



2025 Renewal

The 2025 renewal of the FNEEQ-CSN group insurance contract will see major changes. Following the meeting of the unions enrolled in group insurance policy 1008-1010 (the RSA) in Québec City on September 5-6, 2024, the unions accepted the recommendations that came out of the meeting, which will have the effect of containing rate increases for 2025, but also reducing some coverage. Bear in mind that in 2023, the RSA mandated the FNEEQ-CSN insurance and pensions committee (CFARR) to analyze the coverage and propose formulas or changes at the fall 2024 RSA meeting to reduce the financial impact of the planned rate increases.

The changes are described below, but it should be noted first of all that one of them involves removing coverage for drugs not on the [Régie de l'assurance maladie du Québec \(RAMQ\) list](#) from Module A of the health plan. **To compensate for this major change, members who have been enrolled in Module A for less than 12 months will be able to switch to Module B during the annual open enrolment period in November. This exception applies this year only.** See details below.

Here are the changes that will take effect on January 1, 2025:

Health insurance - Module A

Change	Reduction of planned increase
Coverage rate reduced from 70% to the minimum percentage under the RAMQ's general drug insurance plan (currently 68%).	11.90%
Drug coverage limited to drugs on the RAMQ list	
Module A changed to cover only: <ul style="list-style-type: none"> • Hospitalization • Drugs on the RAMQ list • Ambulance • Artificial limbs • Travel insurance and trip cancellation insurance 	
Annual drug reimbursement threshold changed to apply per adult participant rather than per certificate (dependent children's benefits will be counted with those of the participant).	



Health insurance - Module B

Change	Reduction of planned increase
Annual drug reimbursement parameters changed to increase the threshold from \$2,500 per certificate to \$4,500* per participant; annual drug reimbursement threshold changed to apply per adult participant rather than per certificate (dependent children's benefits will be counted with those of the participant).	4.04%
Annual reimbursement ceilings per block for health professionals in Module B reduced to 50% of Module C, i.e. a maximum of \$600 (instead of the current \$800) for Block 1 and \$900 (instead of the current \$1,200) for Blocks 2 and 3.	

*Each participant will therefore pay a maximum of \$900, given the 80% reimbursement rate (20% co-pay).

Health insurance - Module C

Change	Reduction of planned increase
Reimbursement percentage for Module C reduced from 90% to 85% for all coverage.	4.32%
Annual drug reimbursement parameters changed to increase the threshold from \$2,500 per certificate to \$4,000* per participant; annual drug reimbursement threshold changed to apply per adult participant rather than per certificate (dependent children's benefits will be counted with those of the participant).	

*Each participant will therefore pay a maximum of \$600, given the 85% reimbursement rate (15% co-pay).

Health insurance - module adjustment factor

Change
CFARR was mandated to adjust the 2025 renewal rates to modify the ratios taking into account the changes adopted after the consultation (the ratio will be 0.69 for Module A, 1 for Module B and 1.28 for Module C).*

*This means that the reductions described above apply overall, to total premiums collected, not to each of the three modules.



Dental insurance

Change	Reduction of planned increase
No change to dental coverage	0%

Disability insurance

Change	Reduction of planned increase
Coverage percentage reduced from 80% to 75% of net salary and health insurance premium no longer included in definition of net salary for short- and long-term disability insurance*	Short-term: 4%
Elimination period for entitlement to waiver of life insurance and long-term disability insurance premiums increased from 30 days to 1 year	Long-term: 6.79%
\$5,000 per month maximum for short- and long-term disability insurance benefits removed from the insurance contract (this change has no effect on the premium)	

*The change in percentage will apply to any new disability commencing on or after January 1, 2025.

