

The Department of Education is pleased to support the implementation of medical benefits that began on October 1, 2024 for the early learning and child care workforce. The Early Learning and Child Care (ELCC) Medical Benefits Program is managed by the Association of Early Childhood Educators NL (AECENL), in collaboration with Dougan Insurance Group. This program is available to Early Childhood Educators (ECEs), ELCC employees, Licensees/owners and Family Child Care Service Providers working in regulated child care service participating in the [Operating Grant Program](#) (OGP).

The medical benefits program supports the recruitment and retention of early learning professionals as the Provincial Government continues to increase the number of early learning and child care spaces throughout Newfoundland and Labrador. A high quality child care system requires a high quality workforce. Medical benefits directly support the wellbeing of early childhood educators and other staff working in the ELCC sector.

Frequently Asked Questions

Who is eligible to avail of the ELCC Medical Benefits Program?

- Medical benefits are available to employees at regulated child care services participating in the Operating Grant Program, including:
 - Early childhood educators;
 - Trainee early childhood educators;
 - Licensees/owners;
 - Other staff working in child care services; and
 - Regulated Family Child Care Service Providers.
- Employees must be working a minimum of 20 hours per week (average) to be eligible for the program.
- Employees must be working a minimum of 3 months in a regulated child care service to be eligible for the program.
- Newcomer employees at child care services can avail of this program as long as they are covered under the Provincial Medical Care Plan. For more information please visit: [Medical Care Plan \(MCP\) - Health and Community Services \(gov.nl.ca\)](#) - Section 3. International Workers.
- Family Child Care Service Providers may join the medical benefits program at any time during the contract period with Dougan Insurance Group.
- Family Child Care Service Providers must be operating their regulated service for a minimum of three months.

What are the details of the Medical Benefits Plan?

Each child care service has the option of choosing the Base Plan or the Base Plan + Dental through Blue Cross. The following pages show the coverages included on the plan and the corresponding premium payments for single, family or waived coverage. Note: Waived coverage is for employees who already have health & dental through a spousal plan. Further details will be provided upon enrollment. If you have specific questions about the plan(s), please contact Dougan Insurance Group at admin@douganinsurancegroup.ca.

Base Plan Highlights:

Life Insurance

- Flat \$10,000, Reduces by 50% at age 65, terminates at age 70
- Non-Evidence Maximum of \$10,000; Plan Max of \$10,000

Accidental Death & Dismemberment

- Equal to Life Benefit

Dependent Life

- \$5,000 spouse / \$2,500 child

Extended Health Care

- 80% Co-Insurance for Drugs (Pay Direct Drug Card)
- No annual drug maximum
- 100% Co-Insurance for Health Care
- \$500 per practitioner per year
 - Practitioners include – Chiropractor, Naturopath, Licensed Physiotherapist, Acupuncturist, Registered Massage Therapist, Psychologist/ Social Worker, Speech Therapy, Osteopath and Chiropodist
- Medical Supplies and Services
 - Hearing Aids - \$700 per 3 years
 - Orthotics – \$300 maximum per year
 - Orthopedic Shoes – \$200 maximum per year
 - Diabetic Supplies (reasonable & customary)
 - CPAP machines (reasonable & customary)
- Vision Care
 - \$250 every 24 months
 - One (1) eye exam every 24 months
- Out of Country Coverage
 - 100% Co-Insurance, 180 day trip duration (60 days if over age 75)
 - \$2,000,000 per year maximum for emergency services

Employee Assistance Program

- Blue Cross In-Confidence program; resource for staff and their families 24/7

OPTIONAL DENTAL ADD ON:

- 80% Co-Insurance for Basic/Preventative services (including periodontic & endodontic coverage)
- \$1,500 maximum per calendar year
- 6 Month recall & current fee guide
- 50% Co-Insurance for Major Restorative Treatment (\$1,500 max combined with Basic)

Notes:

- No medical evidence is required to join this program and there are no pre-existing conditions that would impact health coverage. The only time medical evidence is required is if an employee applies to join the plan as a late applicant – meaning that they are offered the plan when they are hired and then do not join at the end of their 3 month probationary waiting period but try to join sometime later. Any employee who joins when the plan rolls out (or when their centre is added) would not require health evidence and all new employees that join on their eligibility date do not require health evidence.
- See below for Cost Per Employee breakdown.

