaining 51% of cases were found to have been incorrectly categorized or submitted as appeals; these files were handled administratively based on the nature of the inquiry. Additionally, the Administration Authority partnered with Canadian Armed Forces (CAF) representatives to eliminate the submission of appeals related to CAF administrative errors. The CAF office agreed that they were in a better position to investigate, correct and recommend improvements/preventative measures in relation to their internal administrative errors.

At year-end, 42 appeals were pending a decision from the Partners Committee in relation to the Plan's provision for physician services and laboratory services. Seven Issue Papers were prepared with eligibility recommendations for a variety of services that are subject to the Plan's physician clause for consideration by the Partners Committee. The seven Issue Papers were reviewed by the Partners Committee in October 2020, however a decision had not been reached by year-end.

The Administration Authority initiated the first steps in the modernization of the appeals process, including the stabilization of the Document Management System. Work will continue in 2021 with the creation of a project plan to establish the scope and timeline of this endeavour.

COMMUNICATIONS

PLAN MEMBER SATISFACTION SURVEY

In alignment with its contractual obligation, Sun Life must conduct member satisfaction surveys on a regular basis. The objective of these surveys is to evaluate Plan members' overall satisfaction with the services they receive from Sun Life and its subcontractors, namely Allianz Global Assistance (Allianz), who manages claims processing and inquiries for members residing or travelling abroad. Surveys were conducted in 2013, 2017 and 2019.

In 2019, the questions for members with Supplementary coverage were adapted to account for the implementation of Sun Life's digital services which were made available to members in April 2018. The new questions gauged member satisfaction and uptake with digital claims submission, the Provider Search tool, the Drug Look-Up tool, and the Click to Chat web service. As the survey was conducted in the fall of 2019, the results were made available in January 2020.

Supplementary Coverage - 2019 Plan Member Satisfaction Survey

The PSHCP Member Satisfaction Survey was sent to over 20,000 randomly selected Plan members residing in Canada and a total of 2,744 members responded. This represented a response rate of 14%.

Both employee and pensioner satisfaction scores improved since the last survey. The results showed that satisfaction with the PSHCP is somewhat higher than in 2017. Overall satisfaction with the PSHCP increased to an average of 8 out of 10, when compared to 7.68 in 2017.

The use of key member services such as the benefit card, the Sun Life Call Centre, and the Sun Life Plan Member Services website all increased since 2017. Satisfaction with these services, along with the claim processing platforms, were consistent with previous results or slightly improved.

The introduction of electronic claims processing yielded positive results as 50% of members indicated that they had submitted an electronic claim within the past 12 months. While the majority of electronic claims were on the website, the use of the mobile application was reported by over 1 in 3 members. Conversely, paper claims submissions declined by 10%.

The addition of other new digital services such as the Provider Search and Drug Look-Up tools, were well received as about 1 in 5 members confirmed having accessed these services, and 1 in 10 used Click to Chat.

Comprehensive Coverage – 2019 Plan Member Satisfaction Survey

Given the limited size of this membership (less than 5,000 individuals), all members with Comprehensive coverage that have provided an email address were invited to take part in the study. Of the sample of 4,600 possible participants, a total of 474 responses were received, representing a response rate of 10%.

The PSHCP Comprehensive Plan Member Experience survey results suggest members covered under the Comprehensive Plan are less satisfied than members with Supplementary coverage, with an overall satisfaction level of 6.5 out of 10.

Satisfaction with Allianz remains stable. Results show an increase of the usage of the Plan Member Services website. Additionally, satisfaction with claims accuracy, claims statement clarity, and claims history has improved since 2017.

Members are shifting from using paper sources of information to digital, and their level of knowledge about their coverage is higher than in 2017. However, satisfaction with the Allianz Call Centre is not quite as positive as in 2017. Wait times and clarity of information represent improvement opportunities.

WEBSITE UPDATE

The PSHCP Administration Authority uses its website to actively inform PSHCP members and promote a greater understanding of the benefits and coverage offered by the Plan. In addition to the static content which remains posted to the website, informative articles are published on a monthly basis to highlight news and important information pertaining to benefits to which they may be eligible under the PSHCP. Topics elaborated for the monthly articles in 2020 were mostly focused on information pertaining to the Covid-19 pandemic, such as the broadening of the list of accepted mental health practitioners, traveling during the pandemic and the importance of taking care of mental health, among others.

