



# **Employee Benefit Plans**

**for Saskatchewan health-care employees**

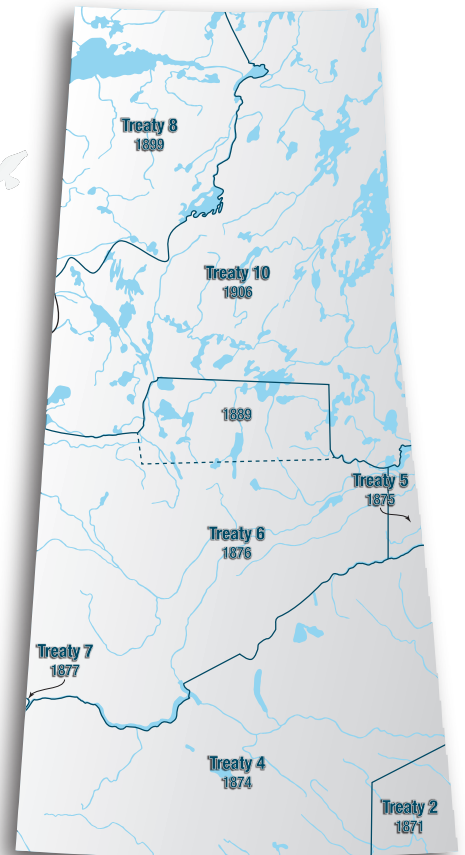
2024 Annual Report



## First Nations and Métis/Michif land acknowledgment

We acknowledge that the Saskatchewan health-care system works and meets on the territory covered by Treaties 2, 4, 5, 6, 7, 8, and 10, the traditional territories of the Cree, Saulteaux, Dakota, Lakota, Nakota, Stoney, and Dene, and the Homeland of the Métis/Michif. Recognizing this history and the Truth and Reconciliation Commission Calls to Action are important to our future and our efforts to close the gap in health outcomes between Indigenous and non-Indigenous peoples.

**As treaty people, we pay respect to the traditional caretakers of this land.**



## 2024 Annual Report

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## Message from the Chairs



**Karen Knelsen**  
Chair

The year 2024 marks an important one for the Board of Trustees and the Employee Benefit Plans that provide essential benefits, including group life insurance, extended health care, dental coverage, and disability income plans. It is the first full year of joint trusteeship. This means that both the unions representing health-care employees and employers have an equal presence on the Board of Trustees that oversees plan members' benefits.

Strong governance ensures the stability and sustainability of Employee Benefit Plans for Saskatchewan's health-care workers. The Board of Trustees is committed to the responsible stewardship of these trust funds, ensuring financial security for employees and their families.

In December 2024, the trustees strengthened their commitment by developing a Governance Promise—a framework aligning with the Employee Benefits Promise that reinforces our duty to act in the best interests of health-care employees. The Governance Promise is guided by core values, including integrity, transparency, collaboration, vision, curiosity, and empathy. Through this lens, the trustees identified essential responsibilities to uphold, ensuring long-term sustainability and ethical oversight of benefits administration.

The Governance Promise outlines the trustees' values. It also defines the actions board members will follow to fulfill their fiduciary duty in providing benefits for the beneficiaries. There is a great diversity of board members, and they have all come together working on the Governance Promise (see page 10).

Through strong governance and steadfast commitment, we continue to protect and enhance the benefits that support Saskatchewan's health-care employees.



**Russell Doell**  
Vice-chair

## Message from the Chief Executive Officer

In 2024, our Employee Benefit Plans (EBP) supported over 46,000 plan members and 20,000 retirees in Saskatchewan's health-care system, embodying our goal to "take care of the caregivers."

This year marked transformative initiatives, including partnerships with Venture Rehabilitation Sciences Group, Stapleford Health and Rehab, and Prairie View Physiotherapy to expand rehabilitation services. These additions enriched our network of disability supports and aided members in recovery. Plan members on a disability claim are now more easily able to get the treatment they need closer to home. This improvement significantly reduces the physical and emotional strain on plan members, allowing them to focus on their recovery.

We also collaborated with WCB Saskatchewan to improve the plan member experience and reduce disability overpayments. This collaboration ensures that plan members receive accurate payments promptly, alleviating financial stress and allowing them to concentrate on their health and well-being.

Further strengthening privacy and security, we partnered with TitanFile and implemented privacy training. This measure protects sensitive information and ensures members' privacy is safeguarded.

3sHealth enhanced transparency and performance measurement by introducing new service metrics to evaluate customer service, benefit payments, accurate administration, and case management. These metrics ensure that plan members receive the highest level of service and support.

Finally, the Board of Trustees developed a Governance Promise, building off the EBP Promise, which you can read about on page 10 of this report. It strengthens and reinforces the Trustees' commitment to governing the Trusts on behalf of health-care workers in Saskatchewan. This promise underscores the Trustees' dedication to transparency and accountability, reassuring plan members that their benefits are managed with the utmost integrity and care.

These achievements highlight the power of teamwork and innovation in ensuring the well-being of those we serve. Together, we are building a brighter, healthier future for health-care workers in our province.

Thank you to our team, partners, and plan members for being part of this journey.



**Mark Anderson**  
3sHealth CEO

## Board of Trustees



**Karen Knelsen**  
Chair

Ms. Knelsen's considerable experience as a registered nurse, Director of Nursing, and facility administrator, in addition to her board experience with health-care facilities, with the Saskatchewan Registered Nurses Association, and as a representative of affiliated agencies, significantly contributes to the work of the Employee Benefit Plans Board of Trustees. Ms. Knelsen currently serves as the Chair of the Employee Benefit Plans Board of Trustees and is a representative to the Employee Benefits Committee. She has been immersed in the health sector for many years and is known and respected for her commitment to a high-quality, patient-centered health-care system. Ms. Knelsen also serves on the 3sHealth Board of Directors. She has achieved the Foundation of Trust Management Standards® and Advanced Trust Management Standards™ certificates, as well as the Masters of Trust Management Standards through the International Foundation of Employee Benefit Plans.



**Russell Doell**  
Vice-chair

Mr. Doell brings a strong perspective to his work as Vice-chair on the Employee Benefit Plans Board of Trustees, thanks in part to his decades of experience in both the health-care system and labour relations. After spending his first 25 years of employment working in various positions at Saskatoon's Royal University Hospital, he moved to a staff position with SEIU-West in 2006. He had previously held many different executive positions with SEIU-West, including one term as president. As part of Mr. Doell's current role of Deputy Director at SEIU-West, he is responsible for member benefit plans. He has completed his Master of Trust Management Standards certification.

He has been involved with the 3sHealth extended health plan since 2000 and is a long-serving member of the Employee Benefit Plans and Working committees.

In addition to his position as Vice-chair with the Employee Benefit Plans Board of Trustees, Mr. Doell also sits as a trustee on the Saskatchewan Health Employees' Pension Plan board of directors.



**Al Boutin**

Mr. Boutin serves as the Executive Director of Health Sciences Association of Saskatchewan (HSAS), bringing two decades of leadership in both management and labour leadership roles in the Saskatchewan public sector to the position. These roles have included benefit plan negotiation and administration experience, which supports his role as a trustee.

In addition to providing leadership and advocacy for and with the HSAS membership, he also joined the Employee Benefit Plans Committee and Working Committee in 2023.

As a relationship builder in, across, and outside of HSAS, Mr. Boutin recognizes that innovative and positive solutions can be arrived at through a collaborative spirit, curiosity, and flexibility. He is a firm believer that developing and building positive, productive, and purposeful relationships can create strong, effective member advocacy and desired outcomes for our province's health-care sector.



**Andrew Cartmell**

Mr. Cartmell's experience and leadership as the President and CEO of SGI provide him with an excellent foundation to support innovative change within the health-care system. He is accustomed to working within a complex organization that needs to be responsive to many stakeholders, and he has experience as a member of the Facility Association Board, an insurance industry association, as a director on the 3sHealth board, and with the board of SGI. He is also currently a director for Sandbox Mutual Insurance Company, headquartered in Saskatoon. Mr. Cartmell has strong financial, insurance, and enterprise risk management skills. He is a Fellow of the Canadian Institute of Actuaries. Mr. Cartmell has also achieved the Foundation of Trust Management Standards and Advanced Trust Management Standards certificates through the International Foundation of Employee Benefit Plans.



**Arnie Shaw**

Mr. Shaw is a Chartered Professional Accountant (CPA, CA), retired Certified Management Consultant (CMC), and President of Centennial Plumbing, Heating and Electrical and Centennial Kitchen and Bath. He previously practiced as a CPA for 15 years and led a management consulting firm focused on financially distressed companies. Mr. Shaw has served on numerous boards and committees, including Blue Cross Life of Canada, Saskatchewan Blue Cross, Nexstar Network, Rise Air, and the B'nai Brith Silver Plate Dinner. He is Vice-chair of the 3sHealth Board of Directors and chairs its Audit, Finance, and Risk Committee. He holds advanced trust management certifications through the International Foundation of Employee Benefit Plans. Mr. Shaw is also a recipient of the B'nai Brith "We are Proud of You" award for his long-standing volunteer service.





**Audrey Yaremy**

Ms. Yaremy's background is well-suited to her role on the Employee Benefit Plans Board of Trustees: she has significant experience as an executive board member, vice-president, national vice-president, and trustee with the Saskatchewan Government and Employees Union. She has a particular interest in the financial aspects of the budgetary processes. She spent 28 years in long-term care, with 13 years of service in labour relations. This includes a position as Labour Relations Officer with the Saskatchewan Government Employees Union.

Ms. Yaremy retired in 2019. In addition to her role as a trustee, she continues to volunteer with a long-term care auxiliary. She also enjoys spending time with her grandchild, gardening, cooking, and baking.



**Dave Jackson**

Mr. Jackson is currently the Chief Executive Officer of the Canadian Lawyers Insurance Association. He has an excellent foundation to support his role as a trustee for the Employee Benefit Plans. He has worked in all areas of the benefits sector, with operational and management responsibilities at both for profit and not-for-profit organizations. He has been working with the CLIA Board for the last eight years and has acted as the Chair of the provincial and national Risk and Insurance Management Society. He continues to be actively involved in the risk management community.

Mr. Jackson has a Bachelor of Arts degree in Economics and a Master of Public Administration degree from the University of Regina. He also has a Certification in Risk Management from the University of Toronto.



**Dean Biesenthal**

Mr. Biesenthal manages his own consulting company, serving multiple clients in all aspects of executive human resources services. Dean is also the former Associate Vice-president of Human Resources, University of Regina. He possesses more than 20 years of experience in the human resources field, including significant experience in benefits administration and oversight in the broader public sector. His work in the public education, health, and post-secondary sectors have helped him become accustomed to working in complex and ever-changing environments with multiple stakeholders. Dean also served as a member of several board committees at the University of Regina, including the Academic and Administrative Benefits Committee, the Joint Pension and Investment Committee, the Trust and Endowment Committee, and the Non-Academic Benefits Committee, which he chaired. Mr. Biesenthal is a graduate of the University of Regina in Business Administration, holds a Master of Education in Leadership from the University of Saskatchewan, and is a Chartered Professional in Human Resources.





**Denise Dick**

Ms. Dick has been a registered nurse for over 42 years, including 31 years on the front lines in pediatrics, general surgery, women's health, labour and delivery, and newborn care. Since 2013, she has served the Saskatchewan Union of Nurses (SUN) as First Vice-president, chair of the Finance Committee, and chair of the board's Governance and Policy committees. Her union work led to her involvement with the Employee Benefit Plans and Working committees. Beyond SUN, Ms. Dick has held leadership roles with the Saskatchewan Association for Safe Workplaces in Health, the Saskatchewan Nurses Foundation, the Saskatchewan Health Coalition, and the Saskatchewan Federation of Labour. In 2021, she received the Bread and Roses Award from the Canadian Federation of Nurses Unions for her advocacy and policy contributions. She has also completed the Canadian Healthcare Association's Health Governors Foundation series and earned advanced trust management certifications through the International Foundation of Employee Benefit Plans.