What is the application/enrollment process for the ELCC Medical Benefits Program?

- Medical Benefits Program Enrollment:
 - The employer can decide to enroll in the medical benefits program. When an employer chooses to enroll in the medical benefits program, the employer selects the plan (Base Plan or Base Plan+Dental). Employees of the centre may choose to opt in or out of the selected program. Employees cannot select a medical benefits program that differs from the one chosen by their employer.
 - If an employer decides not to participate in the medical benefits program, employees will not be able to access it.
 - Services must contact Dougan Insurance Group at admin@douganinsurancegroup.ca. A master application will be sent via DocuSign, along with a data sheet to populate the required information for each employee (name, date of birth, hire date, occupation, and email address). When the completed application, along with all supporting documentation, has been received and processed Blue Cross will send emails to each employee inviting them to enroll. Dougan Insurance Group will send periodic updates to services on the status of this process. Please note: the enrolment process typically takes two weeks to complete, with coverage beginning on the 1st of the next month.
- OGP Funding:
 - **Regulated child care centres** will be required to complete the ELCC Medical Benefits Program – Monthly submission. This monthly submission is used to determine the number of employees at the service that are opting in or out of the plan and to determine the monthly reimbursement for the service. The spreadsheet must be returned to regional OGP teams via email with the completed Wage Grid and Enrollment Stats Sheet.
 - **Family Child Care Service Providers** will email their **Agency Monitors** at Family and Child Care Connections one of the following statements:
 - I opt into the ELCC Medical Benefits Program
 - I opt out of the ELCC Medical Benefits Program

If choosing to opt into the ELCC Medical Benefits Program, the Family Child Care Service Provider is to notify Dougan directly.

The Agency Monitors submit the FCCSP's responses on their caseload to the FCC-OGP email. Reimbursement for the ELCC Medical Benefits Program is included with the FCC-OGP Quarterly Payments.

What is the funding amount that child care centres receive for each eligible employee? Do employees pay a portion of the premium?

- The Department of Education is funding 60% of the premiums for **single individual** medical benefits – not only making the plan accessible to the sector but more affordable for ELCC employees. The remaining 40% (employee portion) of the premiums is not covered by the department. Employers will have the discretion to split the non-funded portion with their staff. Additional products such as dental and family coverage may be added at an additional cost to the employee.
- Base plan total **monthly** cost is **\$93.54** per employee for **single individual coverage**.
 - OGP will provide 60% = **\$56.12** (employer contribution)
 - Employees will be responsible for the remaining 40% = **\$37.42** (employee contribution)
 - The \$56.12 employer contribution will be paid to the ELCC Medical Benefits Plan the service has chosen. For example, if a service chooses family coverage, each employee who opts into the medical benefits program will be given under the OGP, **\$56.12** towards the family coverage amount. The employee will pay the remaining amount which will be higher than the noted employee contribution noted above for single individual coverage.
 - It is at the discretion of employers if they cost share premiums with employees. Services may split the non-funded portion of the premium with their employees. This cost share would have to be set up via payroll deduction from employees. For example, a child care service can split the non-funded portion of the premiums (40% = \$37.42) with employees 50/50. This would cost both employer and employee \$18.71 per month.
 - Monthly reimbursement for child care centres is based on approved months of operation as per their current Licence. Monthly reimbursement to the child care centre will not be provided to months not listed on the current Licence.

What is the funding amount that Family Child Care providers will receive?

