



The CBC Pensioners  
National Association

*Preserving our Future, Sharing our Past*

L'Association nationale  
des retraités de la SRC

*Assurer notre avenir, partager notre passé*

**DURHAM CHAPTER**



**November** ————— **2019**



## **Time to Sign Up for the Annual Holiday Luncheon!**

It's coming to that most wonderful time of the year and we are looking forward to our annual Holiday Luncheon. This year, we will be returning to Kedron Dells Golf Course where we held the Spring Luncheon.

**The meal is plated, not a buffet**, and includes butternut squash soup and winter greens with a champagne & dried cranberry vinaigrette, roast turkey, sage stuffing, cranberries, mashed potatoes, gravy, and roasted seasonal vegetables. Dessert is apple & cranberry crisp with vanilla ice cream & caramel sauce. Yum!

Cost is \$20.00 per person, payable at the door, and includes a glass of wine with your meal.

There will also be a cash bar available.

**DATE:** December 6th, 2019

**TIME:** 12:00 - 2:30 PM

**LOCATION:** Kedron Dells Golf Course, 2400 Ritson Rd. N., Oshawa, ON L1H 8L7

**KEDRON PHONE:** 905-728-6641

Please RSVP **BY November 25th** to [CBC-PNA-Durham@outlook.com](mailto:CBC-PNA-Durham@outlook.com)

or leave a message at **905-404-1334**.



## REMINDER – CBC PNA DURHAM CHAPTER ANNUAL GENERAL MEETING

The Annual General Meeting of the CBC PNA Durham Chapter will take place on Friday, December 6<sup>th</sup>, 2019 at Kedron Dells Golf Course from 11:30 AM to 12 noon, prior to the annual Holiday Luncheon.

The agenda has been sent to all Chapter members along with proposed bylaw changes. Please take the time to review the materials in advance of the meeting so that we can make it as efficient as possible.

We will also be holding an election to replace our interim Secretary-Treasurer.

Please consider getting involved with your Chapter Executive. Nominations will be taken from the floor of the meeting.

## COMING EVENTS

### Coffee & Conversation with Ted Barris



November 8, 2019, 1:00 – 3:00 PM  
Whitby Public Library, 405 Dundas St. W, Whitby, Ontario, L1N 6A1

There's still time to RSVP for our coffee gathering marking Remembrance Day. Author and former CBC-er Ted Barris will be talking about his new book, *Medics on the Front Line*. There is no charge for this event. Coffee, tea and pastries will be available.

RSVP to [CBC-PNA-Durham@outlook.com](mailto:CBC-PNA-Durham@outlook.com) or leave a message at 905-404-1334.

### Trent Chapter Christmas Lunch



Durham members are invited to join the Trent Chapter at its Christmas luncheon coming up on November 28, 2019 at 12 noon.

**Location:** Baxter Creek Golf Club at 1702 Cedar Valley Road off County Road 28, just south of Peterborough.

RSVP by November 18, 2019 to [bburhoe@cogeco.ca](mailto:bburhoe@cogeco.ca) or by telephone 705 874-0480.

## PRESIDENT'S MESSAGE



### **Greetings! And Happy Holidays Ahead!**

I hope you've had a good autumn and a happy Thanksgiving with friends and family. Family comes in many ways and I like to think of our Chapter as a type of family where we can bring people with a shared experience together.

On that front, the Chapter is looking forward to our next coffee gathering coming up in a few days with author Ted Barris. And of course, planning is well in hand for the annual Holiday Luncheon and AGM. We hope to see you all there.

The recent federal election proved to be one for retirees to watch. Now we'll be watching to see what action the new Liberal minority government takes. Look for more on that in this issue.

Also in this issue, an update on the MOA, new rates coming for the SHCP, important info about RRIFs, the value of a flu shot, and a look at changing television technology.

Happy Reading!

**Barbara Saxberg, Chapter President**

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## CBC PNA NEWS UPDATES

### **Pension Surplus Review Continues**

Representatives from the Pensioners Association, CBC's unions and the Corporation will be meeting again on November 6<sup>th</sup> and 7<sup>th</sup> to continue their review of an agreement that sets out terms for the sharing of future pension surpluses.



The Memorandum of Agreement (MOA) was reached in 2009 and requires the parties to review its terms every ten years beginning this year. The deal is composed of two parts. The first sets out the rules for pension surplus sharing and the second establishes a fund to provide a backstop against significant increases in employee health care benefits.

Pension surplus sharing takes place once the assets of the plan exceed 105% of the plan liabilities. While the performance of the plan has been good it is not expected to be in a surplus sharing position this year.

The Parties have met twice so far but have yet to begin any detailed examination of the MOA. Discussions have focused on gathering information on prescription drug costs. It is expected the upcoming meetings in November will begin to focus on potential amendments to the Agreement.

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### **Lower Rates for Health Benefits on the Way in 2020**

Premium rates for pensioner supplementary health care benefits will be a little lower next year. The plan went through some major changes recently but the good news is, its performance has been better than expected.