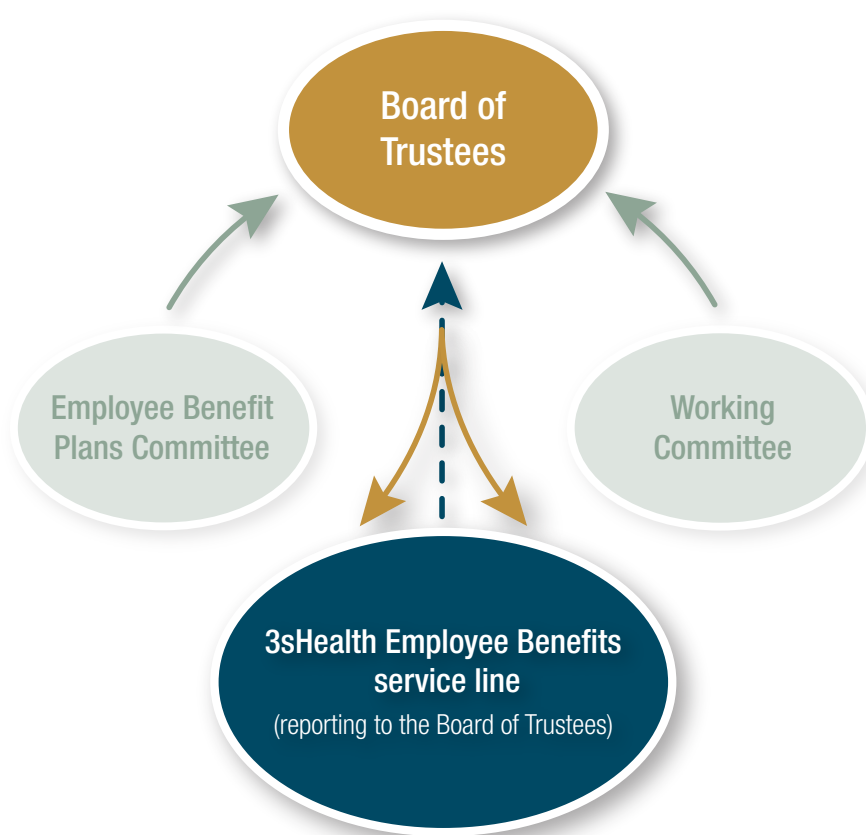


**Judy Henley**

Ms. Henley works in the health-care system as a payroll and benefits officer for the Saskatchewan Health Authority. She has also served in many leadership roles within the Canadian Union of Public Employees (CUPE) at the local, provincial, and national levels, including National General Vice-president, Regional Vice-president (representing 31,000 Saskatchewan members) on the National Executive Board, Secretary-treasurer of CUPE Saskatchewan, and President of CUPE Saskatchewan. She has acted as a labour representative for the Workers' Compensation Board, in both part-time and full-time roles. In 2022, Ms. Henley was awarded the Queen Elizabeth II Platinum Jubilee Medal (Saskatchewan) in recognition of her valuable contribution to the province. She has also been recognized and awarded the CUPE Saskatchewan Award for union activism for her outstanding contributions to CUPE and the community.

## Governance of the Employee Benefit Plans

The Board of Trustees has fiduciary responsibility for the employee benefit plan trusts. Along with the Board of Trustees, two committees support trust governance. Made up of an equal number of union and employer representatives, the Employee Benefit Plans Committee makes recommendations to the Board of Trustees on matters related to the Group Life Insurance, Retired Plan Member Life Insurance Benefit, Core Dental, and the Disability Income Plans. In addition, the committee makes recommendations to the Board of Trustees on investments and the asset mix. The collective bargaining agreements stipulate the composition of the Employee Benefit Plans Committee. The Working Committee is made up of 10 union representatives: two from each of the health sector unions, including CUPE, HSAS, SEIU-West, SGEU, and SUN. The Working Committee makes recommendations to the Board of Trustees for matters related to the In-Scope Extended Health Care and Enhanced Dental Plan.



## Board of Trustees accomplishments

### Administrative Service Agreement

The central role of the Employee Benefit Plans team is to administer the plans on behalf of the board. This year, the Trustees and 3sHealth's administration participated in a comprehensive review of the Administrative Service Agreement. This agreement dictates the terms and conditions by which 3sHealth administers the Employee Benefit Plan Trusts on behalf of the Board of Trustees. The service agreement has been renewed for three years.

## Speech aid coverage

Effective June 1, 2024, the Board of Trustees approved the inclusion of speech aid coverage under the Extended Health Care Plan.

Speech aids include laryngeal speaking aids and bliss boards.

- Laryngeal speaking aids are devices that offer the ability to produce/adjust vibrations and sound frequency settings for clearer speech for patients who have lost their voice box.
- A bliss board is a type of communication display board that allows a user to create messages for communication.

Charges for bliss boards and laryngeal speaking aids that are prescribed by a physician when no alternative method of communication is possible will be covered to a lifetime maximum per Insured Person of \$1,000.

## Enhancing financial stewardship and maximizing benefits for plan members

As part of its ongoing commitment to responsible financial management, the trustees have amended the insurance arrangement for the extended health-care plans. The trustees transitioned from an insured refund arrangement to an Administrative Services Only (ASO) contract with the insurer.

Under the ASO arrangement, the Plans directly cover the actual cost of claims incurred while paying a fee for service to the insurer for handling claims processing and payment. By moving to ASO, the plans are projected to save approximately \$1.8 million annually.

The trustees continually seek new opportunities to safeguard the interests of plan members and ensure that extended health-care coverage remains both affordable and sustainable for the future.

## Trustees build a governance promise: a commitment to care and accountability

The Board of Trustees developed a Governance Promise based on the foundational principles of the Employee Benefit Plans with a steadfast commitment to supporting caregivers. This promise reflects values such as integrity, transparency, empathy, collaboration, visionary thinking, and curiosity, ensuring that governance decisions reflect the highest standards of care and accountability.

At their December retreat, the trustees worked together to identify the values essential to governing the Employee Benefit Plans. Building on these discussions, the trustees built the Governance Promise, emphasizing ethical decision-making, respect for all, and the core duties of a trustee, including fiduciary responsibility and safeguarding assets.

“The role of the Board of Trustees is to manage the negotiated benefit plans for the benefit of the members. The Governance Promise grounds the board in working towards what is important to the members and fulfilling the board members’ role of fiduciary responsibility,”

Russell Doell, Board of Trustees Vice-chair.

By integrating these principles, the Governance Promise serves as a guiding framework for handling challenges, exploring opportunities, and continually improving practices. With mechanisms for stakeholder feedback and a focus on learning, the promise underscores the trustee’s commitment to good governance and its unwavering support for the caregivers of Saskatchewan



# Governance Promise



## Integrity & Transparency

We act with honesty and adhere to the highest standards of moral and ethical values

- I will exercise fiduciary responsibility.
- I will be open and candid in discussions.
- I will do what's right; not what is easy.
- I will make decisions that I can defend.

## Collaboration

We build on each other's strengths and have the right mechanisms to get feedback from stakeholders

- I will share insights and listen to others.
- I seek out different points of view.
- I consider feedback from stakeholders before making decisions.

## Visionary

We imagine and drive towards an ideal future state

- I am aware of risks and I anticipate and plan for them.
- I continuously strive to improve and learn.
- I value deep learning and apply what I learn.

## Curiosity

We are committed to continuous learning

- I will seek wisdom.
- I will share wisdom.
- I value knowledge from industry experts.

## Empathetic

We will treat everyone with dignity and respect

- I will be aware of my words and actions.
- I will listen with my ears, eyes and heart.
- I will work for the benefit of the beneficiary.

# Employee benefits team accomplishments

## Enhancement to benefits administration with employer invoicing

The transition to an employer-invoicing approach marks a significant shift in how 3sHealth Employee Benefits administers the plans. This change aims to improve efficiency and reduce administrative burden, replacing the former self-remittance model in which employer organizations manually remitted contributions and premiums.

While this new process has introduced improvements, 3sHealth recognizes that there are still challenges to address and remains focused on streamlining operations to ensure a smooth upgrade.

Previously, organizations were required to complete remittance forms for disability, Group Life, dental, and health-care benefits. The manual nature of this process created inefficiencies and required additional oversight. By moving to invoicing employers directly, 3sHealth is creating a more reliable process for benefit premiums and contributions.

## Establishing meaningful metrics to fulfill the EBP Promise

In 2024, Employee Benefits developed new metrics that tell the story of how they deliver on the EBP Promise. These metrics are embedded in the administrative services agreement between 3sHealth and the Board of Trustees. The new metrics were introduced on January 1, 2025.

The EBP metrics scorecard is presented to the trustees quarterly. The scorecard provides a holistic view of department operations, measuring administration accuracy, customer service, case management, and benefit payments. By mapping processes and identifying who the process is impacting, teams transformed insights into actionable service metrics that helped reinforce the importance of collaboration between teams.

“The metrics provide clarity on who we do our work for, why it matters, and who is impacted by it.”

Alana Shearer-Kleefeld  
Vice-president of Employee Benefits

With aggregate performance scores, Employee Benefits can now better communicate impact, enhance accountability, and ensure service excellence, reinforcing its ongoing commitment to taking care of the caregiver.

## Enhancing security and privacy measures at 3sHealth

In 2024, Employee Benefits entered into a new agreement with TitanFile. The portal provides an enhanced secure file transfer system, ensuring sensitive data is exchanged with reinforced protection.

The integration of digital signatures through DocuSign has streamlined the document-signing process for plan members, improving efficiency and accessibility.

“We can now send and receive files from our plan members and strategic partners with increased security and ease of use. Feedback has been very positive.”

Boye Adetogun  
Claims Services Manager



To support using the new technology, all Employee Benefits staff received comprehensive privacy training covering key areas such as identifying and handling personal information, understanding accountability in data management, appropriate client information requests, proper storage practices, and responding to potential privacy breaches.

These enhancements reflect 3sHealth's ongoing commitment to maintaining secure and effective privacy practices across its operations.

### **Expanded rehabilitation access in Saskatchewan**

In 2024, the Employee Benefit Plans Board of Trustees approved the selection of three new rehabilitation partners —Venture Rehabilitation Sciences Group, Stapleford Health and Rehab, and Prairie View Physiotherapy—to enhance accessibility to treatment for plan members on an approved long-term disability claim. CBI Health Limited remains a valued rehabilitation partner.

3sHealth signed contracts effective July 1, 2024, and visited each clinic to provide guidance on patient care expectations.

“Rehabilitation providers were chosen due to their philosophies closely aligning to those of 3sHealth, with strong commitments to being patient focused, collaborative, and building a therapeutic alliance with the client.”

Stephen Hill,  
Claims services adviser

The new providers also expand the geographical reach of rehabilitation services, having clinics in many more cities and towns throughout Saskatchewan. This gives individuals better access to care and resources, more choice between clinics, and greater choice when selecting a rehabilitation professional.

Each partner has unique specialties and is also multidisciplinary, offering access to various professionals such as physiotherapists, kinesiologists/exercise therapists, occupational therapists, and psychologists. These partnerships enhance rehabilitation services, ensuring plan members receive the support they need to recover and move forward.

### **3sHealth collaborates with Workers Compensation Board Saskatchewan (WCB)**

This year, 3sHealth collaborated with Workers Compensation Board Saskatchewan (WCB) to reduce disability overpayments—a shared goal.

When health-care workers qualify for both WCB and disability benefits administered by 3sHealth they can be overpaid. For example, if WCB initially declines a claim and 3sHealth starts paying benefits, overpayments arise when WCB later accepts the claim. These overpayments burden injured workers because they may be required to repay the benefits they received.

To address this, 3sHealth and WCB developed a process, focusing on the injured worker's experience. Key improvements include:

- Privacy guidelines for sharing information, appropriate consent forms, and notifications to plan members/injured workers;
- A process for 3sHealth to notify WCB of a plan member who submitted a claim to 3sHealth and were advised to apply to WCB due to a workplace injury. 3sHealth can now submit medical information directly to WCB, reducing the burden on the plan member/injured worker;
- A process and dedicated contacts at WCB, whom 3sHealth can approach with questions and escalated inquiries; and



- A formal agreement allowing WCB to reimburse the disability income plan directly for the money already paid to an employee for the same disability when WCB assumes responsibility for a claim.

The new process was implemented in the fall of 2024 and the number of overpayments occurring has significantly reduced.

“Together, we have created a process that not only reduces financial and administrative burdens but improves the overall experience for the health-care workers we serve.”

Alana Shearer-Kleefeld,  
Vice-president Employee Benefits.

## Seeing health care in action

In Fall 2023, a delegation from EBP—including managers, adjudicators, and benefit services officers—visited Saskatoon City Hospital. Alongside observing clinical care, the team received an overview of Transferring, Lifting, and Repositioning (TLR) principles, and toured food services to better understand the occupational demands of kitchen staff. In Spring 2024, EBP representatives visited the Dr. F. H. Wigmore Regional Hospital in Moose Jaw. Both visits were invaluable learning experiences. Staff expressed deep appreciation for the warm welcome received in these health-care environments.



3sHealth Employee Benefits team seeing first-hand health care in action.

“These visits give EBP employees the opportunity to gain a front-line view of caregivers’ work. Observing health-care workers in their own settings enables adjudicators to apply contextual understanding to support return-to-work planning.”

Boye Adetogun  
Claims Services Manager

In addition to these initiatives, EBP collaborates regularly with SHA Attendance and Accommodations to strengthen shared processes supporting an employee’s return to work. EBP also convenes the monthly Benefits Collaboration Forum with employer partners from across the province. Presentations to employer and union partners have further reinforced communication and alignment across key stakeholders.