Life insurance

Change	Reduction of planned increase
No change to life insurance coverage	0%



Changes to maintenance of insurance coverage during leave

Text of current insurance contract	Changes
<p>2.7 Maintaining insurance during leaves</p> <p>Subject to the provisions of the collective agreement, participants who are on leave remain insured, with payment of premiums, under the Health Insurance and Dental Care Insurance benefits. They may also maintain participation, at the beginning of the leave, in one or several of the other benefits by paying the full premium, including the employer’s share. The Life and Disability Insurance benefit amounts and the amount of premiums for these insurance benefits are based on the participant’s basic annual salary at the beginning of the leave. No disability benefits will be paid prior to the scheduled end date of an unpaid leave.</p> <p>Participants who have not maintained all their insurance benefits will not be entitled to reinstate the insurance benefits they held at the beginning of the leave until they are once again actively at work. The insurance benefits will be reinstated without evidence of insurability if the participant submits an application within 30 days of being actively at work.</p> <p>Participants who are on a voluntary reduced workweek program remain insured, with payment of premiums, under the Health Insurance and Dental Care Insurance benefits. Such participants may also maintain their Life and Disability Insurance coverage in force. The Life and Disability Insurance benefit amounts and the amount of premiums for these insurance benefits are based on the participant’s basic annual salary immediately before participating in the program.</p>	<p>2.7 Maintaining insurance during leaves</p> <p>Subject to the provisions of the collective agreement, participants who are on leave remain insured, with payment of premiums, under the Health Insurance and Disability Insurance benefits. They may also maintain all their current coverage at the beginning of the leave. In all cases, the full premium must be paid.</p> <p>The Life and Disability Insurance benefit amounts and the amount of premiums for these insurance benefits are based on the participant’s basic annual salary at the beginning of the leave. No disability benefits will be paid prior to the scheduled end date of an unpaid leave.</p> <p>Participants who have not maintained all their insurance benefits will not be entitled to reinstate the insurance benefits they held at the beginning of the leave until they are once again actively at work. The insurance benefits will be reinstated without evidence of insurability if the participant submits an application within 30 days of being actively at work.</p> <p>2.8 Voluntary Reduced Workweek Program (VRWP)</p> <p>Participants who are on a voluntary reduced workweek program remain insured for all benefits. The Life and Disability Insurance benefit amounts and the amount of premiums for these insurance benefits are based on the basic annual salary the participant would have received, if they were not participating in such programs. The disability start date during</p>



Text of current insurance contract	Changes
	participation in the VRWP is the same as that used in the collective agreement to determine a salary insurance period.
<p>2.8 Salary advance or deferred salary leaves and phased retirement</p> <p>Insurance of participants who take part in a salary advance or deferred salary leave program, or in a progressive retirement program, remains in force. The Life and Disability Insurance benefit amounts and the amount of premiums for these insurance benefits are based on the basic annual salary the participant would have received, if they were not participating in such programs. Any disability that occurs during such a leave is deemed to start on the same date as that used by the collective agreement to determine a salary insurance period.</p>	<p>2.9 Salary advance or deferred salary leaves and phased retirement</p> <p>Insurance of participants who take part in a salary advance or deferred salary leave program, or in a progressive retirement program, remains in force for all benefits. The Life and Disability Insurance benefit amounts and the amount of premiums for these insurance benefits are based on the basic annual salary the participant would have received, if they were not participating in such programs. Any disability that occurs during such a leave is deemed to start on the same date as that used by the collective agreement to determine a salary insurance period.</p>
<p>2.9 Short-term layoff</p> <p>Participants who have been laid off in accordance with their collective agreement, or with provisions set out by law, remain eligible for insurance. The amount of coverage to which they are entitled is based on the salary they would have received had they not been laid off. However, participants may decrease their amount of coverage based on their reduced salary following the layoff by sending a written notice to the employer within 30 days following the layoff. No other requests will be accepted.</p>	<p>2.10 Short-term layoff</p> <p>Participants who have been laid off in accordance with their collective agreement, or with provisions set out by law, remain insured, with payment of premiums, under the Health Insurance and Disability Insurance benefits. They may also maintain all their benefits at the beginning of the leave. In all cases, the total required premium must be paid; the amount of coverage to which they are entitled is based on the salary they would have received had they not been laid off. However, participants may decrease their amount of coverage based on their reduced salary following the layoff by sending a written notice to the employer within 30 days following the layoff. No other requests will be accepted.</p>
<p>2.10 Maintenance of insurance during layoffs, strikes, lockouts or dismissals</p> <p>For participants who are temporarily absent from work due to a layoff, strike or lockout, insurance remains in force provided the regular premiums continue to be paid. The</p>	<p>2.11 Maintenance of insurance during layoffs, strikes, lockouts or dismissals</p> <p>For participants who are temporarily absent from work due to a layoff, strike or lockout, insurance remains in force provided the regular premiums continue to be paid. The dismissal of</p>