The Pensioners Supplementary Health Care Plan (SHCP) is 100% paid for by participants. Keeping costs low while maintaining strong benefits has been a priority of the Pensioners National Association. Every fall, the plan's performance is reviewed by the PNA Executive with the assistance of experts from the CBC and Morneau Shepell. Details on the new lower rates should be coming soon.

The plan was also recently opened up for new applications and nearly two hundred retirees took advantage of the opportunity.

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### **PNA Board Calls for an End to Forced Withdrawal from RRIFs**

**By Dan Oldfield**

The use of RRIFs to save money for your retirement is basically a good idea. But the rules that govern them have not kept pace with the times.



Before the end of the year in which you turn 71, you are currently required to take any money you have in an RRSP or other registered plan and put it into a RRIF. A RIFF is basically an annuity that pays out a certain portion of your savings on a regular basis.

Under federal law, anyone with a RRIF must take out a specified, minimum amount every year. That amount is subject to tax. Also, the amount you are forced to remove from your RRIF increases as you get older. And that's the problem.

### **New economic and life expectancy realities**

The current withdrawal rates have been around since 1992 with a minor adjustment in 2015.

At the same time, life expectancy has been rising, meaning people generally have to live on their retirement income longer. There are currently 265,000 Canadians who are 90 or more. The numbers are growing and are expected to reach 355,000 by 2021. The probability of a person reaching 90 has doubled for women and tripled for men in the last two decades.

### **Negative impact on retirement planning**

The minimum withdrawal requirement forces us to take money out of RRIFs whether it's needed or not increases our income and as a result, increases our income tax. The mandatory withdrawal may also result in a reduction in Old Age Security (OAS) payments.

The government benefits from the minimum withdrawal by collecting the taxes it generates. But there appears to be no real need for this forced early tax collection because any funds left in a RRIF at the time of death become part of your estate and will be taxed at that time. In other words, the taxman still gets his money albeit later rather than sooner.

The National Board unanimously passed a motion at its recent meeting, joining with other retiree groups in advocating for the removal of the minimum requirement. Watch for updates.

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## **Federal Election Aftermath**

By Barbara Saxberg

**Now that the federal election is over** and the Liberals will attempt to govern with a minority, Canada's seniors will have an important role to play in pushing the Liberals to keep their promises. Assuming the government tries to work with the NDP, it will also be interesting to see how much of the New Democrats' National Seniors Strategy is implemented. The Liberals have made it clear they are not interested in a formal coalition with the NDP so it appears that the issues will be tackled on an item by item basis.



**On the pension front**, the Liberals have promised to boost the Old Age Supplement by 10% at age 75, and increase the CPP survivor benefit by 25%. The NDP wants to increase the Guaranteed Income Supplement and make enrollment in both OAS and GIS automatic. The NDP also wants to crack down on pension theft.

**Prior to the election** there were concerns that the Liberals might attempt to resurrect Bill C27 through the back door, through changes to OSFI (Office of the Superintendent of Financial Institutions) regulations according to Howard Simpson, our representative on the Canadian Coalition for Retirement security. Simpson now says that if that was indeed a real plan, it has fizzled. OSFI is an independent organization and can't change its regulations without legislative approval. So that fear has been put to rest.

**The Liberals also promised during the election campaign to institute new penalties for elder abuse** and to begin to get better data on just how big a problem it is in Canada. And they promised to invest \$6 billion over the next four years to kick-start negotiations with the provinces to improve a range of health care services.

**But perhaps the biggest Liberal promise in health care is a plan for a national Pharmacare program** and making high cost drugs for rare diseases more affordable. The NDP, on the other hand, wants to go even further, creating a national Pharmacare program that provides comprehensive coverage to everyone in Canada by 2020 and extending public dental coverage for households earning less than \$70,000 a year.

For CBC retirees, extended dental coverage would be a big plus since our current supplementary health care plan does not include dental of any kind. Expect some interesting negotiations ahead. And be prepared to push your MPs to demand that promises be met.

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## IN HEALTH NEWS...

### **Flu Season is Upon Us – Time to Get Your Flu Shot!**

By Bette Laderoute Sampson

Typically, flu season starts in the fall and peaks sometime between late December and early February. Every year scientists try to come up with the right formula to deter the effects of whatever “bug” is poised to catch us off guard this time of year. The young and the old are particularly vulnerable and the message, of course, is **get the flu shot**.

Every year, the World Health Organization meets to decide what strains should be targeted by the vaccine, picking those that are most likely to be spreading during the upcoming flu season. Canada also looks to Australia, whose flu season has come and gone, to gather as much information as possible to prepare for our own season. However, the WHO determines the formula for the vaccine itself – H3N1 is basic but the effective dosage this year includes H3N2 as well, based on Australia’s statistics. They were particularly hard hit this past season, our summer, their winter.

Not everyone is willing to get a flu shot. Some will tell you the last time they did get a shot they got the flu. They believe the vaccine was responsible. Some people feel they are too healthy to need the flu shot; and still others seek alternative flu-prevention methods. **All Untrue**, you can’t get the flu from a flu shot because the virus in it is inactive; you can never be too healthy to catch a flu bug in high season; and there are no statistics on alternative preventions to prove any of them are fully effective.