The website also houses the bi-annual editions of the PSHCP Bulletin which provide a more comprehensive account of the changes and intricacies of PSHCP provisions. However, due to the Covid-19 pandemic, only one Bulletin was produced in 2020. Its topics included information about contribution rates for retired members, the hospital provision, and the difference between reasonable and customary charges and maximum eligible expense limitations.

The Administration Authority also uses its website as a means to interact with PSHCP members by way of conducting annual Plan member surveys. The initial website survey was originally conducted to gain a better understanding of Plan membership demographics, the members' intent while visiting the website, their opinion of the website and how they thought it could be improved. The 2020 website survey was designed to gauge PSHCP members' overall satisfaction with communications related to the temporary Plan changes as well as access and use of the Plan during the pandemic.

The survey included questions about members' level of knowledge and awareness pertaining to the temporary Plan changes, along with their preferred information sources related to the PSHCP. The survey was fielded in November and December 2020 and the results will be available in the first quarter of 2021.

To maintain the relevance of its website, the Administration Authority reviewed its performance by using web analytics tools and implemented enhancements to increase its user experience. As such, the home page was reorganized to ensure the most popular content was put at the forefront of the site, making it even more accessible to members. In addition, the menu bars were revisited to align with standard website best practices.

COMMUNICATIONS STRATEGY

The Administration is committed to reviewing its communication strategy on an annual basis in compliance with the responsibilities that are outlined in the Letters Patent. The revised document was tabled with the Partners Committee in Q2 of 2020. It highlights the organization's current communication priorities and establishes objectives that will help the Administration Authority achieve its long-term communication goals.

In order for this communications strategy and plan to materialize, the PSHCP Administration Authority recommended the creation of a PSHCP Communications Advisory Committee in its 2020 Communications Strategy. The Committee's objective would be to facilitate exchanges and the dissemination of information. This would allow for a better understanding of collective issues in order to choose the best strategies and action plans to address them. The Committee would also ensure that communication to plan members is consistent by providing integrated and strategic communications. The purpose of the committee would be to inform, educate, consult, and involve stakeholders in order to improve communication to Plan Members.



PSHCP ADMINISTRATION AUTHORITY BOARD OF DIRECTORS

The Administration Authority is governed by a Board of ten directors. One director is appointed by the President of the Treasury Board of Canada, on the recommendation of the National Joint Council of the Public Service, for the role of chairperson. Another director is appointed by the President of the Treasury Board of Canada, again on the recommendation of the National Joint Council, who, in the opinion of the President, best represents the pensioners. Four directors are appointed by the President of the Treasury Board of Canada, and four directors are appointed by the division of the National Joint Council of the Public Service that represents the employees. Directors are appointed for terms of one to four years, and are eligible for reappointment after satisfactory completion of their terms. A listing of all directors serving on the Board of the Administration Authority as of December 31, 2020 is available under Annex A. Stability on a Board of Directors has never been as crucial as in the past year as we adapted to the new work environment mandated by COVID-19. The only change to the Board's composition was the addition of Daniel Boulet. His four-year appointment as an employee representative bolsters our Board's repertoire of available expertise and we look forward to working with him and benefitting from his expertise on our Audit and Finance Committee.

The Board of Directors is responsible for overseeing the management of the Administration Authority and is involved in the following activities:

- Approving the strategic direction and the triennial Operations Plan;
- Ensuring that potential threats and principal risks are identified and managed;
- Approving major decisions that relate to the Plan;
- Monitoring the performance of the Chief Executive Officer;
- Supporting the Chief Executive Officer in the development and implementation of organizational policies;
- Overseeing the financial management of the Administration Authority; and
- Approving management succession plans, which include the appointment, training, compensation, and monitoring of the Chief Executive Officer.

In performing these oversight duties, the Board of Directors is supported by three committees composed of Board members selected by the Chairperson.