# Disability Income Plan spotlight

## Fast facts

67

participating employers

42,026

Health-care workers enrolled

1,867

new claim approvals

\$57,450,406

in disability income replacement benefits paid

\$1,566,259

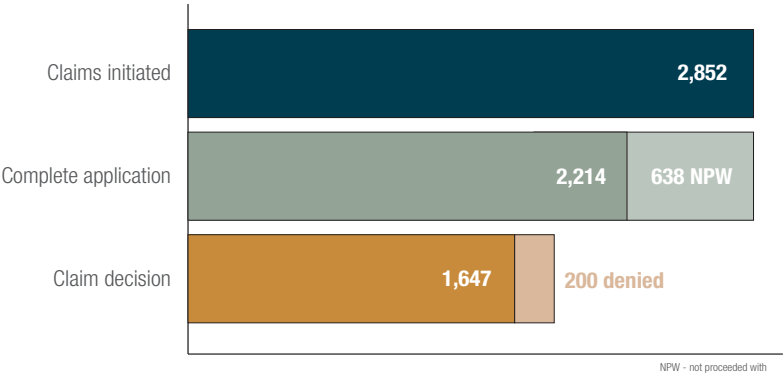
invested in health-care worker's recovery

1,331

health-care workers returned to work



3sHealth is responsible for the adjudication and payment of long-term disability (LTD) claims for health-care workers who are unable to work due to illness or injury. The LTD claims process is dynamic, with new claims being submitted daily and many individuals returning to work as they recover. The following provides a snapshot of the new claims received in 2024:



## Treatment funding

To support plan members' recovery and return to work, the Disability Income Plans paid \$1,566,259 in treatment funding in 2024.

Treatment plans include physical rehab programs, mental health treatment, and comprehensive programs. This contributed to many positive outcomes, such as:

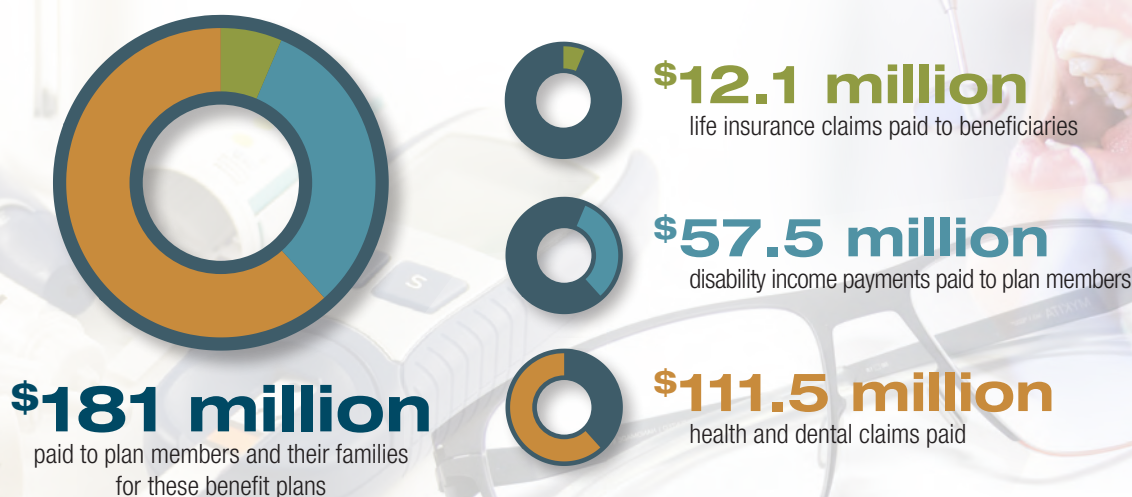
- 74 per cent of plan members who received treatment funding returned to work;
- 92 per cent returned to their own job without restrictions;
- 5 per cent returned with an accommodation; and
- 3 per cent returned to an alternate occupation.

In 2024, 1,331 health-care professionals successfully returned to the workplace, strengthening Saskatchewan's health-care workforce.

## Claims paid in 2024

3sHealth administers 10 Saskatchewan health-care system Employee Benefit Plans, including the Group Life Insurance Plan, Extended Health Care and Enhanced Dental Plan, and the Disability Income Plans. Since 1967, the 3sHealth Employee Benefits team has acted as the administrator of the plans. 3sHealth Employee Benefits supports the Board of Trustees and manages the employee benefit plan investments and trust fund assets of \$603.4 million. In addition to running day-to-day operations, the 3sHealth Employee Benefits team provides customer service and support to 67 health-care employers, 46,000 active plan members, and 20,000 retirees. The team adjudicates disability claims, pays disability benefits, performs the weekly and annual eligibility determination on behalf of all health-care employers, assesses lifestyle spending account claims, and facilitates and pays life insurance claims.

### Benefits paid in 2024



## We take care of the caregivers

In 2024, the Employee Benefit Plan trusts paid \$181,023,320 in Group Life insurance, Disability Income Plan benefits, and health and dental claim reimbursements to eligible plan members. This amount represents a four per cent increase over the total for claims paid in 2023.

### Group Life insurance

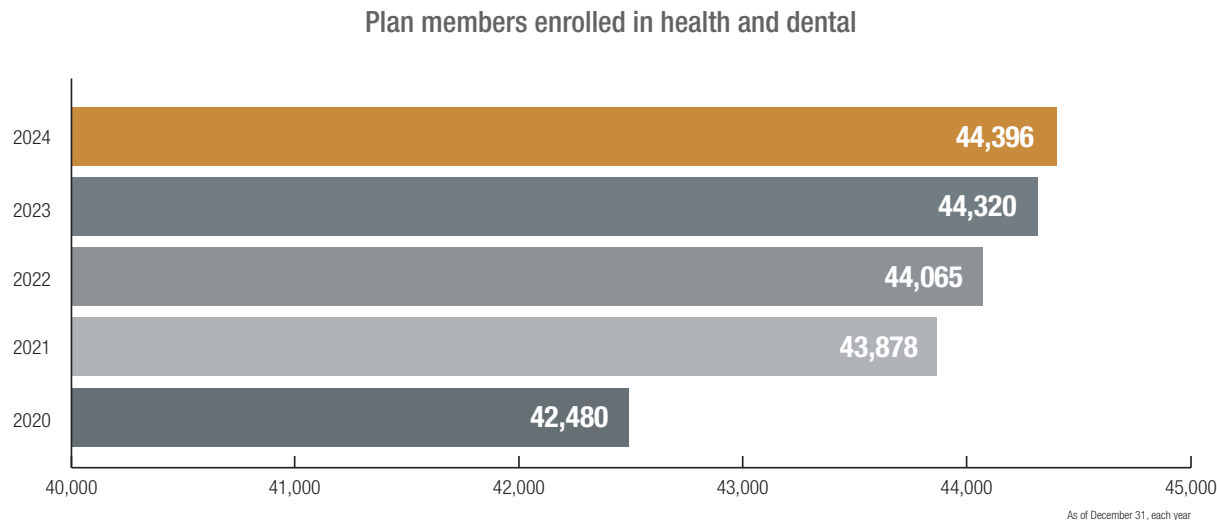
- **Total payments:** The Group Life Insurance Plan paid \$12,103,922. This includes \$11,278,922 that was paid to loved ones when a plan member passed away.
- **Payments for spouse or child:** The plan also paid \$825,000 directly to plan members when their spouse or child passed away.

### Disability Income Plans

- **Total payments:** \$57,450,406 issued to plan members for approved disability claims.
- **Number of claims:** 3,642 claims, reflecting an increase of over \$3 million compared to 2023.

## Health and dental plans

The number of plan members enrolled in health and dental has been increasing each year.



In total, there were 112,756 individuals covered, including spouses and dependents, with 1,657,848 health and dental claims submitted. There was \$111,448,992 paid to plan members for eligible claims.

### Dental plans

- **Enrollment:** 44,396 plan members
- **Total reimbursements:** \$51,842,860, a 10 per cent increase over 2023.
- **Coverage:** Based on the 3sHealth Maximum Reimbursement Schedule, which is updated annually in line with the Saskatchewan Dental Association Fee Guide.
- **Top contributors to dental costs:**
  - Minor restorative procedures.
  - Diagnostic services.
  - Dentures and bridges.
  - Oral surgery.
- **Key trend:** The increase in the average amount paid per claim drove overall spending growth.

### Extended health care plans

- **Enrollment:** 44,249 plan members.
- **Total reimbursements:** \$59,606,132, covering 1,283,797 claims.
- **Primary cost drivers:**
  - **Drugs:** Continued strong growth in diabetes treatments and supplies, and central nervous system agents.
  - **Paramedical services:** Increased use of psychology and social work services.
  - **Supplies:** Hearing aids drove most of the cost increase.
  - **Prescription medication:** Largest cost driver at \$22,609,268 reimbursed.

2023 rank	2024 rank	Therapeutic classification	Total amount paid	% Total amount paid	# of claimants
1	1	Diabetes treatments and supplies	\$4,229,484	18.7%	6,674
2	2	Depression	\$2,344,486	10.4%	16,666
4	3	Central nervous system agent	\$2,219,315	9.8%	3,900
3	4	Cardiac disease/blood pressure	\$1,614,603	7.1%	15,514
5	5	Allergies/respiratory diseases	\$1,209,091	5.4%	15,469
6	6	Skin disorders/acne	\$1,136,966	5.0%	14,072
8	7	Gastrointestinal/ulcers	\$955,428	4.2%	13,461
7	8	Birth control	\$930,353	4.1%	6,321
9	9	Rheumatoid arthritis	\$889,389	3.9%	292
10	10	Cholesterol disorders	\$769,305	3.4%	9,287
Top 10 total				72.0%	

- **Mental health claims:**

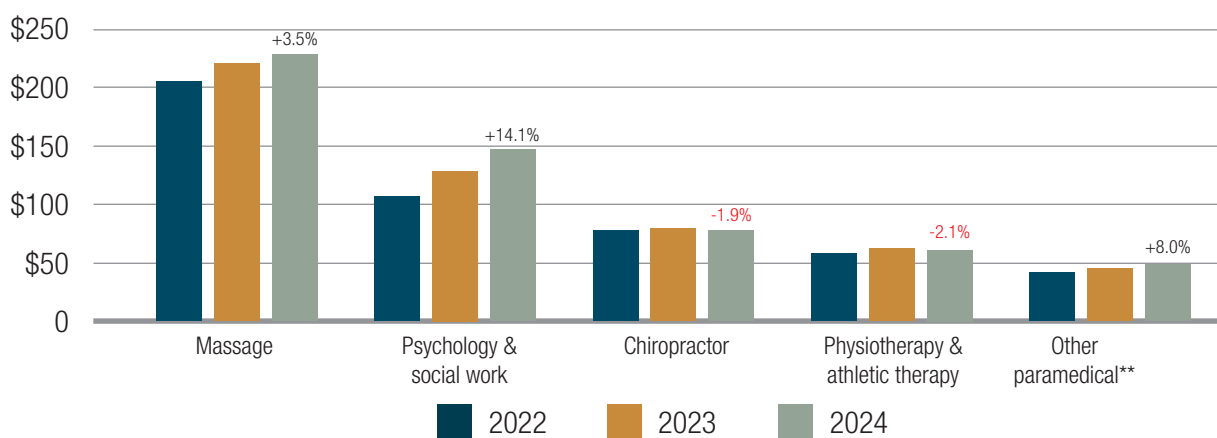
- Total paid increased 12 per cent from 2023 to 2024.
- Psychology and social work services reimbursement grew 16.7 per cent.
- Families received \$6.03 million for psychology/social worker treatment (7,777 unique claimants).

- **Massage therapy:**

- \$9,101,726 paid to plan members.
- 33,276 members or dependents submitted at least one claim.
- Massage therapy had the highest average amount paid per claimant, while psychology and social work saw the largest increase from 2023 to 2024 (see chart below).

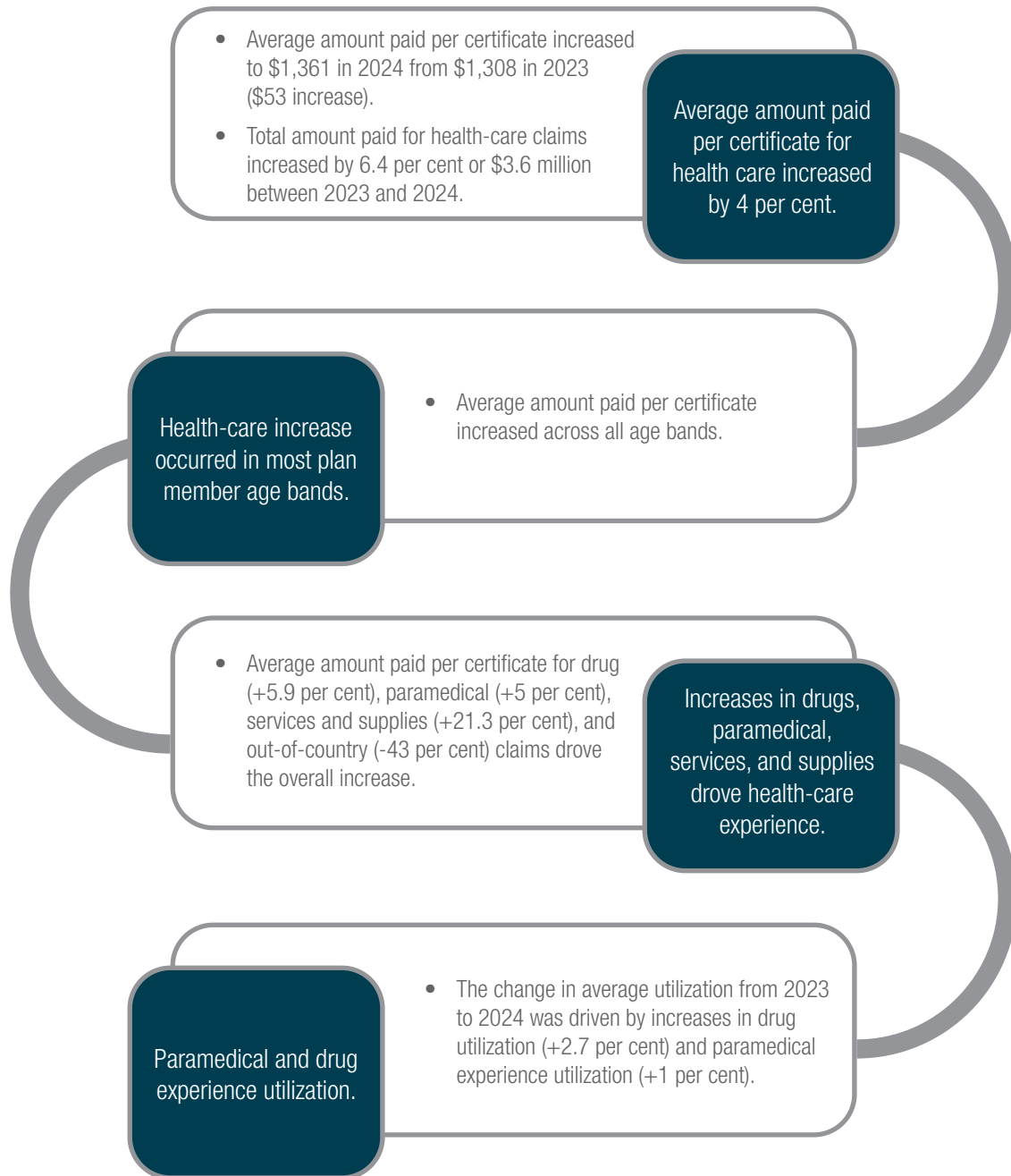
#### Paramedical average paid increase driven by psychology and social work

