



Welcome to  
Canada Life

What you need to know about your benefits plan



# Your claims, your way

You have more options than ever to submit your claims, with no paper forms to fill out.

## Submit your claims online

1. Sign into your GroupNet for plan members account on [canadalife.com](http://canadalife.com) or on the GroupNet app. New to your plan? Go to [canadalife.com](http://canadalife.com) to register for GroupNet.
2. Choose **Make a claim**.  
TIP: You can sign up to get your claim paid to your bank account through GroupNet for plan members. Look for banking in your profile.

## Ask your healthcare provider

Some healthcare providers can submit your claim for you – just give them your plan number and member ID. You can find both on your benefits cards or on GroupNet for plan members.

Check if your provider can submit claims for you. Search for **Provider eClaims** on [canadalife.com](http://canadalife.com).

## Hold on to your receipts

Keep your original receipt(s) for 12 months in case we need more information after you submit your claim.

## Protecting your benefits

Canada Life is committed to protecting your benefits from fraud and misuse. We apply state-of-the-art safeguards to all online claims, along with additional electronic measures for even more protection. Claims submitted online are subject to random audits and detailed adjudication.

**For more information, contact your plan administrator.**





# Take charge of your health

Whether you're thinking about making changes to improve your health, or you're active and healthy and want to stay that way, Health Connected® is designed for you.

The site makes it easy for you to learn more about your health and develop health skills on your terms. It's divided into three missions:

- Health risk and health skills assessments give you an overall picture of your health so you know what to focus on.
- Team and solo challenges and virtual adventures help you practice your health skills in a fun, competitive way. Game elements like points and badges help motivate you to try new things to benefit your health.
- A digital health coach helps you build a 28-day plan to help you stay motivated and see results.

You can also:

- Learn about health conditions and more with information you can trust
- Find local community support resources
- Connect with popular apps and wearable devices to track your activities and progress
- Organize your personal health and medical history in one place

**It's a one-stop spot where you can find what you need to take charge of your health. You can find Health Connected on GroupNet™ for Plan Members by clicking on Health & Wellness Site.**

Your information is protected and as always, kept confidential. Your personal responses are not made available to Canada Life or your employer. Once a minimum number of assessments are completed, anonymized and aggregated responses may be used at a group level for reporting purposes, to help us and your employer better understand the health of your organization or to implement health and wellness programs.





# Enhanced generic substitution

Many brand name drugs have generic alternatives that could be just as effective but cost less. They have the same active ingredient, same dosage strength and same dosage form.

## What's enhanced generic substitution?

Your Canada Life™ prescription drug coverage includes enhanced generic substitution, which means the amount you can be reimbursed for your prescriptions is limited to the cost of the lowest-priced generic alternative.

## Help keep your drug plan affordable

By asking your doctor to prescribe the generic equivalent whenever possible, you can help keep your drug plan affordable for the long term.

## If your doctor prescribes a brand name drug, you can:

- Ask your pharmacist for the more cost-effective generic version of the drug
- Request the brand name drug your doctor has prescribed, and pay the difference in cost between the lowest-priced generic drug and the brand name drug

In some provinces, pharmacists must substitute brand name drugs with a generic drug if it's available.

If your doctor decides the brand name drug is medically necessary, they must complete a Request for brand name drug coverage form found at [canadalife.com](http://canadalife.com). If the request is approved, you'll be reimbursed the cost of the brand name drug according to the terms of your benefits plan.

**For more information contact your plan administrator or go to [canadalife.com](http://canadalife.com).**



# Assure Card

## What's an Assure Card™?

The card lets your pharmacist submit your drug claim electronically right at the pharmacy, so you don't have to pay out of pocket and submit the claim later. You only pay the portion that's not covered by your plan. Think of it like direct billing at a dentist's office.

## How do I use the card?

Simply present your card to the pharmacist before the prescription is filled. The pharmacist may ask for your personal information, such as your address and date of birth.

## What if I have coverage through another plan too?

If you and your spouse both have drug coverage under separate plans but neither one pays the full cost for prescription drugs, you can submit claims to both plans and have the total cost covered.