APPEALS COMMITTEE

CHAIR | John Gordon (March 2020 to present)

MEMBERSHIP | Five directors

STAFF SUPPORT | Director, Appeals and Member Services; Appeals Analyst

COMMITTEE MANDATE | The primary function of the Appeals Committee is to consider, when requested by a Plan member, the appeal of a decision of the Plan Administrator regarding a specific benefit entitlement and/or a decision relating to a member's coverage.

The Appeals Committee is mandated to review and make recommendations on all appeals submitted by members and/or their representatives, consistent with the provisions of the Plan Directive and to report to the Board of Directors of the Administration Authority.

KEY ACCOMPLISHMENTS OF 2020

- Held four meetings throughout the year and heard 333 appeals;
- Reduced the number of appeals in inventory by 16% compared to 2019; and
- Continued to identify sections of the Plan Directive that could be considered confusing or easily misinterpreted by Plan members. Examples of these areas include the following:
 - The prescribing power of nurse practitioners;
 - The five-year replacement timeframe for durable equipment;
 - The new dispensing requirements for orthotics.

AUDIT AND FINANCE COMMITTEE

CHAIR | Wendy Loschiuk (April 2019 to present)

MEMBERSHIP | Five directors

STAFF SUPPORT | Chief Financial and Compliance Officer

COMMITTEE MANDATE | The Audit and Finance Committee assesses the adequacy of risk management processes and makes recommendations to the Board of Directors based on their findings. The Committee reviews the Administration Authority's internal control system and its compliance with legal requirements and regulations. It helps the Board oversee the organization's financial risks, the reliability of its financial reporting and the quality of its internal controls.

The Committee reviews the organization's budget and recommends Board approval of the 3-year budget submission. The Committee governs the organization's annual external audit and ensures the implementation of an effective Plan risk assessment framework and audit plan. It is also responsible for ensuring that financial statements and reports are provided to the Partners Committee on a timely basis. The Committee reviews the requirements of the Contract to ensure that audits and monitoring programs are implemented on a regular basis. The Committee also provides guidance to the Chief Executive Officer on all accounting-related matters and makes recommendations to the Board of Directors for approval.

KEY ACCOMPLISHMENTS OF 2020

General

- Kept abreast of the impacts of the pandemic on the organization's budget and audit initiatives.

Finance

- Recommended the appointment of auditors for the 2020 fiscal year;
- Coordinated an external audit of the Administration Authority's financial statements;
- Conducted a post-financial audit meeting with the Administration Authority's external auditors to review the audited financial statements;
- Oversaw the organization's financial reporting (financial statements, variance reports & budget).

Risk Assessment and Auditing

- Reviewed the annual Risk Assessment outcomes and validated that the risks to the Plan were effectively addressed in the Three-Year Risk Based Audit Plan;
- Recommended the postponement of the 2020 Privacy Audit of Sun Life given the current pandemic which prevents onsite audit work and limits the collection of substantive evidence; and
- Stayed abreast of the developments for the Data Warehouse and Reporting Integrity Audit and conveyed the Committee's concerns and suggestions with the Board of Directors.

EXECUTIVE COMMITTEE

CHAIR | Caroline Curran (September 2019 to present)

MEMBERSHIP | Six directors

STAFF SUPPORT | Chief Executive Officer

COMMITTEE MANDATE | The Executive Committee ensures the effectiveness of the Administration Authority's governance structure, identifies functions that may require strengthening, and makes recommendations to the Board of Directors based on its findings. It also ensures that the combination of skills and experience of each Director aligns with the strategic direction of the Administration Authority, manages the Board's Code of Conduct, develops their training and qualification requirements, and conducts performance reviews that assess their strengths and weaknesses.

With regard to communications, the Executive Committee supports the Administration Authority's Board of Directors in the oversight of effective communications to Plan members and stakeholders including the Partners Committee. This includes identifying the appropriate tools and messages for external communications and the development of an outreach strategy. The Committee reports to the Board of Directors on its assessment of communications and makes recommendations on future initiatives to address any gaps, inconsistencies or inadequacies.

The Executive Committee is also responsible for the oversight of the human resources function. Its main focus in this area is:

- a) Assisting the Board in fulfilling its responsibilities in the management of human resources by promoting leadership, continuity and competence at the senior management levels of the Administration Authority; and
- b) Reviewing and making recommendations in the areas of organizational structuring, hiring, staff relations, succession planning, staff training and development, performance management and executive and staff compensation. It also supports the Board of Directors and its Chairperson on matters relating to CEO performance and compensation.