Average amount paid per certificate\*



\* A certificate includes a plan member and their dependants

## Summary of health-care experience





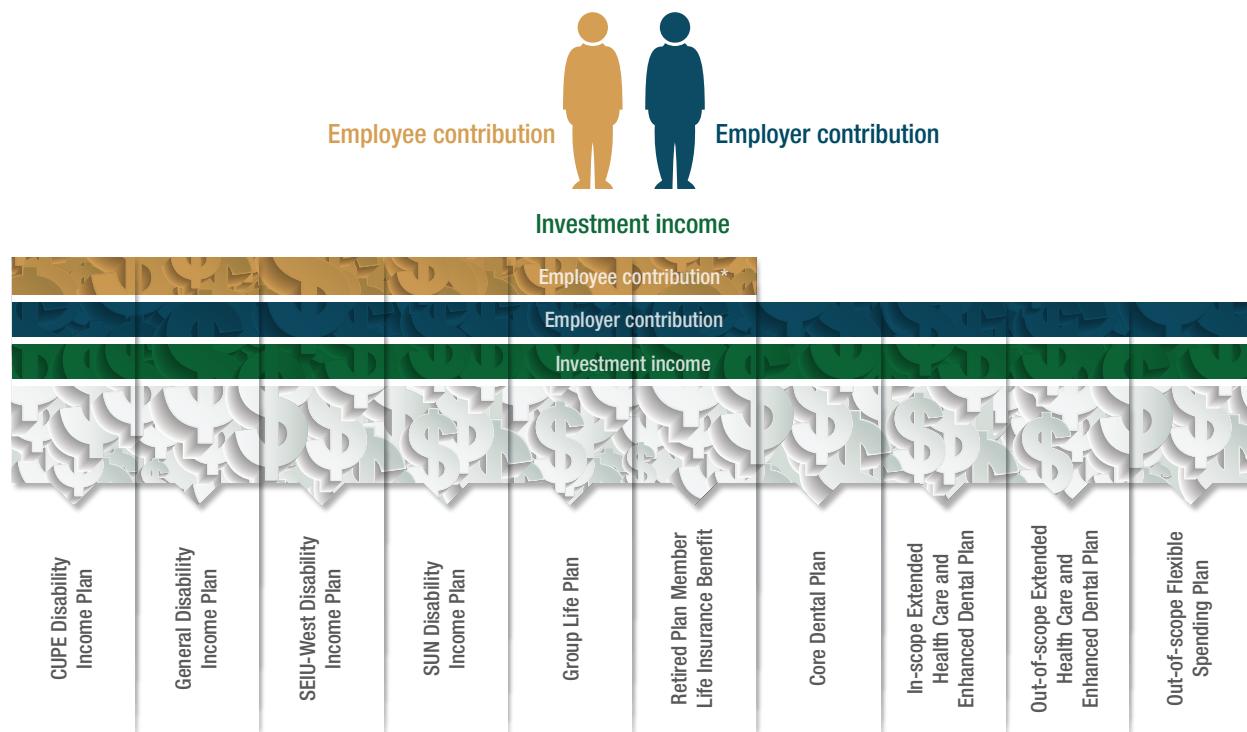
# What are the Employee Benefit Plans?

There are 10 health system Employee Benefit Plans. Saskatchewan health-care system employees are enrolled in a plan depending on where they work and their union membership.

The Employee Benefit Plans are governed with reference and adherence to the Saskatchewan Health Authority collective bargaining agreements and the out-of-scope terms and conditions. Other Saskatchewan health-care employers can participate in the plans. Depending on an employer's collective bargaining agreements or personnel policies, premiums and contributions may be paid by the employer, the employee, or with costs shared between them.

## How are the plans funded?

Employers and employees contribute funds to these plans to be held in trust and administered on their behalf. The Board of Trustees has the ultimate fiduciary responsibility for the plan trusts. The trustees oversee the governance of the plans and appoints 3sHealth to administer the plans.



\* Some participating organizations have a different cost-sharing arrangement compared to the one depicted here.

These plans are:

- CUPE Disability Income Plan
- General Disability Income Plan
- SEIU-West Disability Income Plan
- SUN Disability Income Plan
- Core Dental Plan
- In-scope Extended Health Care and Enhanced Dental Plan

- Out-of-scope Extended Health Care and Enhanced Dental Plan
- Group Life Insurance Plan
- Retired Plan Member Life Insurance Benefit Plan
- Out-of-scope Flexible Spending Plan

3sHealth's legislation, *The Health Shared Services Saskatchewan (3sHealth) Act*, sets out that 3sHealth may establish, operate, administer, support, or manage employee benefit, insurance, and disability plans and related trusts.

## Summary of investments

### Market overview

2024 saw very strong returns in both the equity and bond markets. Global equity market returns were in the double digits, with the Canadian stock market above 20 per cent and the U.S. approaching 30 per cent, driven largely by the technology and financial sectors as recession fears eased. Canadian fixed income markets benefitted from a drop in the Bank of Canada's policy interest rate of 1.75 per cent in 2024, ending the year at 3.25 per cent.

Within alternative investments, the real estate sector continues to face valuation and vacancy challenges; however, the outlook is improving, with the office sector in particular showing signs of stability. Infrastructure investments continued to provide a relatively consistent return profile.

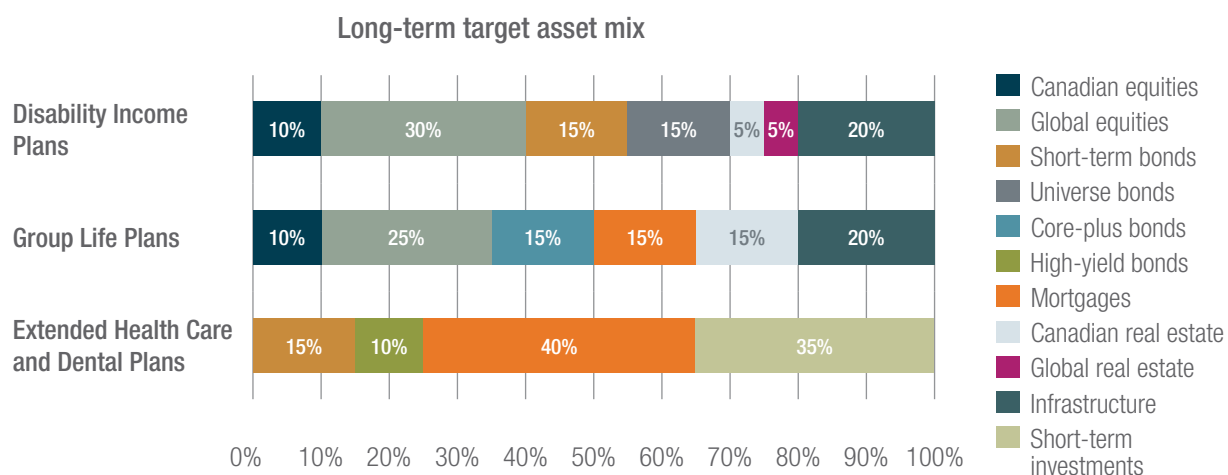
Heading into 2025, U.S. tariffs and fiscal policy decisions have caused significant volatility in global stock markets. However, the plans remain well positioned, with diversified risk exposures that include asset classes and investment funds that are less sensitive to an economic slowdown.

Performance as at December 31, 2024 (Net of Fees)	Total Assets	Portfolio Returns			
		1 Year	2 Years	4 Years	10 Years
<b>Disability Income Plans</b>	<b>\$ 285,158,000</b>	<b>10.7%</b>	<b>9.3%</b>	<b>7.1%</b>	<b>6.2%</b>
Market Benchmark Portfolio		13.1%	11.3%	6.3%	6.6%
Plans vs Benchmark		-2.4%	-2.0%	0.8%	-0.4%
<b>Group Life Plans</b>	<b>\$ 105,168,000</b>	<b>13.3%</b>	<b>11.1%</b>	<b>6.7%</b>	<b>5.9%</b>
Market Benchmark Portfolio		10.6%	8.9%	5.5%	6.0%
Plans vs Benchmark		2.7%	2.2%	1.2%	-0.1%
<b>Extended Health Care and Dental Plans</b>	<b>\$ 213,070,000</b>	<b>5.4%</b>	<b>6.4%</b>	<b>1.8%</b>	<b>2.6%</b>
Market Benchmark Portfolio		6.2%	6.4%	1.7%	2.4%
Plans vs Benchmark		-0.8%	0.0%	0.1%	0.2%

### 2024 investment highlights

- All plans had positive rates of return for the year, with double-digit returns for the Disability Income Plans and the Group Life Insurance Plan and Retired Plan Member Life Insurance Benefit Plan (RIB) driven by strong equity returns.

- The Group Life Insurance Plan and RIB outperformed their benchmark portfolio over the year. While the Disability Income Plans delivered strong absolute one-year returns, they lagged behind the benchmark portfolio. The defensive nature of the Disability Income Plans' portfolio helps protect capital during periods of market weakness, as demonstrated by strong relative returns in the first months of 2025.
- The plans have produced strong relative performance over the past four years, with all plans outperforming their respective benchmark portfolios.
- The Extended Health Care and Dental Plans implemented a new asset mix at the start of 2024, aiming to capitalize on a more favourable outlook for fixed income.



For more detail on the financial performance of the plans, please see the *Financial Highlights* and *Summary Financial Information* sections of this report, starting on page 30.

## GMS 3sHealth Retiree Health and Dental Plan

3sHealth understands that the loss of health and dental coverage at retirement happens at a time when personal income may be limited and health issues may be more frequent.

3sHealth partners with Group Medical Services (GMS) to offer retired plan members the option to join the GMS 3sHealth Retiree Health and Dental Plan. Coverage is guaranteed if elected in the first ninety days of retirement. Retired plan members can elect health, dental, or both health and dental coverage for themselves and their eligible family members.

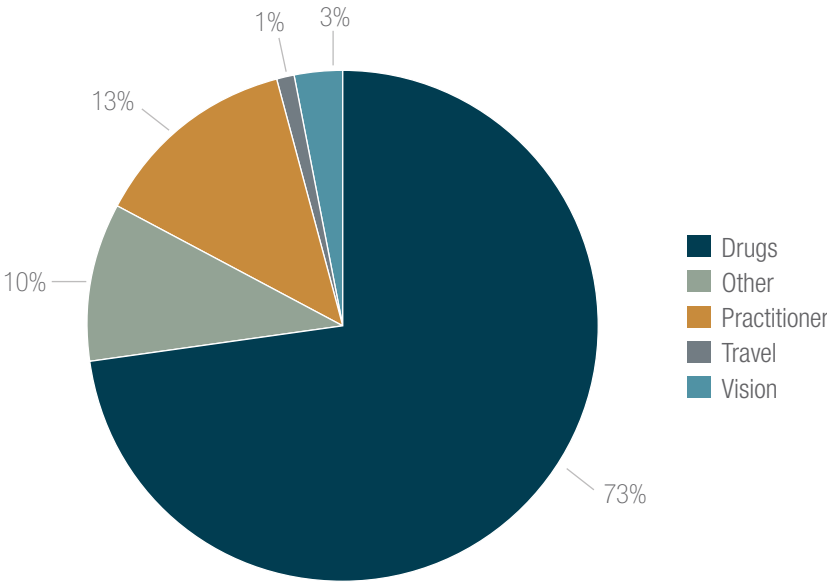
3sHealth offers the GMS 3sHealth Retiree Benefits Plan as a service to retired plan members. GMS provides all administrative and customer service from its offices in Regina.