## ✔ If both plans have drug cards

Give both drug cards to the pharmacist.  
If the prescription is for:

- **You:** ask the pharmacist to submit to your plan first
- **Your spouse:** ask the pharmacist to submit to their plan first
- **Your dependant:** ask the pharmacist to submit to the plan of the cardholder whose birthday falls earliest in the year

## ✔ If the other plan doesn't have a card

If your spouse's plan doesn't have a drug card, you'll have to submit your claim by filling out a paper form or online (see GroupNet™ for Plan Members for forms and online claims). If the prescription is for:

- **You:** use your card at the pharmacy and submit a paper claim to your spouse's plan for the rest
- **Your spouse:** submit the claim to your spouse's plan first, then a paper claim to Canada Life for the remainder
- **Your dependant:** submit the claim to the plan of the parent whose birthday falls earliest in the year

## Keep your information current

It's important to keep your information up to date so that your coverage stays uninterrupted. Let your plan administrator know about life event changes, such as:

- New address
- Change in marital status
- New dependant
- Child in university

## Your information is secure

You can use the card at almost any pharmacy in Canada, and your information is secure. Your medical history is not shared with the pharmacist.



Try the free  
**DrugHub app**

### With DrugHub you can:

- Search thousands of drugs: ingredients, interactions, and side effects
- Set reminders to take medications on schedule
- Know when to order refills

You can download the app from the **App Store**.

**Questions?** Contact your plan administrator or [canadalife.com](https://canadalife.com)

Assure Card is a trademark of TELUS Health.





# Healthcare spending account

## A convenient way to pay for additional medical expenses

What do sports injuries, allergies and diabetes have in common? If you need treatment for any of them, you might have to pay for treatment out-of-pocket even if you have a group benefits plan. That's why a healthcare spending account (HCSA) may help.

### What's an HCSA?

You start each plan year with a certain number of credits in your account. Throughout the year, you can use the credits to pay for or top up certain coverages. These can apply to health, vision and dental care expenses that aren't covered by your group benefits plan or provincial health care plan. Some examples include hearing aids, eyeglasses or topping up coverage for your child's braces.

You can use an HCSA to cover costs that qualify for a medical expense tax credit under the Income Tax Act.\*

\*Contact your local Canada Revenue Agency office for a complete list of qualifying expenses. In Quebec, your HSCA benefit payments are taxable for provincial income tax purposes.

### Who can use your HCSA?

Your HCSA covers you, your spouse and your dependants if:

- You're already covered by the Canada Life™ basic group benefits plan
- Your spouse and dependants are already covered for basic health care benefits by your group plan or your spouse's plan

If your dependant child isn't eligible for basic health care benefits because of student age restrictions, they can still qualify for the HCSA.

## Submitting claims

Use the HCSA forms to claim benefits from your HCSA. You should also use the forms when you're claiming benefits from your basic plan and want any remaining balance paid by the HCSA. You can find them on [canadalife.com](http://canadalife.com) or get them from your plan administrator.

You have up to 31 days after your plan year ends to submit claims for your expenses from the last plan year. Your qualifying expenses come out of the remaining HCSA balance for that plan year.

## Exclusions

There are some exclusions to HCSA coverage including:

- Expenses that private insurers aren't legally able to cover
- Services and supplies for which there's no charge
- Any portion of an expense for services and supplies for which benefits are payable under another group plan or a government plan
- Expenses arising from war, insurrection, acts of terrorism or voluntary participation in a riot

**For more information on the healthcare spending account, contact your plan administrator.**







# Travel Assistance

## World-wide support in emergency medical situations

### This is what happened

The Granger family is in Peru on a hiking trip of a lifetime. Everyone's ready with hiking boots, hats and sunscreen.

At the start of the trail, eight-year-old Simon says he's feeling nauseous and is having sharp stomach pains. Simon's mother feels his forehead and he definitely has a fever. There's no way Simon can go on this hike.

### Change of plans

The family is now faced with a medical situation and needs help. Unfortunately, their Spanish is poor so communicating with locals is hard. Luckily, Canada Life's Travel Assistance emergency line is available in different languages, 24 hours a day. In just one phone call, Travel Assistance helps Simon's parents find the nearest hospital and a local interpreter.

Travel Assistance helps financially too. Simon ends up at a hospital that requires an advance payment before they'll admit him. No problem – Travel Assistance makes the admission payment on Simon's behalf.

In the end, Simon is diagnosed with appendicitis and his parents need to delay the flight home. Fortunately, Travel Assistance also covers the cost of changing flights for Simon and one of his parents.

**Travelling offers countless rewards and experiences. One experience you'll want covered is an emergency medical situation.**

Through your group benefits plan and its arrangement with a travel assistance provider, you have protection in a medical emergency anywhere in the world. You also have protection in Canada if your trip is more than 500 km from home.

**Travel Assistance is also sometimes called Global Medical Assistance in your benefits plan.**

### Why is Travel Assistance important?

Through Travel Assistance, you have access to co-ordinators who can direct you to the nearest, most appropriate physicians, hospitals and clinics. They can also help you with travel arrangements.

