



# PEIRTA Newsletter

Prince Edward Island Retired Teachers' Association

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## From the President

Well, spring looks like it has finally started to make an appearance after a record breaking, unbelievable winter!

The Executive of the PEIRTA really enjoyed attending the annual spring socials. Once again we had the chance to renew acquaintances with former colleagues and friends. Also, we make sure you have the latest updates on our pension and health plans, as well as other information from pertinent speakers.

On May 3 I was invited by the PEITF to bring greetings from the RTA as they hosted the annual Pre-Retirement Seminar at the Rodd Charlottetown Hotel. It was a wonderful opportunity to see some of my former teaching friends and meet other teachers who are now planning their retirements as well. I encouraged them to join our association when they retire and to make sure when that first happens that they take some time to "smell the roses," relax,

and enjoy what they now have time to do!

The following week, on May 9, I was invited to attend the Senior Class Awards Ceremony at UPEI. It was a very enjoyable event with a host of very dedicated and hard working students. I was thrilled to meet our Retired Teachers' Association graduate prize winner, Gillian Hutchinson. She received her BMUS last year and now her BED. I was impressed with her comment that children are her biggest inspiration. "I want to be an amazing teacher—the best I can possibly be, and the more I learn from the students, the more I want to learn to help them," she said. We wish her all the best in her future endeavors!

Another invitation I am pleased to accept as President of the RTA is from the English Language School Board of P.E.I. to honor retiring employees on Saturday, May 31, at the Loyalist In Summerside.

Next I'll be "leaving on a jet plane" headed to Ottawa to attend the annual meeting of the Canadian Association of Retired Teachers. Dr. Jim MacAulay, our Eastern Canadian Representative on the Executive, will also be attending, and I hope he will acknowledge me! It is a fantastic opportunity to sit at the



**President Sheridyth MacNeill**

table with representatives from every province. We are 1007 members now on P.E.I., so you can just imagine the total number represented across the country. I look forward to bringing back a summary from this meeting for the newsletter in the fall and to our AGM.

Hoping each and every one of you have an enjoyable summer with family and friends, and that you circle your calendar to attend our AGM on November 6. It will be held this year in St. Eleanors' at the Royal Canadian Legion with a fabulous meal and important topics you need to hear!!!! See you there.

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[www.peirta.com](http://www.peirta.com)

## From the Editor

I'm doing a survey. When the HST was introduced and there was much controversy over what would be exempt from the PST portion of the tax, especially with reference to home heating options, did anyone predict that as we neared time for the next election, changes would be made? If so, let me know. Glad to hear that Minister Sheridan is concerned about taxes being "fair and equitable." Hope he has the same attitude toward pensions and drug coverage.

I have a confession to make. I have to take back a statement that I have made repeatedly in this newsletter. Granted, I was only repeating what I had been told, and believed that what I said was true, but I was still inadvertently spreading misinformation.

A number of people have worked very hard at understanding and ex-

plaining how the integration of our two drug plans, Medavie Blue Cross and DCAP, works. I have worked hard at it, and thought I had it sorted out. Right now, however, I have decided that I will never understand it, that the whole system is so convoluted that we are not meant to understand it, and that I will stop arguing with people who tell me something that I don't understand but can't instantly and definitively prove wrong.

I have been under the impression, as others have been, that if a drug is covered by both DCAP and by our plan, then those who are over age 65 shouldn't pay anything when they pick up prescriptions. I have learned that this is not always true. Usually, but not always! For more information, please read the article on page 3.

Joyce has spoken briefly at our spring socials about the fact that approximately 15 retired teachers

have received pension overpayments. Terry Hogan, Manager, Pensions and Benefits, recently met with the RTA Executive and addressed this issue. For information from Mr. Hogan on pension verification, please see page 4. Also, as Joyce has made clear, if you turn 65 and suddenly see a significant increase or decrease in your income, you should contact Pensions and Benefits at 368-4200 for clarification.

Have a great summer!

*PEIRTA Executive does not necessarily agree with opinions expressed in material authored by those other than official representatives of the PEIRTA, and information about opportunities offered by others is for information only—no endorsement is implied.*

*Next issue early October. Submit material to [margstewart@pei.eastlink.ca](mailto:margstewart@pei.eastlink.ca).*

*If you wish to read this newsletter online instead of receiving a hard copy, send me an email and I will let you know when each issue should appear on our site and on the PEITF site.*

*Letters to the editor should be a maximum of 200 words, must include a one-line bio, and may be edited for length..*

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## DCAP and Blue Cross Integration ~ Marg Stewart

As you know if you have read much of our material on DCAP, I and others have been under the impression that if a drug is covered by both DCAP and our plan, then those over age 65 shouldn't pay anything when they pick up prescriptions. I have learned that there are exceptions.