The GMS 3sHealth Retiree Health and Dental Plan is 100 per cent plan-member paid. In 2024, plan membership grew by 3 per cent, up to a total of 7,956 individual members participating. Over half of plan members participate in couple or family coverage.

In 2024, the plan paid \$15,882,621 in claims to retired plan members.

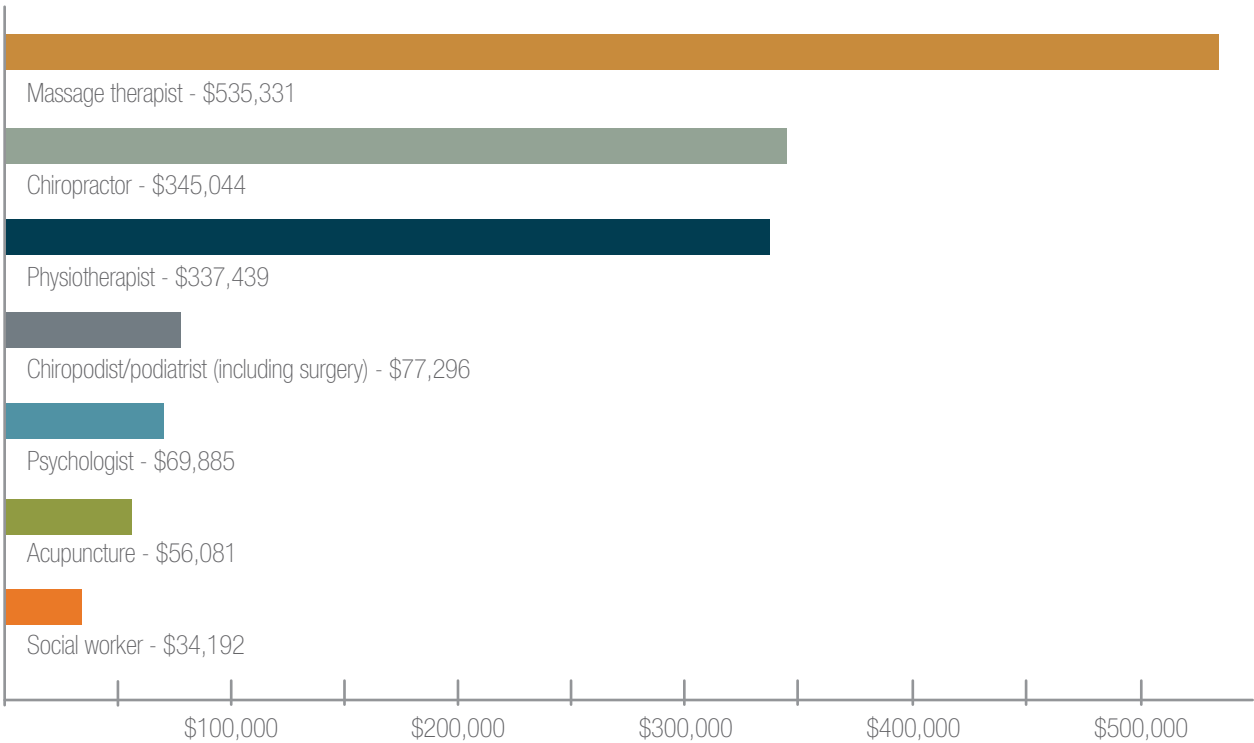
Prescription claims made up 73 per cent of all health claims paid, with \$8,014,021 reimbursed to plan members. The most expensive drug was Abrilada, which is used to reduce the signs and symptoms of rheumatoid arthritis.

The highest prescription drug cost was for Ozempic, with \$399,595 reimbursed to plan members.



Paramedical practitioners was the next highest category, with 13 per cent of health claims paid totaling \$1,455,267. The most used service was massage therapy, with \$535,331 reimbursed to plan members.

Paramedical reimbursement values



In 2024, plan members were reimbursed \$296,153.87 for vision claims. This is a decrease of 0.6 per cent from 2023.

For the dental plan, a total of \$4,906,950 was reimbursed to retired plan members. The number of dental claims submitted increased by 7 per cent over the previous year with the average claim amount increased to \$733 per person, which is a 2.5 per cent increase over 2023.

# Service metrics

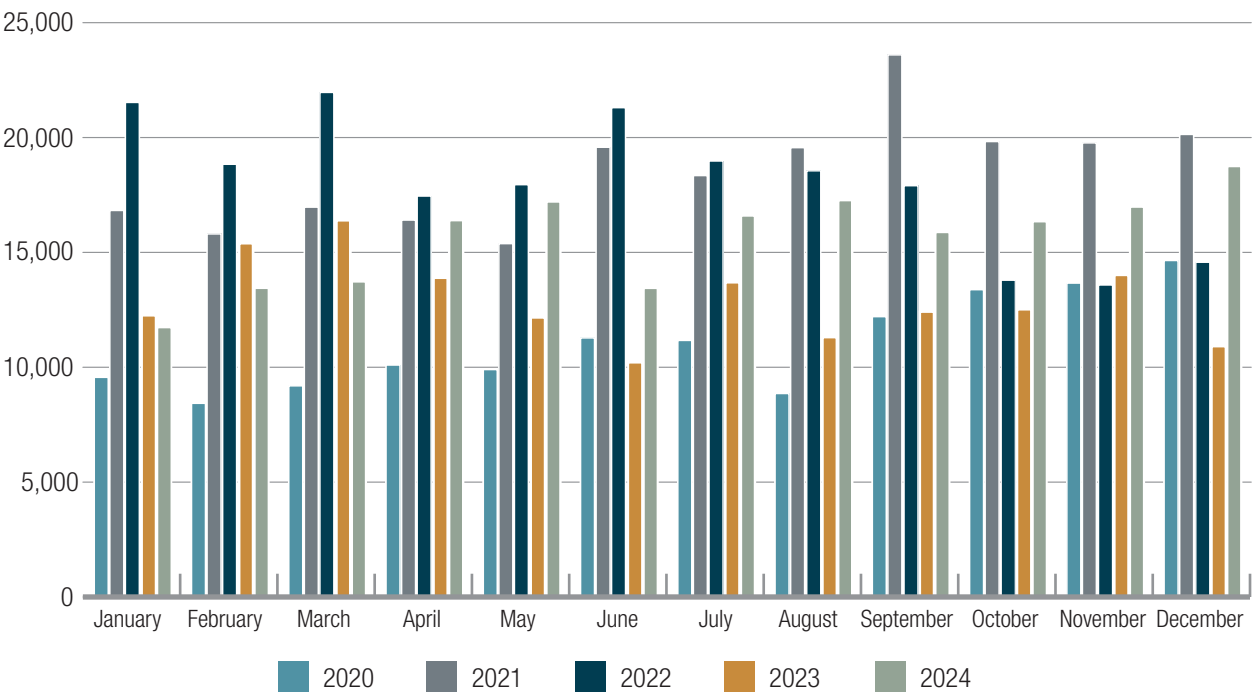
3sHealth’s Employee Benefits team prides itself on providing world-class customer service to plan members to “take care of the caregivers.”

The charts below show how the volume of service requests has increased significantly since 2018. 3sHealth has increased its staffing complement and continued to improve its processes to meet the increased demand for service.

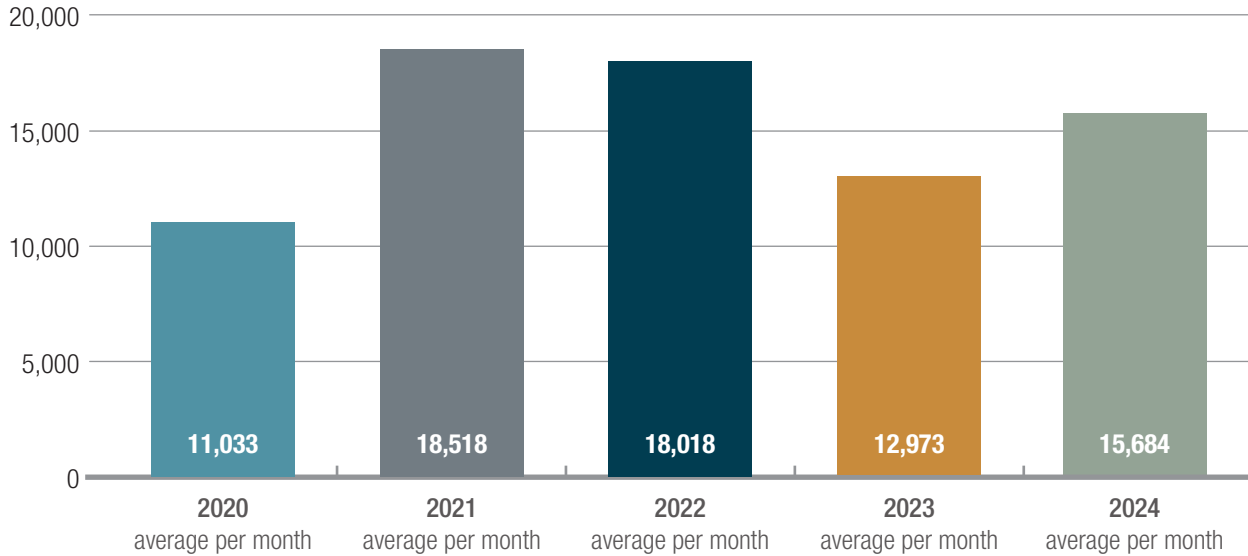
The Employee Benefits team measures service metrics monthly. These reports are provided to the 3sHealth senior leadership team and the Board of Trustees. The metrics are reported and reviewed with the trustees on a quarterly basis in accordance with the service agreements.

## All work by month for the Employee Benefits team

Includes initial disability applications, incoming and outgoing phone calls, online support chats, emails, paper and electronic requests, and system queries.



Average service requests per month



### Quarterly service metrics

3sHealth Employee Benefits sets service standard targets to ensure that plan members are receiving prompt responses to all their benefits inquiries. Striving to meet and exceed these targets is one way that the Employee Benefits team takes care of the caregivers.

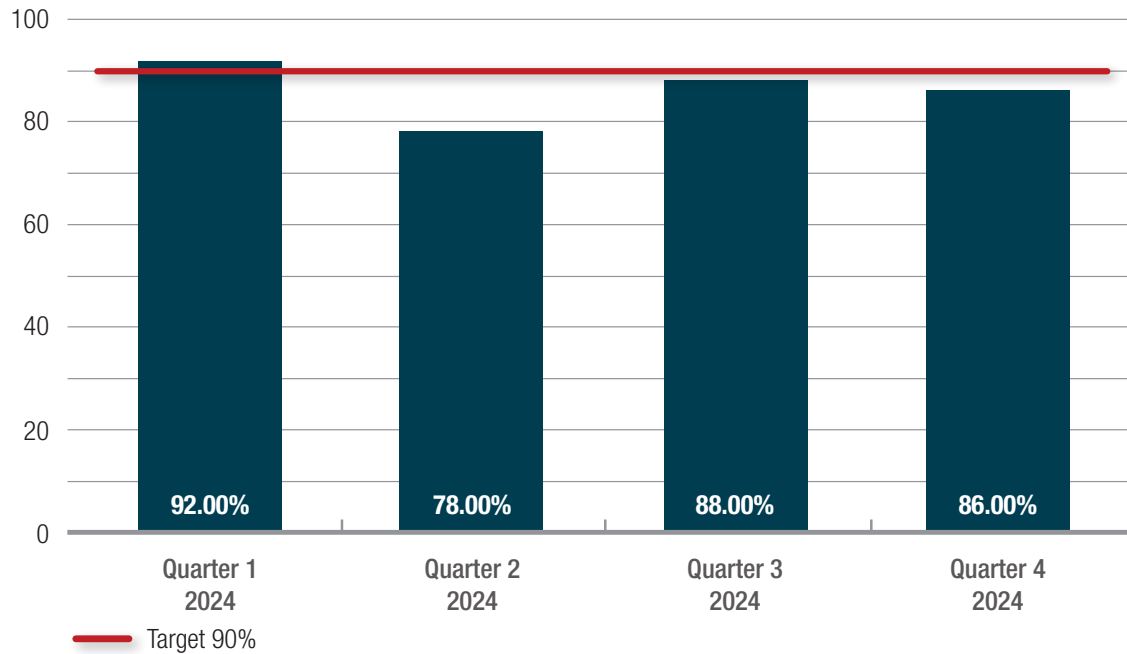
Because of the EBP team's commitment to take care of the caregivers, we set very high standards for our customer service targets. While most of these quarterly measurements reach or come close to reaching these goals, the email correspondence and document processing targets did not. These categories were impacted by the transition to new systems, including adjusting to the requirements of the transition and the learning curve that comes with new processes.

In all cases, the Employee Benefits team prioritizes all documents with potential financial impacts as first priorities.