- The Department of Education is providing 60% of the premium cost while Family Child Care Service Providers are required to contribute the remaining 40%.
- Base plan total **monthly** cost is \$93.54 per Family Child Care Service Provider for **single individual coverage**.
 - OGP will provide 60% = **\$56.12** (employer contribution)
 - Providers will be responsible for the remaining 40% = **\$37.42** (employee contribution)
- The **\$56.12** contribution may be used towards family coverage. Please note that when selecting family coverage, the amount of the 40% contribution will increase as the cost of the family program is higher than single coverage.
- Monthly reimbursement for Family Child Care Service Providers is based on approved months of operation as per their current Approval Certificate. Monthly reimbursement to the Family child care provider is not provided to months not listed on their current Approval Certificate.

How is funding for the Medical Benefits Plan distributed to child care centres?

- When the OGP team receives the completed ELCC Medical Benefits Program – Monthly Submission, payments are processed for the employer portion. Payments are sent to the service as part of their next scheduled Wage Grid top up payment.
- OGP funding covers \$56.12.
- Child care centres will calculate and withhold employee service premiums at each payperiod.
- Each month Blue Cross will provide an invoice for the total group benefits premiums for that child care service.
- Child care centres will be required to calculate and remit contributions to Blue Cross each month.
- Blue Cross will provide a monthly statement to services.

How will funding for the Medical Benefits Plan be distributed to Family Child Care Service Providers?

- Agency Monitors submit the Family Child Care Service Provider's responses opting in or out of the program to FCC-OGP email. Reimbursement for the ELCC Medical Benefits Program is completed with the FCC-OGP Quarterly Payments.
- Family Child Care Service Providers will calculate their individual monthly premiums.
- Each month Blue Cross will provide an invoice for the total group benefits premiums for that family child care service.
- Family Child Care Service Providers will be required to calculate and remit contributions to Blue Cross each month.
- Blue Cross will provide a monthly statement to services.

How do I submit claims?

- Most healthcare practitioners/pharmacies are able to direct bill the insurance company with your insurance certificate information. If you do have to pay at point of sale, individuals can submit claims via the Blue Cross mobile app, online, direct mail, or through the Dougan Insurance Group office.
- Blue Cross mobile app: <http://www.medaviebc.ca/en/members/medavie-blue-cross-mobile-app>
- Dougan Insurance Group contact email: admin@douganinsurancegroup.ca

Can employees who are temporarily laid off or on maternity leave stay on the plan?

Yes. Billing from Blue Cross to your centre will remain unchanged; however, centres may want to have the employee submit post-dated cheques or e-transfer for either their portion or all of the premium.

How do I terminate employees from our plan?

- Send Dougan Insurance Group an email indicating the employee's name and last day worked to process a termination.
- Services are required to report any staffing changes to the OGP team in their region through their monthly submission.

What is the process if I hire an employee from another centre?

- If an employee moves from one centre to another, the previous centre is responsible for terminating them off their plan. Centres are able to waive the waiting period and add employees to their plan right away, or they can have employees work the minimum 3 months waiting period.

How do I access my insurance card/certificate information?

- Once enrolled, you can access your insurance card/certificate information online or through the Blue Cross mobile app. You are also able to get a PDF of your information if you wish to print it out. Information on using the mobile app can be found at <http://www.medaviebc.ca/en/members/medavie-blue-cross-mobile-app>

Will services not on the OGP have access to the plan?

- Yes. Regulated child care centres that are not on OGP and Family Resource Programs can access the ELCC Medical Benefits Program; however, funding will only be provided to services on the OGP.
- Services going through the Capacity Program may access the ELCC Medical Benefits Program but are not eligible for funding until actively on the OGP.

My service already offers a medical benefits plan. Can we switch to the ELCC Medical Benefits Program?