When I review my Invoice Report for 2013 from my principal pharmacy, I find 50 transactions. In 38 of them, I paid \$0 for prescriptions. I paid my full maximum of \$10. in three, presumably for drugs covered by Medavie Blue Cross but not by DCAP, and less than \$10. in several for inexpensive drugs that were covered by our plan and not by DCAP. In these latter cases, my charge was always 20% of the total cost, which is what I would expect.

Enter a prescription for which I needed the dreaded SPECIAL AUTHORIZATION, which for some reason I didn't know when I got my first fill. The first fill was covered by Blue Cross under our FIRST FILL FREE agreement and I paid my 20%, which was under \$10. When I picked up my first refill, I was charged \$25.05 because I had not gotten the SA approved. I did the paperwork, had the drug ap-

proved by Health PEI, filed a claim with Johnson Inc., and was refunded all but 20%. For the next five months I paid \$0 when I refilled this prescription. During this time the total cost of the drug ranged from \$27.05 to \$25.04 and was the same only twice. Why? I don't know.

Then suddenly in January, 2014, there was a \$.91 charge which, for some reason, I didn't notice at the time. In February there was a \$.79 charge. No big deal moneywise, but because I didn't understand the charge, this time I asked questions. I was given an explanation, which I didn't really grasp, and I wasn't required to pay the \$.79. The next month, when the same charge appeared and I didn't understand why, I called Johnson Inc. After some research on their end, I found out that sometimes there is a legitimate charge even when both DCAP and Medavie Blue Cross are involved.

In my case, it seems that prior to the end of the year, DCAP had at first paid \$10.06, and then \$9.98, for my drug, and Blue Cross paid the rest. In January the total price of the drug dropped to \$18.79, of which DCAP now paid only \$2.85. I have no idea why their payment changed so much. Blue Cross paid 80%, or \$15.03. When I add the two, there is a shortfall of \$.91, which the pharmacy charged me. The next two refills cost \$18.21; Blue Cross paid 80% (\$14.57) and DCAP paid \$2.85, leaving the disputed charge of \$.79.

So, back to the notion that if DCAP and Blue Cross are both involved, the member should pay nothing—

this is obviously not always true. But I can't figure out when the exception will apply. Members have paid \$0 for much more expensive drugs, and as I have indicated, I paid \$0 for the drug in question when it cost more.

And there's more! After I questioned the \$.79 charge, my pharmacy did its due diligence, reviewed my account, and told me that I should have been paying \$3+ for another prescription. When I picked up my next refill for that one, I was charged. Because I had been forewarned, I paid it. But when the math didn't work for me, I called Johnson Inc. for clarification. Turns out it was a pharmacy error; they called me to correct the error and refunded my money.

None of this kaffuffle has been about the money. It is about understanding, and about the accuracy of information that we put out. We don't want you to engage in an argument every time there is a small charge for your prescription. But we also don't want you paying a charge that shouldn't be assessed. I guess the best we can do is be vigilant, ask questions when we don't understand something, and, as always, appeal to Johnson Inc. for help when needed.

Do you sometimes feel like Sisyphus?



### Address Changes

If your address changes, or if you know anyone who has had a change of address and/or is not receiving this newsletter, please have him or her notify our membership chair (contact info on page 2).

## Key changes to the Teachers' Superannuation Fund

*Editor's note: The following is an excerpt from a long article on pension changes, which was published in our last newsletter. Content was approved by Terry Hogan, Manager, Pensions and Benefits.*

### KEY CHANGES

- Government has committed by way of a promissory note to making whatever special payments are necessary to ensure that the TSF is funded at 122% effective January 1, 2014. A valuation at January 1 will determine the exact amount required, and the first payment, including accumulated interest, is legislated to be paid by December 31, 2014. The note is to be paid off in equal annual installments over the next twenty years.
- Since the early '90s we have been indexed at 60% of the cost of living to a maximum of 4%. After 2016 guaranteed indexing of our pension will be removed, along with existing caps. Removal of the guaranteed indexing eliminates approximately 12% of the fund's liability, which in turn reduces Government's pension liability.
- In 2014, 2015, and 2016 pensions will be indexed at .9%, a figure based on indexing for 2013. Beginning in 2017, whether or not pensions are indexed will depend upon the ability of the plan to pay (i.e. funded level).
- As long as the fund is 110% funded, we will receive some level of indexing, the level to be determined by the funds available. This process will be monitored by the Teachers' Superannuation Commission. We are optimistic that retired teachers will be represented on this commission. The potential exists for indexing to be greater

than the current caps allow, up to full cost of living, or to be less.