### Benefits customer contact - quarterly

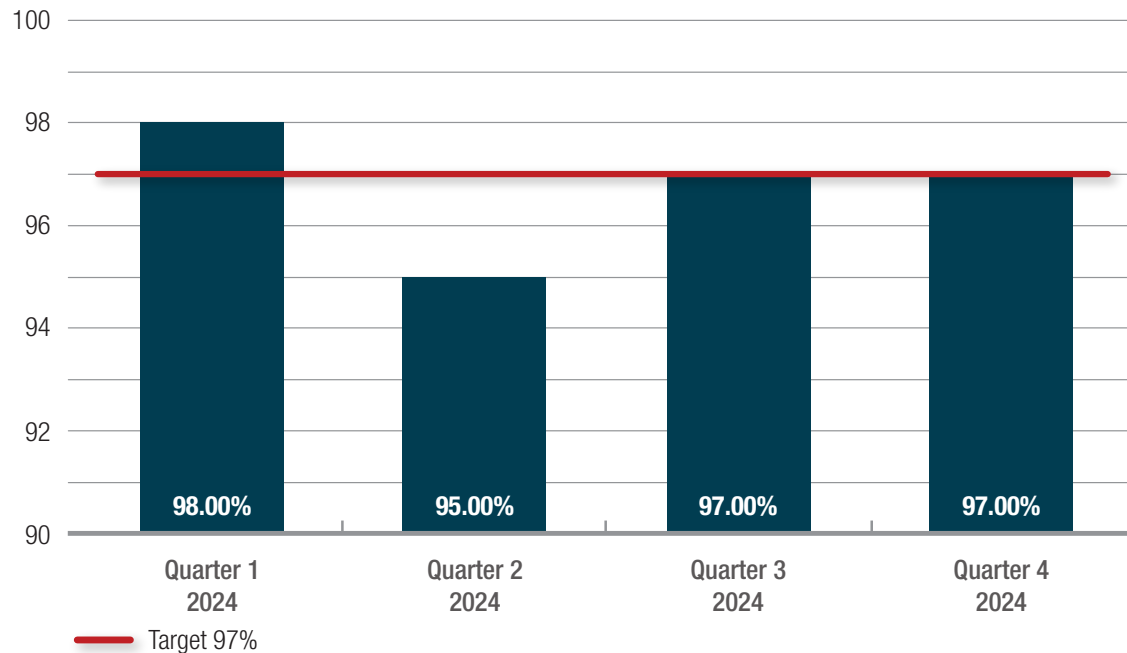
Percentage of phone calls and online support chats responded to within the standard of 30 seconds



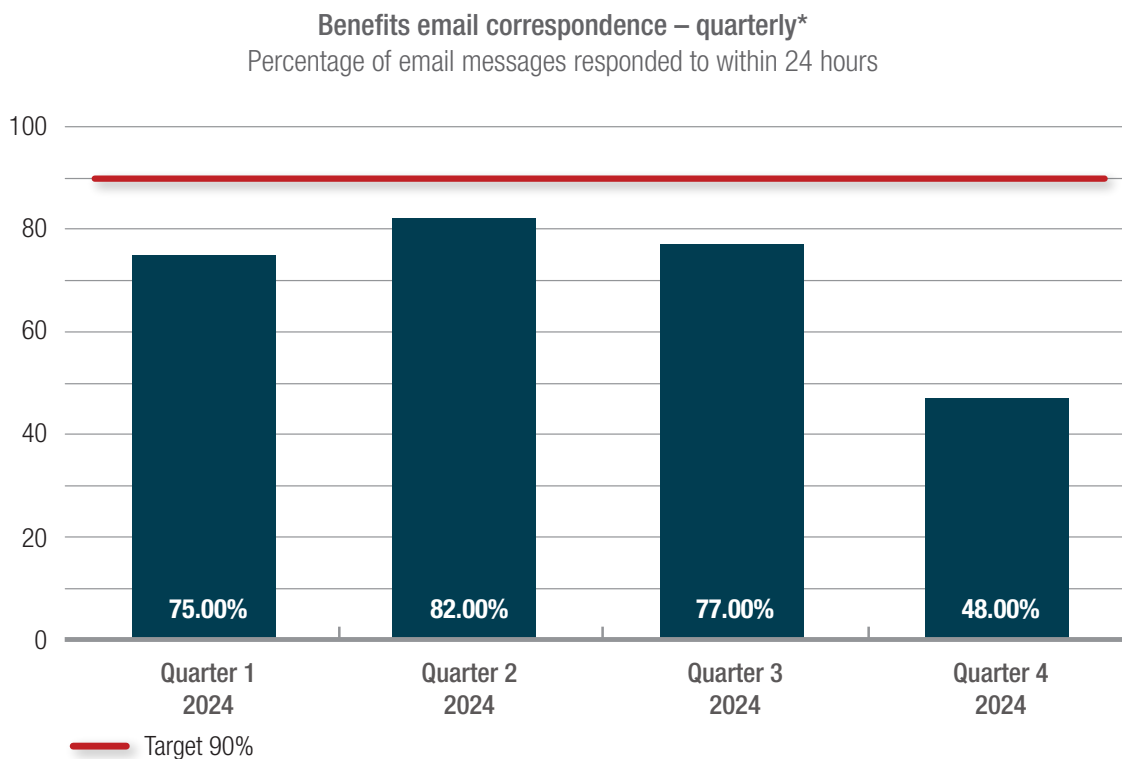
The Employee Benefits team answered 53,442 calls and online support chats in 2024, representing an eight per cent increase from the previous year, which saw 49,336.

### Benefits phone quality - quarterly

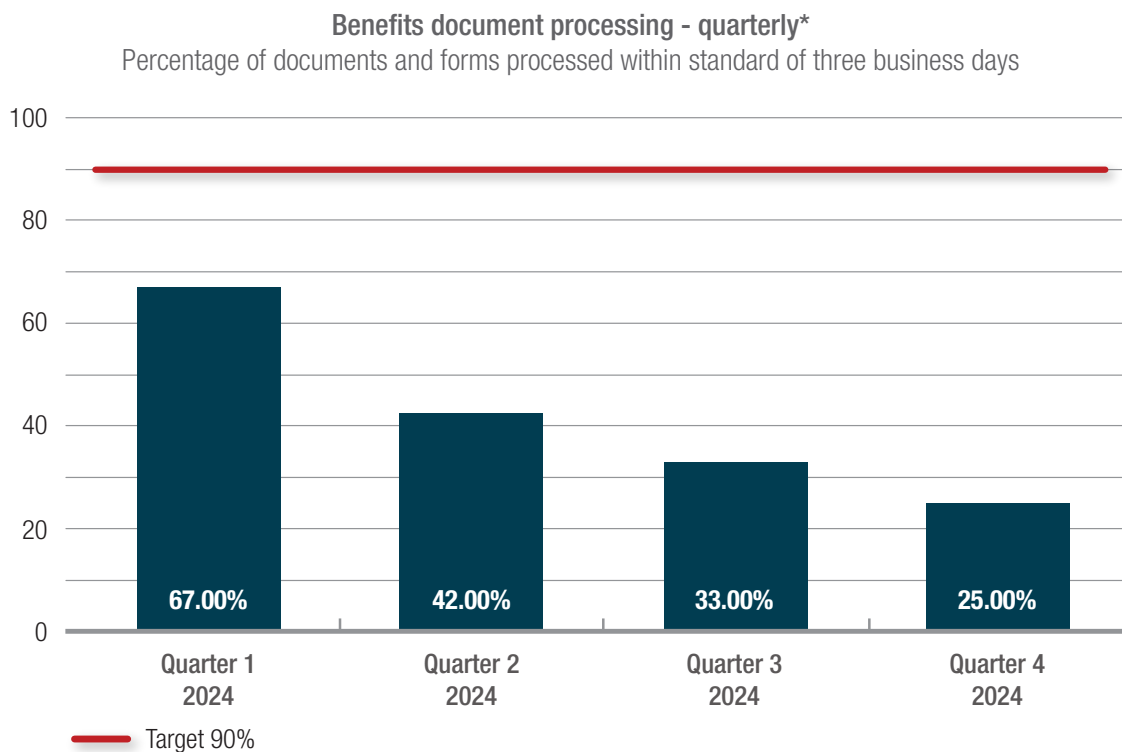
Percentage of audited calls within standard of 97 per cent audited



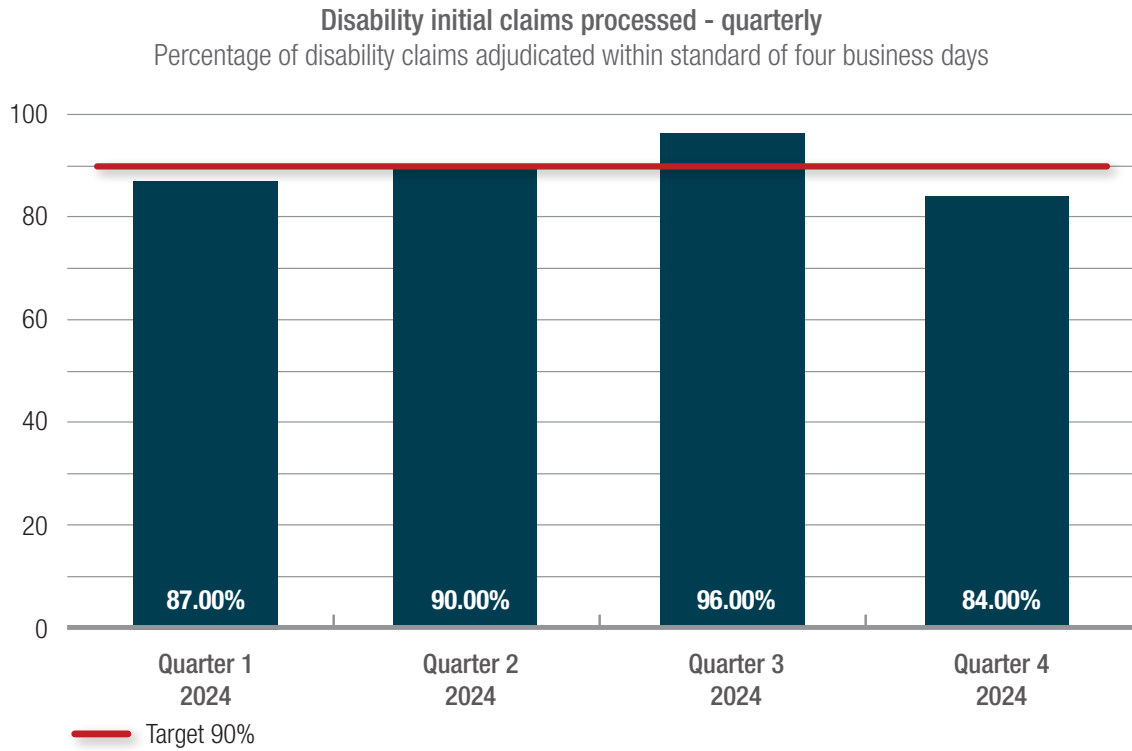
Benefit Services Officers are also empowered to audit their own calls. By reviewing their own performance, Benefit Services Officers are able to build improvement plans to provide better service to plan members.



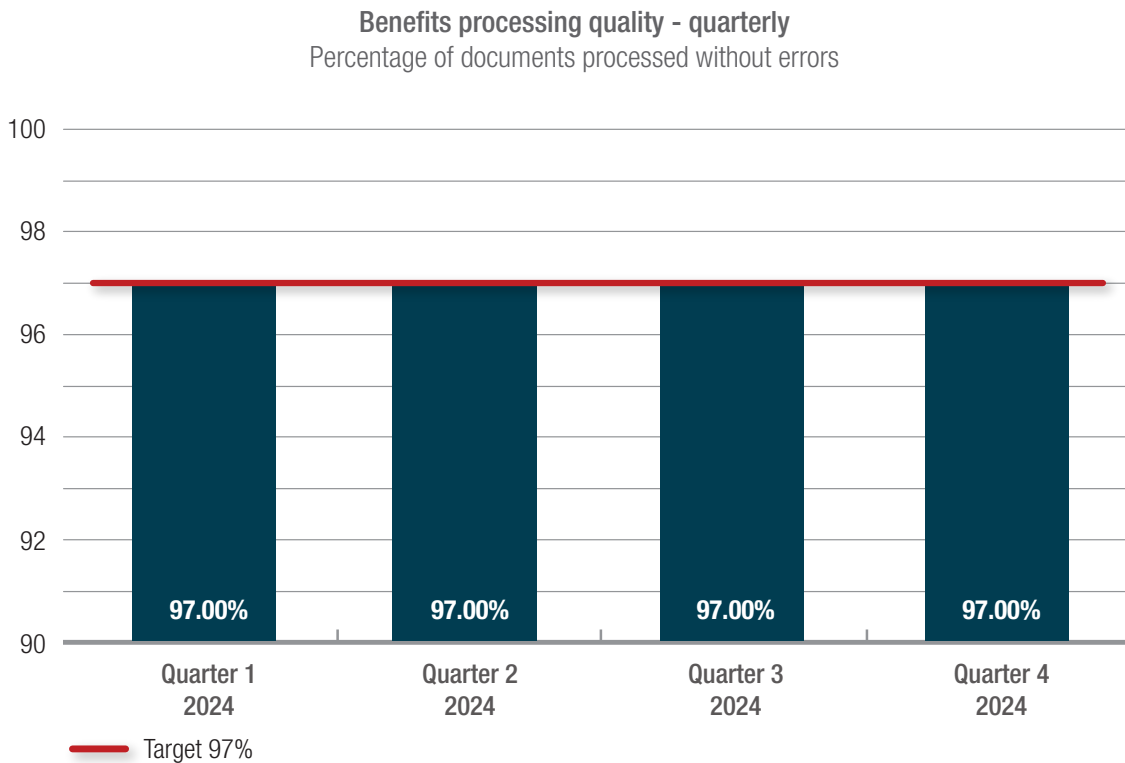
The Employee Benefits team responded to 18,712 email messages in 2024, representing a 31 per cent increase over the 14,236 emails received in the previous year.