KEY ACCOMPLISHMENTS OF 2020

Governance

- Reviewed the strengths and areas for improvement identified in the 2020 Board Peer Assessment;
- Reviewed the Institute on Governance's proposal for the 2021 Board Assessment and made the necessary recommendations to the Board for approval;
- Reviewed and approved the "Request for Board appointment" documents that were sent to the appropriate appointing parties to fill vacancies on the Board of directors.

Communications

- The Committee reviewed the 2020 Communications Strategy and made the necessary recommendations to the Board for approval;
- The Committee reviewed the 2019 Annual Report and the 2019 Compliance Report and made the necessary recommendations to the Board for approval;
- The Committee reviewed the questionnaire of the online members satisfaction survey on temporary measures introduced under the PSHCP in response to COVID-19 and the communication of these measures to the membership.

Human Resources

- Background information was presented to the Committee on the 2020 economic increase for staff and the Committee made the necessary recommendation to the Board for approval;
- The Committee conducted a review of the CEO's mid-year and end-of-year performance for 2020 and made the necessary recommendations to the Board for approval. Recommendations were subsequently discussed at in-camera sessions of the Board;
- The committee reviewed the final suite of HR policies and recommended they be tabled with the Board of Directors.

BOARD OF DIRECTORS - ASSESSMENT

The Administration Authority's Board of Directors has an established Board assessment policy that includes Board, committee and peer assessment components, with one component being completed each year over a 3-year period. In 2020, the policy called for a self and peer assessment.

As such, the services of the Institute on Governance were retained to administer the online survey, analyze results and provide individualized reports to the Chairperson. The findings were presented to the Board in September 2020 and are as follows:

- Overall responses indicated the following relatively consistent strengths for Board members:
 - Keeps the organization's strategic direction in mind when making decisions
 - Has sufficient knowledge of the Administration Authority's operations and the Plan to fulfill obligations as a director
 - Respects the confidential nature of materials and discussions
 - Supports decisions once made
- Overall responses indicated there were a few areas for improvement. As such, the Chairperson met with each director individually to review and discuss the opportunities for development. In preparation for its next Strategic Planning Meeting, the Administration Authority has retained the services of a third party to undertake an interview process with a view of expediting and focusing the discussions at the time of the event. Upon reviewing the summary of interviews in November 2020, the consensus of the committee was that:
 - Board members identified a number of governance system and Board governance strengths, challenges, opportunities and risks, and
 - There was a need to explore options to improve the impact of the Board of Directors within the broader governance system.

The information collected from the interview process as well as the 2021 Board assessment will help to inform and guide the discussion at the 2021 strategic planning session.

ANNEX A – 2020 BOARD OF DIRECTORS

CHAIRPERSON OF THE BOARD OF DIRECTORS

CAROLINE CURRAN

Chair since: 2019 - Current term: September 1, 2019 to August 31, 2023

Committee: Chair of the Executive Committee

Caroline Curran has held a series of executive-level positions since her public service career began in 1995. Notably, at the TBS, she has held the positions of Special Advisor to the Chief Human Resources Officer responsible for the wellness and mental health portfolios, Assistant Deputy Minister of the Pensions and Benefits Sector and the Executive Director of the Human Resources Division. From 2015 until her retirement in 2019 Caroline was the co-chair of the Joint Task Force on Mental Health Technical Committee, comprised of representatives of both bargaining agents and the Employer.

DIRECTORS

APPOINTED BY THE EMPLOYEE SIDE

DANIEL BOULET

Director since 2020

Current term: March 18, 2020 to March 17, 2024

Committee: Serves on the Audit and Finance Committee

Daniel Boulet began his career in 1982 with Transport Canada's civil aviation branch. He served in many roles at Local 2228 of the International Brotherhood of Electrical Workers including Executive Board Member, Assistant Business Manager and finally Business Manager / Financial Secretary until his retirement in July 2017.