- If the funding level drops below 110%, retirees will receive no indexing, employees will pay an additional 1% of pay, and Government will pay an additional 2% of payroll until such time as a valuation shows the plan funded at 115% or more.
- If there is no indexing in a given year, it is possible that indexing could be awarded later—if the funded level goes above 118%.
- Once indexing has been applied, the increase will become part of the base pension. Government promises that base pensions will be protected and will not be reduced.
- If the funding level drops below 100%, active teachers will lose their indexing and Government will make additional contributions equal to 4% of payroll until the funded level returns to 105%.
- If the measures described above are not sufficient to return the plan to at least 100% funded within five years, Government is required to make additional special payments to do so.
- Premier Ghiz reportedly believes that these changes will make our pension plan sustainable for at least 50 years.

### Pension Verification ~

*Terry Hogan, Pensions and Benefits*



The recent Teachers' Superannuation Fund (TSF) plan design changes, plus the commitments made by the

Government of Prince Edward Island to fund the TSF to 122%, mean that all TSF member data must be verified. In April, 2014 the Pension and Benefits Office mailed out "Pension Declaration" forms. The completion of these forms is needed to accurately calculate plan liabilities (e.g., identify how many members have spouses that are eligible for survivor benefits). As well, it is an opportunity to ensure that the most current up-to-date contact information for all retirees is on file. If you have not received a Pension Declaration form, please contact the pension office immediately.

To date, over 85% of all pensioners have returned their forms. However, some of the forms received by the pension office were incomplete. Forms that cannot be completed by phone (e.g., lacking a signature of pensioner or witness) will be mailed back to members for completion.

The vast majority of pensioners are paid via direct deposit, and as the Pensions and Benefits Office is not always notified of a member's passing, there is a small risk that overpayments can occur. The pension office mitigates this risk by regularly reviewing the obituaries and vital statistics data. This exercise also offers a unique opportunity to help ensure that pension benefits are not being paid in error. Therefore, all non-responses will be fully investigated and where contact cannot be established, the pension payment will have to be suspended. Please note that if a suspension subsequently turns out to be unwarranted, the individual will immediately be re-instated and any monies owing paid.

If you have not yet returned a completed form, the pension office will be mailing out a reminder that the **completed and witnessed forms** are required.

The Pension and Benefits Office can be contacted at 902-368-4200.

## Group Insurance

~ *Kimball Blanchard*

### DCAP Update.

In the February edition of the RTA Newsletter there was a lengthy article outlining changes to the Drug Cost Assistance Program legislation which were passed in the fall sitting of the Provincial Legislature—changes which will make private insurance the first payer and the Province the payer of last resort. The article outlined our concerns about the effects of such a decision on our plan. The latest figures the Group Insurance Trustees received at a recent meeting indicate that the change in legislation could cost our plan a considerable amount and could result in premium increases or changes to benefits.

The full implications of the changes cannot be known until the Regulations associated with the legislative changes are published; until then, we will not know what changes will be necessary in our plan. We will not be the only people affected by these changes, as it appears that anyone who has a private health plan will most likely face premium increases or a reduction in benefits, as that is the nature of the insurance business. Whenever claims under a plan increase, they have to be paid for, so premiums increase or benefits are cut. If either happens, people on fixed incomes will face a strain on their budgets and with the rising cost of living on PEI, decisions will have to be made as to where their money is spent. It is conceivable that some people may feel forced to drop their drug coverage, in which case the Province will

become the first payer for drugs covered under DCAP, so the change in legislation will become counterproductive and savings for the province may not be substantial. The danger for the individual who drops insurance is that he or she might subsequently be “out on a limb” if a need arises for a drug which is not covered by DCAP but would have been covered by private insurance.

There are people in the province who do not have health coverage. In some cases the cost is prohibitive, but in others people don't have coverage because their demand for prescription drugs is low and they can afford to pay for them when needed. Ironically, because these people do not have a private plan, and pay no premium, their drug costs could be covered under DCAP. Again, this situation may be covered under the Regulations, but who knows?

For the time being, it is important to note that until we have more information and the Group Insurance Trustees can actually see the impact of changes, rates and benefits will remain stable.

We ask you, as members of the RTA, to contact your local MLA to express your concerns about this major change in health and social policy in our province. There are many issues facing the health system that require that difficult decisions be made. DCAP, a program that makes it possible for many Islanders to have decent drug coverage, should be left alone. The Minister of Health has made announcements recently about adding additional drugs to the formulary. That is the direction DCAP should be moving—forward, not backward.