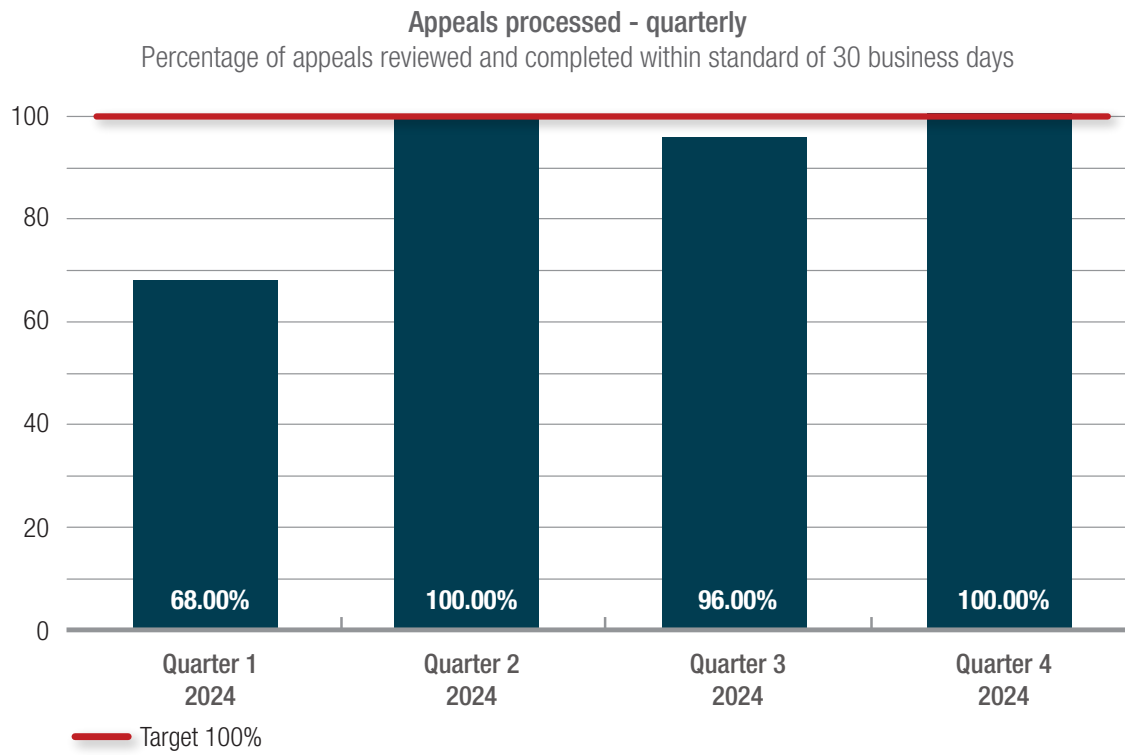


The Employee Benefits team processed 90,419 documents and forms during this time period.



Since the COVID 19 pandemic, DIP applications have increased, and this trend has continued into 2024. In 2024, 3sHealth paid 3,642 disability income claims, compared with 3,583 in 2023. This was an increase of 1.6 per cent year over year.





## Financial highlights

The 3sHealth Employee Benefit Plan's financial statements are prepared in accordance with Canadian accounting standards for pension plans as prescribed by the Chartered Professional Accountants of Canada (CPA Canada) Handbook section 4600, Pension Plans. Key financial information has been summarized for the purpose of this annual report, based on the information presented in the audited financial statements. Copies of the audited financial statements are available online at [www.3shealth.ca/pdfs/ebp-docs/EBP-2024-Financials-Statements.pdf](http://www.3shealth.ca/pdfs/ebp-docs/EBP-2024-Financials-Statements.pdf) or upon request. The financial highlights are intended to be read in conjunction with the December 31, 2024, *Summary of Financial Information*, beginning on page 33 of this annual report.

### Disability Income Plans

For the year ended December 31, 2024, three of the four Disability Income Plans (CUPE, General, and SUN) saw an increase in net assets while one Disability Income Plan (SEIU-West) saw an in-year decrease. The net overall increase across the four plans was \$7.5 million, compared to a decrease in net assets of \$639 thousand in the prior fiscal year (2023).

Investment performance during the year was a key item leading to the overall increase in net assets. All four Disability Income Plans experienced an increase in both investment income and realized gains over the prior year. The equity markets posted positive returns due to the moderate easing of interest rates, resilient economic growth, and continued momentum in the artificial intelligence boom. Contribution revenue also increased over the prior year due to a combination of increased membership, annual salary increases, and increased contribution rates in the General and SUN Disability Income Plans.

2024 continued to see increases in disability applicants across the plans, resulting in an increase in total disability benefit payments made to claimants in all Disability Income Plans.

The disability plans receive an actuarial valuation annually to account for the future disability obligations to be paid from the plans. This estimate accrues future disability obligations, based on plan experience and a number of assumptions about future events. For the year ended December 31, 2024, all four Disability Income Plans saw an increase in the future disability obligation over the prior year.

The actuary also calculates a funding ratio, which identifies whether the plans hold enough assets to pay out disability benefits to current and future members. All four Disability Income Plans were considered fully funded in both the current and prior fiscal years.

### Health and dental plans

For the year ended December 31, 2024, the Core Dental Plan, and Out-of-scope Extended Health Care and Enhanced Dental Plan saw a decrease in net assets, while the In-scope Extended Health Care and Enhanced Dental Plan experienced an increase in net assets. The net change across the three plans was a \$359 thousand decrease, compared to an increase in net assets of \$9.9 million in the prior fiscal year (2023).

2024 saw large increases in both dental claims and health premiums paid during the year as a result of increased claim activity within the plans. This was partially offset by an increase in contribution revenue over prior year due to a combination of increased membership, and increased contribution rates in the Core Dental and Out-of-scope Extended Health Care and Enhanced Dental plans.

Investment performance varied amongst the plans based on activity during the year. Overall, the fixed income markets underperformed due to persistent inflation and fiscal uncertainty. Both the Core Dental Plan and the Out-of-scope Extended Health Care and Enhanced Dental Plan received lower interest income, while the In-scope Extended Health Care and Enhanced Dental Plan saw significantly lower unrealized gains compared to the prior fiscal year.

All three health and dental plans have restricted a portion of net assets (Rate Stabilization Fund), intended to absorb negative plan experience fluctuations and promote rate stability. As this is tied to the health and dental costs of the plan, all three health and dental plans saw an increased restriction in net assets related to the Rate Stabilization Fund over 2023.

### **Group Life Insurance Plan**

For the year ended December 31, 2024, the Group Life Insurance Plan saw an increase in net assets of \$10 million, compared to an increase of \$6.5 million in 2023. The largest contributing factor to the year-over-year increase was the strong investment performance in dividend income, as well as both realized and unrealized gains. Similar to the disability plans, the Group Life investment portfolio saw positive returns due to the moderate easing of interest rates, and resilient economic growth.

The Group Life Insurance Plan utilizes two restricted amounts from net assets as a way to manage fluctuations and unforeseen circumstances. The Rate Stabilization Fund is intended to absorb negative plan experience fluctuations and to promote rate stability. This fund can be drawn upon if claims exceed contributions while the Multi-year Catastrophic Loss Reserve is held to provide the plan with a temporary additional funding source during an event, such as a pandemic. This fund can only be accessed with approval from the Board of Trustees based on identified criteria.

The Group Life Insurance Plan receives two actuarial valuations annually to estimate future benefit obligations for the plan. These are based on plan experience and a number of assumptions about future events. For the year ended December 31, 2024, there was an increase in the benefit obligations over prior year of \$4.8 million.

### **Out-of-scope Flexible Spending Plan**

For the year ended December 31, 2024, the Out-of-scope Flexible Spending Plan saw an increase in net assets of \$183 thousand, compared to an increase of \$255 thousand in 2023. The largest contributing factor to the year-over-year decrease was lower contribution revenue. Prior to 2022, the full health spending credits for all eligible members were invoiced to participating organizations and any unused credits were returned at the end of the second year. In order to meet certain criteria for income tax legislation changes, the plan was required to discontinue the return of unused credits. As a result of maintaining these credits, the plan assesses the funding requirements on an annual basis based on net assets available for benefits and expected claims activity for the year.

The Health Spending Account claims expense also increased year over year. This expense will fluctuate based on the number of claims submitted during the year. In 2024, claims increased by \$115 thousand due to a higher number of members utilizing these benefits.

The plan calculates an annual year-end accounting estimate for financial reporting purposes to estimate the cost of claims that have been incurred but not yet reported at year end. For the year ended December 31, 2024, there was a decrease in the provision for unpaid claims as a result of lower claim volumes submitted during the 60-day period after the end of the calendar year.



## Management's Responsibility for Financial Information

The Employee Benefit Plans are administered by Health Shared Services Saskatchewan (3sHealth). The summary of financial information and all other information contained in the Annual Report is the responsibility of 3sHealth management and has been approved by the Board of Trustees.

Management prepared the nine sets of financial statements in accordance with Canadian public sector accounting standards. Copies of the audited financial statements and the Auditor's Reports are available online at [www.3shealth.ca/pdfs/ebp-docs/EBP-2024-Financials-Statements.pdf](http://www.3shealth.ca/pdfs/ebp-docs/EBP-2024-Financials-Statements.pdf) or upon request. Key financial information from the audited financial statements has been summarized for the purpose of this Annual Report. Management is responsible for the reliability and integrity of the financial summaries and other information contained in the Annual Report. All financial information presented in this Annual Report is consistent with that in the audited financial statements.

Management maintains a comprehensive system of internal controls to ensure that transactions are accurately recorded on a timely basis, are properly approved and result in reliable financial statements. The adequacy and operation of the control systems are monitored on an ongoing basis by the internal audit department.



Mark Anderson  
CEO



Tim Frass  
Vice-president, Supply Chain Services  
and Chief Financial Officer

**Summary Financial Information**  
Health Shared Services Saskatchewan  
Employee Benefit Plans  
As at December 31, 2024

**Disability Income Plans**  
**Health Shared Services Saskatchewan**  
**Summary of Financial Information**  
**As at December 31, 2024**  
*(thousands of dollars)*