- Yes. Services that already have a medical benefits plan in place can switch to the ELCC Medical Benefits Program. Dougan Insurance Group will facilitate matching the benefits product(s) provided by the current plan provider to ensure that employees will not be losing plan benefits. Dougan Insurance Group will even handle termination of the existing plan to ease any administrative burden.
- Funding will be provided to services on the OGP that avail of the ELCC Medical Benefits Plan, making this plan more affordable for employers, employees, and Family Child Care Service Providers.

What is AECENL's role in the ELCC Medical Benefits Program?

- As sponsor of the medical benefits program, AECENL is working with Dougan Insurance Group to manage the benefits package by reviewing the plan design and informing future renewals of the plan. AECENL will support the ELCC sector to navigate implementation of the medical benefits program.

Who do I contact with questions about the ELCC Medical Benefits Program?

- Questions about enrollment in the ELCC Medical Benefits Program: Dougan Insurance Group
 - Email: admin@douganinsurancegroup.ca
 - Phone: (902) 626-2361
 - Address: 8 Camburhill Court Unit 1 Charlottetown, PE C1E 0E2
- Questions about funding can be directed to your regional OGP team:
 - Family Child Care OGP – FCCOGP@gov.nl.ca
 - Metro OGP – MetroOGP@gov.nl.ca
 - Central East OGP – CentralEastOGP@gov.nl.ca
 - Western OGP – WesternOGP@gov.nl.ca
 - Labrador OGP – LabradorOGP@gov.nl.ca
- General information: Association of Early Childhood Educators NL (AECENL)
 - Email: admin@aecenl.ca
 - Phone: (709) 579-8993

Links and resources:

Dougan Insurance Group: <https://www.douganinsurancegroup.ca/>

- Dougan Insurance Group is an independently owned and operated Group Benefits Advisory firm servicing clients located in Atlantic Canada for over 20 years. Their personal approach, knowledge, and industry expertise has helped them to earn and retain their client's trust and confidence over the years with client service being their top priority. With existing clientele within the Early Learning sector, they have the proven expertise of designing and implementing a Benefits plan solution that is suitable to meet the needs of early learning professionals across Newfoundland and Labrador.

Association of Early Childhood Educators NL (AECENL): <https://www.aecenl.ca/>

Blue Cross: <https://www.medaviebc.ca/plans>

Department of Education: <https://www.gov.nl.ca/education/childcare/operating/>

News releases: <https://www.gov.nl.ca/releases/2024/education/0528n04/>



Cost Per Employee

Association of Early Childhood Educators NL					Cost Illustration by Employee			
					Blue Cross	Blue Cross	Blue Cross	
BASE PLAN					Single	Family	Waived	
LIFE INSURANCE								
	volume				10,000	10,000	10,000	
	rate per \$1,000				0.170	0.170	0.170	
Monthly Premium					1.70	1.70	1.70	
AD&D								
	volume				10,000	10,000	10,000	
	rate per \$1,000				0.028	0.028	0.028	
Monthly Premium					0.28	0.28	0.28	
DEPENDENT LIFE								
	# of units				0	1	1	
	cost per unit				1.75	1.75	1.75	
Monthly Premium					0.00	1.75	1.75	
HEALTH CARE								
	single units	1			91.09	0.00	0.00	
	family units	1			0.00	204.52	0.00	
Monthly Premium					91.09	204.52	0.00	
EFAP								
	# of units				1	1	1	
	cost per unit				2.45	2.45	2.45	
Monthly Premium					2.45	2.45	2.45	
BASE PLAN TOTAL MONTHLY COST					93.54	208.95	6.18	
OPTIONAL DENTAL ADD ON								
DENTAL CARE								
	single units	1			34.60	0.00	0.00	
	family units	1			0.00	60.44	0.00	
Monthly Premium					34.60	60.44	0.00	
BASE AND DENTAL TOTAL MONTHLY COST					130.12	271.14	6.18	

Note: These monthly premiums DO NOT include the funding subsidy from the Operating Grant Program. Premium rates are in place until February 2026.