## Travel Insurance

As you are aware, if a person is covered under our travel coverage and treatment is required, it is necessary to contact the insurance carrier, if at all possible, before traveling to a medical facility so payment arrangements can be made and the client does not have to pay before treatment is received. We have become aware that some hospitals in the United States do not recognize the fact that a person has insurance coverage and will require payment up front despite the attempts by insurance carriers to make arrangements for payment. People should avoid using these facilities if at all possible, or be prepared to pay and be reimbursed at home. This is not a common situation, but it can occur.

Now for some good news. A member recently told me that while on holiday in Florida a family member required medical treatment. It not being an emergency situation, the member made the requisite phone calls and was directed to a medical centre ten minutes away. By the time the member arrived at the centre, a claim had been opened, all the necessary arrangements had been made for payment, and the family was able to have the medical issue dealt with free from concerns about coverage or payment. The situation was dealt with efficiently and professionally and the member was pleased with service provided by our insurance carrier.

While it is not always possible to follow these steps in an emergency, make the phone call as soon as possible so that our coverage can work for you as effectively as possible.

## Spring Socials

### Prince County ~ Leah Harris

The Prince County retired teachers' social was held on Thursday, May 1, at St. Paul's Parish Center in Summerside. Joyce McCardle, in her special amusing way, presented an informative report on pensions. Elizabeth Baglolo eloquently described her volunteer work with Habitat for Humanity. Many thanks to both ladies for a job well done.



Door prizes were given out, and a social time with refreshments was enjoyed by all.

### Queens County ~ Maureen MacNeill

The annual Retired Teachers' Association Queens County social was held Thursday afternoon, May 8, at the Jack Blanchard Family Centre in Charlottetown. There were 25 people in attendance.

Maureen MacNeill, Queens rep, welcomed the retired teachers to the social. She introduced our intrepid President Sheridyth MacNeill,

who began by introducing the RTA Executive members present. Sheridyth went on to make brief remarks about the past year's activities, pension changes, our upcoming annual meeting in November, and the national meeting in Ottawa that she will be attending in early June.

Joyce McCardle, our vice-president, reported on our meeting with Terry Hogan, who explained the pension changes and the impact they have on retired teachers. She also spoke briefly about pension overpayments, and pointed out that teachers who turn 65 should take note if their income has suddenly increased significantly. If so, there may be an overpayment that should be investigated.

Kimball Blanchard, our health insurance representative, also gave information on potential changes with our health insurance if government goes ahead with its proposals. This concluded the business part of the meeting.

After the meeting the group enjoyed a social hour, during which names were drawn for door prizes. Thank you to Sherwood Drug Mart, Murphy Pharma-



cies, Papa Joe's, Maid Marian's, Wine Kitz, Belvedere Golf Club, Anderson's Creek Golf Course, Eagles Glen Golf Course, and Sherwood Home Hardware who donated prizes.

### Kings County ~ Ron McIntosh

The Kings County social was held at Red's Corner on May 15, 2014. There was a small group of retired teachers present. Ronnie McIntosh, the Kings



County representative, welcomed everyone and introduced Sheridyth, who introduced the members of the RTA Executive and outlined the agenda for the meeting.

Joyce McCardle spoke about the changes to the retired teachers' pension plan. Next, Kimball Blanchard informed the members about some possible changes to our health benefits coverage. Government has not made clear what changes may be coming, but Kimball informed those present that the Insurance Trustees are watching closely and there will be no changes to our present contributions in the short term.

A lunch was provided and there were a number of door prizes given out. The social wrapped up at about 3:15pm.

### Life Insurance Reminder

Are you approaching 65? Giving any thought to life insurance?

- At age 65 the term life insurance under the PEITF Group Insurance Plan automatically is reduced to \$15,000.
- Your coverage can be converted to a private plan with the same carrier without evidence of insurability. Apply within 31 days of turning 65.
- You may purchase an amount equal to your present coverage, or a lesser amount.
- Before your 65<sup>th</sup> birthday, so you will be prepared to make the decision that best suits your situation, you should check to find out whether you are insurable, and investigate market rates for the amount of insurance you may wish to carry.

**Questions?** Call Johnson at 902-628-3537 or 1-800-371-9516, or visit their office at 111 Kent Street in Charlottetown.