We are advised to not just get the flu shot but to get it as soon as it becomes available. It is possible to be exposed to the virus before you get the shot if left too late. Even late, though, is better than not at all.

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## FEATURE STORY – THE CHANGING TV TIMES

### From VHS to DVD to Blu-Ray to?

By Mike Abate

It absolutely amazes me how much our TV viewing habits have changed over the past 13 years. As this new technology slowly creeps into our lives, we quickly forget how much things have changed.



**Since September 1952 when television first came to Canada**, never has there been so much choice in terms of what to watch and how to watch it. For many years the standard definition TV format was unchanged. It was all black and white for us until the CBC introduced colour TV on September 1, 1966. When introduced, fewer than 1% of Canadians had a colour TV.

**This was all good until the mid '70s** with the advent of VHS and Betamax tape. Consumers were now able to record and playback TV programming. With Sony’s Betamax format battling it out with Panasonic’s VHS, it was Panasonic’s longer record times that won. The only obstacle it seemed was how to change the dreaded flashing 12:00 time on the VCR. Neighbourhoods were teeming with video stores where you could rent a movie for a few dollars. Purchasing a VHS VCR would set you back between \$1,000 to \$1,400.

**Even though the Betamax format had better picture quality**, VHS remained the dominant format until DVDs came out in the mid-90s. DVD quality was so much better that many people re-purchased the same movie just to get a better-quality picture (i.e. **Star Wars**). Oh, and they also had to buy a DVD player which would set them back several hundred dollars. As if that wasn't enough, the quality of DVDs also changed.

**The bad news was** that it was very difficult to purchase a DVD machine that would record programming. This is when both Rogers and Bell seized the opportunity to promote their PVRs (Personal Video Recorder). Programming was integrated within the cable box and you didn't have to worry about the flashing 12:00. This is what I believe finally killed off the VHS format.

**I remember going into the video store** in October 2006 and seeing something called 'Blu-Ray' DVDs. These of course were high definition movies whose format was developed by Sony. The other competing format was Toshiba's HD-DVD which was dropped after retailers like Best Buy, Walmart and Future Shop decided to stick with the Blue Ray format. The good news is movies and their associated playback machines have come down in price making it affordable for most people.

**As the TV technology changes, so does the DVD playback format.** Just recently introduced are 4K UHD DVDs which can playback 4K and 8K video. But just like Blu-Ray, you will need a playback machine that will recognize the new format. Costco currently sells various models for under \$300, a far cry from the early \$1,000 VHS machines!

Currently being developed and still in the prototype stage is the HVD (Holographic Versatile Disc) which can store up to six terabytes of information. This can include data or high definition video. The format is still waiting for approval from the ISO (International Organization for Standardization).

I already own three versions of the complete **Star Wars Saga** (VHS, DVD, Blu-Ray). I can't imagine how many more I will own in the next 13 years.

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## LETTERS TO THE EDITOR

I find it a bit embarrassing that the older segment of the population is still so focused on self-serving issues while the rest of the world is more worried about climate change and the environment. I think us older folks can look at the bigger picture too – not always thinking about ourselves.



Another point which is conveniently glossed over in the national Pharmacare discussion is that a national program is just a way of shifting the cost from those who use medication to those who don't – not exactly fair – and another example of us old folk increasing the burden on the younger generation.

Regarding the negative aspects of Pharmacare – the main one being the drug shortages and the recalls it will cause. (Recalls are the result of contamination due to poor manufacturing practices brought on by the low prices forced on drug companies by the government.)

The latest example is the current massive recall of ranitidine, a common medication for reflux and heartburn due to carcinogenic impurities (NDMA) detected.

Drug shortages and recalls are occurring for the cheapest generic medications that are no longer profitable to make. Some pharma companies have relocated their manufacturing to foreign sites to keep costs to a minimum.

So, if we cannot continue to manufacture generic medications at the low costs dictated by the government and we cannot rely on foreign sites to manufacture them without concern as to their quality, we are at risk of being unable to sustain an adequate drug supply to support Canadians' health.

In the end, the people who really need the drugs are actually going to be much worse off with Pharmacare. They will lose access to the drugs they need and we will all get higher taxes.

***Helen Freeman***

**From the Editor:** You are quite right; we can sound a bit self-serving at times. We tend to focus on issues of special interest to our membership as we age, and that focus has also included such important issues as climate change and poverty.

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## **CONTACT US:**

Would you like to comment on this or anything else in **BUZZ**? We welcome letters to the editor.

Perhaps you have a story to tell – something from your days at CBC or something interesting you're doing now?



Maybe you know of a CBC retiree with a skill to share? Or a retiree we should profile? We're also interested in any photos from your working days you might like to share. We welcome your contributions and story suggestions.

[CBC-PNA-Durham@outlook.com](mailto:CBC-PNA-Durham@outlook.com).

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**YOUR EXECUTIVE**

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Mac Skelton

**Newsletter Editor:** Bette Laderoute Sampson

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***Please share this newsletter with any CBC retirees or spouses who are not yet members.  
Encourage them to join the PNA.***

***It's important that we continue to expand our membership in order to maintain our seat at  
the table with the CBC.***