	Disability Income Plan - C.U.P.E.		Disability Income Plan - S.E.I.U. West		Disability Income Plan - General		Disability Income Plan - S.U.N.		Total	
	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023
<b>Assets</b>										
Investments	\$ 79,331	\$ 77,228	\$ 53,068	\$ 52,250	\$ 60,423	\$ 57,886	\$ 92,371	\$ 87,537	\$ 285,193	\$ 274,901
Cash	170	590	239	865	632	927	531	986	1,572	3,368
Accounts receivable employees	523	452	430	402	359	303	468	382	1,780	1,539
Accounts receivable employers	523	452	430	402	359	303	550	446	1,862	1,603
Accounts receivable other	227	215	159	216	187	321	150	103	723	855
<b>Total Assets</b>	<b>80,774</b>	<b>78,937</b>	<b>54,326</b>	<b>54,135</b>	<b>61,960</b>	<b>59,740</b>	<b>94,070</b>	<b>89,454</b>	<b>291,130</b>	<b>282,266</b>
<b>Liabilities</b>										
Accounts payable	980	587	920	472	662	404	757	492	3,319	1,955
<b>Total Liabilities</b>	<b>980</b>	<b>587</b>	<b>920</b>	<b>472</b>	<b>662</b>	<b>404</b>	<b>757</b>	<b>492</b>	<b>3,319</b>	<b>1,955</b>
<b>Net Assets Available for Benefits</b>	<b>79,794</b>	<b>78,350</b>	<b>53,406</b>	<b>53,663</b>	<b>61,298</b>	<b>59,336</b>	<b>93,313</b>	<b>88,962</b>	<b>287,811</b>	<b>280,311</b>
Provision for future disability obligation	40,307	35,994	33,949	31,477	43,691	43,661	64,858	59,782	182,805	156,941
<b>Surplus</b>	<b>\$ 39,487</b>	<b>\$ 42,356</b>	<b>\$ 19,457</b>	<b>\$ 22,186</b>	<b>\$ 17,607</b>	<b>\$ 15,675</b>	<b>\$ 28,455</b>	<b>\$ 29,180</b>	<b>\$ 105,006</b>	<b>\$ 123,370</b>
<b>Increase in Net Assets</b>										
Contributions - Employees	\$ 5,983	\$ 5,880	\$ 5,164	\$ 5,177	\$ 4,337	\$ 3,723	\$ 5,388	\$ 4,899	\$ 20,872	\$ 19,679
Contributions - Employers	5,983	5,880	5,164	5,177	4,337	3,723	6,325	5,751	21,809	20,531
Dividend income	626	625	409	421	456	465	739	724	2,230	2,235
Commingled fund income	1,061	228	717	154	841	181	1,297	279	3,916	842
Interest income	1,184	1,057	812	721	925	804	1,359	1,214	4,280	3,796
Partnership income	27	-	20	-	24	-	35	-	106	-
Realized gain on investments	1,888	385	1,228	364	1,356	432	2,131	648	6,603	1,829
Unrealized gain on investments	3,729	4,255	2,451	2,805	2,790	3,091	4,402	4,553	13,372	14,704
Recoveries	870	343	654	235	207	119	411	281	2,142	978
<b>Total Increase in Net Assets</b>	<b>21,351</b>	<b>18,653</b>	<b>16,619</b>	<b>15,054</b>	<b>15,273</b>	<b>12,538</b>	<b>22,087</b>	<b>18,349</b>	<b>75,330</b>	<b>64,594</b>
<b>Decrease in Net Assets</b>										
Disability benefits	17,073	16,306	14,101	13,050	11,049	10,604	15,219	14,668	57,442	54,628
Administrative expenses	1,379	1,454	1,379	1,326	1,379	1,325	1,378	1,325	5,515	5,430
Consulting fees	762	656	701	697	353	279	352	388	2,168	2,020
Custodian fees	8	8	7	7	7	7	9	8	31	30
Fund management fees	574	666	389	463	415	484	627	700	2,005	2,313
Partnership loss	-	54	-	39	-	39	-	57	-	189
Professional fees	111	125	299	272	108	101	151	125	669	623
<b>Total Decrease in Net Assets</b>	<b>19,907</b>	<b>19,269</b>	<b>16,876</b>	<b>15,854</b>	<b>13,311</b>	<b>12,839</b>	<b>17,736</b>	<b>17,271</b>	<b>67,830</b>	<b>65,233</b>
<b>Change in Net Assets for the Year</b>	<b>1,444</b>	<b>(616)</b>	<b>(257)</b>	<b>(800)</b>	<b>1,962</b>	<b>(301)</b>	<b>4,351</b>	<b>1,078</b>	<b>7,500</b>	<b>(639)</b>
Net Assets Available for Benefits, Beginning of Year	78,350	78,966	53,663	54,463	59,336	59,637	88,962	87,884	280,311	280,950
<b>Net Assets Available for Benefits, End of Year</b>	<b>\$ 79,794</b>	<b>\$ 78,350</b>	<b>\$ 53,406</b>	<b>\$ 53,663</b>	<b>\$ 61,298</b>	<b>\$ 59,336</b>	<b>\$ 93,313</b>	<b>\$ 88,962</b>	<b>\$ 287,811</b>	<b>\$ 280,311</b>

The Summary of Financial Information above provides information on the four Disability Income Plan's as presented in their audited financial statements at December 31, 2024. Copies of the audited financial statements are available upon request.

**Health & Dental Benefit Plans**  
**Health Shared Services Saskatchewan**  
**Summary of Financial Information**  
**As at December 31, 2024**  
*(thousands of dollars)*

	Core Dental Plan		In-Scope Extended Health/ Enhanced Dental Plan		Out-of-Scope Extended Health/ Enhanced Dental Plan		Total	
	2024	2023	2024	2023	2024	2023	2024	2023
<b>Assets</b>								
Investments	\$ 11,273	\$ 16,877	\$ 199,830	\$ 203,199	\$ 781	\$ 2,111	\$ 211,884	\$ 222,187
Contributions and other receivables	4,045	2,902	471	19	873	202	5,389	3,123
Receivable from Canada Life Assurance Company	-	-	8,318	5,004	1,111	498	9,429	5,502
Cash	4,566	2,168	8,588	4,375	1,380	997	14,534	7,540
<b>Total Assets</b>	<b>19,884</b>	<b>21,947</b>	<b>217,207</b>	<b>212,597</b>	<b>4,145</b>	<b>3,808</b>	<b>241,236</b>	<b>238,352</b>
<b>Liabilities</b>								
Dental Claims and other accounts payable	3,119	2,589	5,420	1,244	878	421	9,417	4,254
Deferred Contributions	-	-	260	4,068	-	-	260	4,068
Provision for unpaid claims	1,726	701	2,817	2,019	411	346	4,954	3,066
<b>Total Liabilities</b>	<b>4,845</b>	<b>3,290</b>	<b>8,497</b>	<b>7,331</b>	<b>1,289</b>	<b>767</b>	<b>14,631</b>	<b>11,388</b>
<b>Net Assets</b>	<b>15,039</b>	<b>18,657</b>	<b>208,710</b>	<b>205,266</b>	<b>2,856</b>	<b>3,041</b>	<b>226,605</b>	<b>226,964</b>
Net Assets Available for Benefits, restricted for Rate Stabilization Fund	19,273	17,672	69,514	63,916	4,934	4,751	93,721	86,339
<b>Net Assets Available for Benefits</b>	<b>\$ (4,234)</b>	<b>\$ 985</b>	<b>\$ 139,196</b>	<b>\$ 141,350</b>	<b>\$ (2,078)</b>	<b>\$ (1,710)</b>	<b>\$ 132,884</b>	<b>\$ 140,625</b>
<b>Increase in Net Assets</b>								
Contributions - Employees and Employers	\$ 35,524	\$ 33,428	\$ 64,257	\$ 62,684	\$ 9,944	\$ 8,662	\$ 109,725	\$ 104,774
Interest income	861	914	9,812	8,918	112	148	10,785	9,980
Change in provision for unpaid claims	-	253	-	93	-	-	-	346
Unrealized gain on investments	964	504	2,044	6,050	124	180	3,132	6,734
Other Revenue	3	4	15	13	3	3	21	20
<b>Total Increase in Net Assets</b>	<b>37,352</b>	<b>35,103</b>	<b>76,128</b>	<b>77,758</b>	<b>10,183</b>	<b>8,993</b>	<b>123,663</b>	<b>121,854</b>
<b>Decrease in Net Assets</b>								
Dental claims	37,102	34,037	13,290	11,511	1,783	1,643	52,175	47,191
Health premiums	-	-	55,736	52,004	8,018	7,798	63,754	59,802
Administrative expenses <sup>1</sup>	1,943	1,653	1,821	1,651	346	318	4,110	3,622
Consulting fees	44	40	90	84	22	20	156	144
Professional fees	80	93	603	552	26	59	709	704
Realized loss on investments	837	58	346	331	108	98	1,291	487
Change in provision for unpaid claims	964	-	798	-	65	22	1,827	22
<b>Total Decrease in Net Assets</b>	<b>40,970</b>	<b>35,881</b>	<b>72,684</b>	<b>66,133</b>	<b>10,368</b>	<b>9,958</b>	<b>124,022</b>	<b>111,972</b>
<b>Change in Net Assets for the Year</b>	<b>(3,618)</b>	<b>(778)</b>	<b>3,444</b>	<b>11,625</b>	<b>(185)</b>	<b>(965)</b>	<b>(359)</b>	<b>9,882</b>
Net Assets, Beginning of Year	18,657	19,435	205,266	193,641	3,041	4,006	226,964	217,082
<b>Net Assets, End of Year</b>	<b>\$ 15,039</b>	<b>\$ 18,657</b>	<b>\$ 208,710</b>	<b>\$ 205,266</b>	<b>\$ 2,856</b>	<b>\$ 3,041</b>	<b>\$ 226,605</b>	<b>\$ 226,964</b>

<sup>1</sup> Includes administrative expenses and adjudication fees

The Summary of Financial Information above provides information on the three Health & Dental Benefit Plan's as presented in their audited financial statements at December 31, 2024. Copies of the audited financial statements are available upon request.

**Group Life Insurance Plan**  
**Health Shared Services Saskatchewan**  
**Summary of Financial Information**  
**As at December 31, 2024**  
*(thousands of dollars)*

	<b>Group Life Insurance Plan</b>	
	<b>2024</b>	<b>2023</b>
<b>Assets</b>		
Investments	\$ 109,190	\$ 98,342
Cash	742	970
Receivable from Canada Life Assurance Company	102	365
Member premium receivables	1,274	-
Other receivables	13	14
<b>Total Assets</b>	<b>111,321</b>	<b>99,691</b>
<b>Liabilities</b>		
Accounts payable	2,599	1,205
Provision for unpaid claims	1,404	1,204
<b>Total Liabilities</b>	<b>4,003</b>	<b>2,409</b>
<b>Net Assets</b>	<b>107,318</b>	<b>97,282</b>
Net Assets Available for Benefits, restricted for Rate Stabilization Fund	2,508	2,416
Net Assets Available for Benefits, restricted for Multi-Year Catastrophic Loss Reserve	2,722	2,619
<b>Net Assets Available for Benefits</b>	<b>102,088</b>	<b>92,247</b>
<b>Benefit Obligations</b>		
Disabled life waiver	19,407	18,635
Retired Plan Member Life Insurance Benefit	32,802	28,807
<b>Total Benefit Obligations</b>	<b>52,209</b>	<b>47,442</b>
<b>Surplus</b>	<b>\$ 49,879</b>	<b>\$ 44,805</b>
<b>Increase in Net Assets</b>		
Member premiums	\$ 13,471	\$ 14,498
Dividend income	1,938	870
Interest income	1,766	1,571
Realized gain on investments	1,440	292
Unrealized gain on investments	7,903	5,793
Other income	108	117
<b>Total Increase in Net Assets</b>	<b>26,626</b>	<b>23,141</b>
<b>Decrease in Net Assets</b>		
Premium expense	14,151	14,451
Life claims expense	373	309
Change in provision for unpaid claims	200	44
Administrative expense	1,127	1,053
Investment management fees	585	602
Professional fees	92	103
Consulting fees	62	59
<b>Total Decrease in Net Assets</b>	<b>16,590</b>	<b>16,621</b>
<b>Change in Net Assets for the Year</b>	<b>10,036</b>	<b>6,520</b>
Net Assets, Beginning of Year	97,282	90,762
<b>Net Assets, End of Year</b>	<b>\$ 107,318</b>	<b>\$ 97,282</b>

The Summary of Financial Information above provides information on the Group Life Insurance Plan as presented in the audited financial statements at December 31, 2024. Copies of the audited financial statements are available upon request.

**Out-of-Scope Flexible Spending Plan**  
**Health Shared Services Saskatchewan**  
**Summary of Financial Information**  
**As at December 31, 2024**  
*(thousands of dollars)*

	<b>Out-of-Scope Flexible Spending Plan</b>	
	<b>2024</b>	<b>2023</b>
<b>Assets</b>		
Cash	\$ 194	\$ 421
Short term investments	849	1,300
Contributions and other receivables	801	25
Receivable from Canada Life Assurance Company	67	67
<b>Total Assets</b>	<b>1,911</b>	<b>1,813</b>
<b>Liabilities</b>		
Accounts payable	37	31
Claims payable	99	141
Provision for unpaid claims	83	132
<b>Total Liabilities</b>	<b>219</b>	<b>304</b>
<b>Net Assets Available for Benefits</b>	<b>\$ 1,692</b>	<b>\$ 1,509</b>
<b>Increase in Net Assets</b>		
Contributions - Employers	\$ 937	\$ 1,054
Administrative contributions	278	270
Interest income	63	83
Change in provision for unpaid claims	49	-
Other revenue	3	2
<b>Total Increase in Net Assets</b>	<b>1,330</b>	<b>1,409</b>
<b>Decrease in Net Assets</b>		
Health Spending Account claims expense	949	834
Administrative expense	198	287
Change in provision for unpaid claims	-	33
<b>Total Decrease in Net Assets</b>	<b>1,147</b>	<b>1,154</b>
<b>Change in Net Assets for the Year</b>	<b>183</b>	<b>255</b>
Net Assets Available for Benefits, Beginning of Year	1,509	1,254
<b>Net Assets Available for Benefits, End of Year</b>	<b>\$ 1,692</b>	<b>\$ 1,509</b>

The Summary of Financial Information above provides information on the Out-of-Scope Flexible Spending Plan as presented in the audited financial statements at December 31, 2024. Copies of the audited financial statements are available upon request.

## Board of Trustees Expenses

In fulfilling their fiduciary duties, the Trustees incurred travel and per diem expenses in 2024 as follows:

	Per Diem	Expenses	2024 Total
Biesenthal, Dean	\$ 13,050	\$ 5,039	\$ 18,089
Boutin, Allan (\$4,286 paid to HSAS)	8,300	2,466	10,766
Cartmell, Andrew	11,175	4,188	15,363
Dick, Denise (\$12,677 paid to SUN)	11,258	3,850	15,108
Doell, Russell (\$19,650 paid to SEIU-West)	13,087	6,562	19,650
Henley, Judy	13,837	7,877	21,714
Jackson, David	11,150	7,435	18,585
Knelsen, Karen (Chair)	23,755	5,666	29,421
Shaw, Arnie	12,500	4,323	16,823
Yaremy, Audrey	14,275	6,161	20,436
<b>Total Board Expenses</b>	<b>\$ 132,388</b>	<b>\$ 53,567</b>	<b>\$ 185,955</b>

**Per Diem** includes annual retainer, travel time, meeting attendance, and education attendance.

**Expenses** includes mileage, accomodations, parking, meal per diem, and other travel related expenses such as air fare.



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