Text of current insurance contract	Changes
dismissal of a participant that is legally challenged or contested by grievance is deemed, for the purposes of insurance, to be a temporary layoff ending on the date of final ruling on the case.	a participant that is legally challenged or contested by grievance is deemed, for the purposes of insurance, to be a temporary layoff ending on the date of final ruling on the case.

Other changes

Following the consultation with the unions, CFARR was mandated by the RSA to modify the life insurance plan to extend eligibility for the optional life insurance benefit to people aged 70 and over. Participants will be able to keep a maximum of two \$25,000 units, whether or not they had optional life insurance before age 70, without exceeding the total amount of coverage held before age 70.

The RSA also mandated the RSA to adjust clause 6.8 of the insurance contract to take into account, in the short-term disability plan, the amount payable by the Québec Pension Plan (QPP), based on the new QPP terms and conditions applicable since January 1, 2024. This adjustment, which is retroactive to January 1, 2024, follows changes to the QPP aimed at improving the financial situation of disabled workers introduced by the Québec government's 2023-2024 budget. An equivalent adjustment was made in the 2024 renewal for the long-term disability plan (clause 7.8 of the insurance contract). For more information on these changes to the Québec Pension Plan, see the [Retraite Québec website](#).

Other mandates given to CFARR by the RSA

Here are the other mandates that the RSA gave CFARR at its meeting on September 5 and 6:

- Consider the tendering process for management of funds on deposit by a financial institution and report back at the September 2025 meeting;
- In collaboration with the AREF, consider the tendering process for choosing an insurer and report back at the September 2025 meeting;
- Conduct an information campaign on the benefits of using the Picard & Desjardins pharmacy to reduce the cost of maintenance drugs, and report back at the September 2025 meeting;
- Talk to the CSN’s general bargaining coordinating committee (CCGN) about creating a union pharmacy.



Premiums as of January 1, 2025

After consulting the unions enrolled in group insurance policy 1008-1010, the current premiums will be adjusted as of January 1, 2025. These numbers reflect the decreases in coverage described above and the changes to the rate structure adopted in 2021:

- A weighted average effective increase of 11.91% for health insurance;
- 6.5% increase for dental;
- Premium freeze (0%) for basic life insurance, dependents’ life insurance, optional life insurance and critical illness insurance, and extension of the 50% premium holiday for all life insurance coverage;
- A 0.80% effective increase for short-term disability coverage;
- 8.76% effective increase for long-term disability (including a reduction to 7.4% from the 9.2% premium holiday introduced in 2024).

Health and dental insurance premium adjustments

CFARR reminds you that, following the 2021 consultations with the unions enrolled in group insurance policy 1008-1010, the premium ratio between the coverage options listed below, which effectively merge the couple and family plans for both health and dental coverage, will continue to be adjusted according to the new ratios below, with phased implementation of the changes that began with the 2022 renewal, and will take full effect in 2025:

COVERAGE	INDIVIDUAL	SINGLE-PARENT	COUPLE	FAMILY
HEALTH ORIGINAL RATIO	1.00	1.70	2.00	2.70
DENTAL ORIGINAL RATIO	1.00	1.88	2.00	2.88
HEALTH FUTURE RATIO	1.00	1.50	2.40	2.40
DENTAL FUTURE RATIO	1.00	1.90	2.40	2.40



Therefore, participants who currently have couple coverage under policy 1008-1010 will be switched to family coverage by default. However, they could opt to switch to individual coverage during the annual open period from November 1 to 30, 2024, provided their spouse is eligible for a group insurance plan and can terminate their exemption and return to their own group insurance policy.