EDWARD (EDDIE) GILLIS

Director since 2012

Current term: September 12, 2018 to September 11, 2021

Committee: Vice-Chair of the Board and serves on the Executive Committee

Edward (Eddie) Gillis has spent 25 years in the labour relations field. He is the Chief Operating Officer and Executive Secretary of the Professional Institute of the Public Service of Canada where he leads the Institute's management team and staff compliment.

JOHN GORDON

Director since 2012

Current term: May 1, 2020 to April 30, 2024

Committees: Chairs the Appeals Committee, and serves on the Audit and Finance Committee and the Executive Committee

John Gordon has worked for the public service since 1974 and has held numerous positions within the Public Service Alliance of Canada, including that of National President from 2006 to 2012.

SETH SAZANT

Director since 2018

Current term: July 10, 2018 to July 9, 2021

Committee: Serves on the Appeals Committee

Seth Sazant joined the Public Service Alliance of Canada in 2006. Since that time, he has been working in the negotiations section and is currently working as a Negotiator/Pension and Benefits Officer. Much of his work has been focused on extended health and dental plans.

DIRECTORS

APPOINTED BY THE EMPLOYER SIDE

PIERRETTE BOYER

Director since 2013

Current term: March 16, 2020 to March 15, 2024

Committees: Vice-Chair of the Board and serves on the Executive committee and the Appeals Committee

Pierrette Boyer retired from the public service in September 2013. Her last position was Chief of Staff and Special Advisor to the Assistant Deputy Minister of the Pensions and Benefits Group at TBS. During her public service career, Pierrette developed and implemented pension policies and programs as well as pensions and benefits communication products.

ROBERT HART

Director since 2019

Current term: June 28, 2019 to June 27, 2023

Committee: Serves on the Audit and Finance Committee

Robert Hart has spent most of his career working in the group benefits industry both in the private and public sectors. Most recently he was Expert Advisor, Pensions and Benefits Sector, TBS where he had oversight responsibilities with respect to the Canadian Armed Forces Group Insurance Plan (SISIP) and the RCMP Group Life and Disability Insurance Plans.

TAMMY LABELLE

Director since 2016

Current term: August 1, 2017 to July 31, 2020

Committees: Serves on the Appeals Committee and the Executive Committee

Tammy Labelle has a demonstrated track record in managing and leading various files in the area of public service benefits and compensation. In addition to her Board duties, she serves as Chief Information Officer, Digital Services Branch at Public Services and Procurement Canada.

WENDY LOSCHIUK

Director since 2018

Current term: April 2018 to April 2021

Committees: Chairs the Audit and Finance Committee and serves on the Executive Committee

Wendy Loschiuk retired from the Office of the Auditor General of Canada (OAG) in 2015 where she was an Assistant Auditor General. After joining the public service in 1979, Wendy started her career with the Department of National Defence, reviewing programs and spending, before moving to the Treasury Board of Canada Secretariat and the OAG.

REPRESENTING PENSIONERS

JACQUES LAMBERT

Director since 2017

Current term: August 1, 2017 to July 31, 2020

Committees: Serves on the Appeals Committee and the Audit and Finance Committee

Before retiring in 2009, Jacques Lambert served in the public service for 41 years with several departments, including Veterans Affairs Canada and the Ministry of Employment and Immigration. For more than 15 years, Jacques has been actively involved in national committees and on management boards.



ANNEX B – 2020 STAFF OF THE ADMINISTRATION AUTHORITY

JOHN LEWIS

Chief Executive Director

MANON LEBLANC

Chief Operations Officer

DANIEL LOCKWARD

Chief Financial and Compliance Officer

NATALIE LADOUCEUR

Senior Director, Communications and Member Services

CHELSEA AUCLAIR

Director, Appeals and Member Services

ARIANE MONTESANO

Director of Communications

CONOR STEINBERG

Director, Reporting, Research and Risk Management

ROBERT CHAPMAN

Director, Program Compliance

OMEGA HELISO

Health Economics and Reporting Analyst

AMANDA GREENFIELD

Compliance Analyst

KATIA DAIGNEAULT

Appeals Analyst

DANIELLE VEILLETTE

Office Manager

VACANT

Communications Advisor
Senior Compliance Analyst
Project Manager



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