Gilles Arsenault



Dear Retired Members,

We are now officially in spring, and we want to put this winter behind us. This was definitely a relentless winter and our Government has had some opportunities to excite media by turning this year's storm days into an historical event in order to try to score some political points. But we all know and understand that, to my knowledge, teachers do not control the weather. What we do control is the ability to adjust our teaching to ensure that student learning is not compromised in these kinds of winters. You would know that with minor adjustments there are hundreds of different ways of attaining the set outcomes.

Everyone should realize that we live in PEI and snow will fall, and this will have an impact, like it always does, on our schools. However, teachers are professionals, and they will adjust in many different ways in order to meet the curriculum outcomes in fewer days. It is also noted that this government seems concerned with storm days, but no intentions are known at this time to address the other times missed by students, such as for tournaments, family trips, sick days, etc. All this makes me wonder if the decisions being made are educational decisions or

political ones?

Enough about snow days. Teachers have graciously agreed to have more training through PD initiatives that the Department of Education and Early Childhood Development has instituted, and the Federation views these extra PD days as beneficial IF there is a shared vision by all education stakeholders. We have yet to see the provincial picture of how this will all play out. We are not convinced at the moment that this vision will be any different than

what has been happening in the past. We need to stop this fragmented model of PD and have true and meaningful PD for all of our members.

On a more positive note, we are anticipating a productive AGM this year. Many resolutions will come

forward as our Ad Hoc Committee on Governance has completed its work and has recommended to our Executive many changes to our Constitution and By-Laws in order to enhance our ways of operating.

Many things are happening within the confines of our profession, and we continue to count on the support of retired teachers in order to have a stronger and more sustainable education system.

Take care!



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## PEITF Travel Insurance

As you know, our Travel Insurance plan now has a 90 day medical stability clause. The stability clause means that if you have a pre-existing medical condition, it must be considered medically stable for 90 days prior to your departure date in order for you to qualify for coverage if you suffer a medical emergency related to this condition while you are travelling away from PEI.

A pre-existing condition is considered stable if the member, in the 90 days before the departure date, has not:

1. Been treated or evaluated for new symptoms or related conditions;
2. Had symptoms that increased in frequency or severity, or examination findings indicate the condition has worsened;
3. Been prescribed a new treatment or change in treatment for the condition (generally does not include reductions in medication due to improvement in the condition, or regular changes in medication as part of an established treatment plan);
4. Been admitted to a hospital for the condition; or
5. Been awaiting new treatments or tests regarding the medical condition (does not include routine tests).

Recently, within 90 days prior to travel, one of our members had a change in medication for a pre-existing condition, one which resulted from an improvement in the condition. The member wondered if that was considered to reflect a change in medical stability.

When you review number 3 above, it

seems that a change in medication due to an improvement in medical condition would not affect medical stability; however, this may not be true in every circumstance.

Medavie Blue Cross, the insurer of our Travel Insurance plan, has indicated that each individual case must be examined. For example, if the change in medication was made close to the departure date and the member has a reaction shortly after travelling, the insured might not be considered medically stable prior to travel as there was insufficient time to determine whether there would be any adverse reaction to the change.

Clearly, this is not a black and white issue. If you have questions concerning medical stability of any pre-existing condition, please feel free to contact Medavie Blue Cross prior to your departure date if you are travelling outside of PEI.

## Dr. Jim



L to R. Loretta MacAulay, Jim MacAulay, Sheridyth MacNeill

A celebration was held recently in Midgell to recognize Jim MacAulay's receipt of an Honourary Doctoral degree from the University of PEI. Jim has contributed a great deal to his immediate and the broader community, and richly deserves this recognition. Congratulations, Dr. Jim!



RTA President Sheridyth is pictured above with Gillian Hutchinson from Bridgetown, NS, winner of the 2014 PEIRTA award presented to a student graduating from UPEI in Education.

## Heart and Stroke/PEI seeks volunteers ~ Susanne MacDonald, Heart and Stroke/PEI

The Heart and Stroke Foundation|PEI needs volunteers to assist with a number of programs and activities, including clerical work in our office, assisting with community events, and helping to organize our February campaign.

We have just launched a one-of-a-kind fund raising project during which we hope to break a Guinness World Record™. The project has the support of the English Language School Board; we hope to involve students, and would be delighted to have retired teachers participate.

Volunteering is a great way to meet new friends, keep those skills razor sharp, and best of all, have the satisfaction of knowing that you are helping to make a difference in the lives of Islanders. If you enjoy people, have some time to share, and would like to be part of our work to help residents of PEI to live longer, healthier lives, or if you simply want more information, please call Crystal at 902-892-7441 or toll-free 1-888-473-4636, or email [ccobb@hsfpei.ca](mailto:ccobb@hsfpei.ca).