If two spouses are both participants in the FNEEQ group insurance plan, both can exercise this option.

The documentation on the 2025 renewal of the FNEEQ insurance plan is available at the following links:

- [2025 coverage summary](#)
- [2025 insurance premium calculator](#)

Evolution of premiums, 2015-2025

The following table shows the changes to our group insurance premiums by coverage type during the 2015-2025 period:

COVERAGE	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Health	0%	0%	A 2.9% B 5.3% C 5.8%	0%	A 0.85% B 8.11% C 8.86%	A 5.8% B 6.05% C 6.05%	7.5%	3.5%	10.5%	14%	11.91%
Dental	-8%	0%	-5%	0%	0%	0%	0%	5%	0%	9%	6.5%
Basic life	-7%	0%	-20%	0%	0%	-15%	-4%	-5%	-12.4%	0%	0%
Dependent life	-10%	0%	-19.5%	0%	0%	0%	0%	-5%	0%	0%	0%
Optional life	0%	0%	-10%	0%	0%	-15%	0%	-5%	0%	0%	0%
Critical illness	0%	0%	-30%	0%	0%	-15%	-10%	-5%	0%	0%	0%
Short-term disability * private colleges and universities	0%	0%	-10%	0%	0%	2.5%	-3%	-5%	-15%	0%	0.8%
Long-term disability	0%	0%	-9.9%	0%	0%	2.5%	-2.5%	-10%	0%	10%	8.76%



Annual period for changes to coverage

Since the modular insurance plan was introduced in January 2013, members have been able to increase their health insurance coverage (Module A, B or C) and/or their optional dental care coverage (Option 1 or 2) once a year, under certain conditions. You can therefore change each of the above types of coverage this fall and the changes will come into effect on January 1, 2025.

As in previous years, the annual enrollment period is open from **November 1 to 30** for changes that will come into effect at the beginning of 2025.

During this period, if you wish to increase your level of health insurance coverage, you can upgrade to Module B or C if you have Module A in 2024, or you can upgrade to Module C if you have Module B in 2024. **Exceptionally this year, in view of the significant changes made to Module A, it will be possible to upgrade from Module A to B even if the participant has not completed the usual minimum enrolment period of 12 months.**

As well, if you would like to add dental insurance to your plan, you can choose Option 1 or 2. If you currently have Option 1, you can upgrade to Option 2.

Plan members who have been enrolled in the plan for at least 36 months will also be able to downgrade their coverage.

You can opt out of dental insurance if you have been enrolled in Option 1 or 2 for at least 36 months; if you have been enrolled in Option 2 for at least 36 months, you can downgrade your coverage to Option 1, irrespective of the health insurance module you have selected for 2025.

Individuals who are exempt from health insurance (for example, those covered under their spouse's group insurance policy) can opt for Option 1 or Option 2 dental insurance (for a minimum period of 36 months), if they wish.

Finally, since the couple plan will be eliminated after December 31, 2024 and the premium for the family plan is more than double the premium for individual coverage, participants who currently have the couple plan can switch to individual coverage, provided their spouse is eligible for a group insurance plan and for an termination of exemption under their own group insurance policy. If two spouses are both participants in the FNEEQ group insurance plan, both can exercise this option.

Note that you will still be able to change your coverage status at any time in accordance with the usual contract terms, i.e. after a life event.



To request a change in coverage, please fill out the “Group insurance application or modification” form and submit it to your employer by November 30, 2024. You can find the forms online at the following addresses:

CEGEPs:

[C1008-0A Application - Modification to group insurance - Dynamique](#)

Private colleges and universities:

[C1010-0A Application - Modification to group insurance - Dynamique](#)

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