## **More ways to benefit from Travel Assistance**

**Medical advisors** – Qualified licensed physicians, under agreement with the travel assistance provider, can consult and review your event to help determine the best course of action.

**Courtesy assistance** – Can help you locate qualified legal advice, local interpreters and appropriate services for replacing lost passports.

**Admission advance assistance** – Can advance the admission payment to the hospital when required.

**Assisting unattended children** – If you're hospitalized, the assistance provider will pay up to a maximum of one-way regular economy airfare for your minor children who are left unattended because of your hospitalization. It will help organize travel arrangements, boarding and travel connections for your unattended children.

**Return of vehicle** – In the event of an illness, death or an injury that prevents you from driving, Travel Assistance covers up to \$1,000 toward the cost of your vehicle's return home or to the nearest rental agency.

**Transportation reimbursement** – The cost of comparable return transportation home will be covered if you're in a hospital and miss prearranged and prepaid, non-changeable return transportation.

Travel Assistance provides either return of vehicle or transportation reimbursement, but not both.

**Medical evacuation** – If you're faced with a medical emergency while travelling, and suitable local care isn't available, Travel Assistance covers the cost of a medical evacuation to a hospital in Canada, or to the nearest hospital outside of Canada equipped to provide the required treatment. A medical evacuation to Canada may also be arranged if extensive treatment is needed and your medical condition allows transportation.

**Family member travel assistance** – If you're hospitalized for more than seven consecutive days and are travelling alone, Travel Assistance will cover the expense of bringing one family member to the hospital. Travel Assistance covers the expense of one round-trip economy airfare, plus up to \$1,500 in lodging expenses. Meals aren't covered.

**Travelling companion expenses** – If you're admitted to a hospital on the date you were originally scheduled to return home and have been travelling with a companion, Travel Assistance will cover your companion's transportation and accommodation expenses incurred by your companion as a result of your hospitalization. The maximum payable for accommodation is \$1,500. Meals aren't covered.

Travel Assistance provides either family member travel assistance or travelling companion expenses, but not both.

**Transportation of remains** – In the event of death, Travel Assistance will pay expenses legally required for preparing and transporting a traveller's remains home. The travel assistance provider can help make the arrangements.

All benefit payments are made in Canadian dollars.

## Questions and answers

**What is considered a medical emergency?** – Your Canada Life benefits plan covers the costs described in this document, when the costs are experienced because of a medical emergency. A medical emergency is either:

- a sudden, unexpected injury
- a sudden, unexpected illness or acute episode of disease that couldn't have been reasonably anticipated based on the person's prior medical condition

Costs incurred for either a medical condition that requires ongoing care or elective services aren't covered.

**How do I get assistance?** – In the event of a medical emergency, call the travel assistance provider using the phone number of the location nearest to you. The phone numbers are shown in this document, on the back of your benefits card and on **canadalife.com**.

The assistance provider will help you arrange for appropriate medical care, verify your insurance coverage, and provide necessary travel assistance, such as flight, hotel accommodations and vehicle return. The assistance provider can also make advance payments, subject to Canada Life's approval.

**If I'm admitted to a hospital, does my benefits card confirm that I'm covered?** – Hospitals won't accept your benefits card as proof of medical coverage. They'll use it to call the travel assistance provider, which then contacts Canada Life to verify coverage.

**What if the hospital refuses to recognize my card or call the travel assistance provider?** – This is very unlikely. However, if it happens, you or your family member should call the travel assistance provider. They'll call the hospital directly and take appropriate measures.

**Am I required to pay hospital and doctor bills, or will Canada Life automatically pay these bills when I'm discharged?** – You're responsible for arranging payment for all hospital and doctor bills when you're discharged. In some cases, hospitals allow you to assign your insurance benefits in place of full payment. Your benefits card isn't a credit card. It doesn't provide payment.

**How do I submit a claim?** – Complete the Out-of-Country expenses claim form, located on [canadalife.com](http://canadalife.com), and any required provincial form(s). Submit all the forms and original receipts to Canada Life.

In most cases, Canada Life will pay your provincial health care plan's share of the claim on the province's behalf. Canada Life will also reimburse you on the balance of expenses covered by your benefits plan.

Before you travel, we suggest reviewing your provincial plan to see if out-of-country medical expenses are covered. Many provincial plans have time limits on submitting claims. These time limits apply to your Canada Life claims as well. If your provincial plan refuses payment, you may be asked to reimburse Canada Life for any amount already paid on its behalf.

If you have questions about your claim or coverage, call us at [1-800-990-6654](tel:1-800-990-6654) and select the option to speak with a client service representative in the Out-of-Country Claims Department. A TTY line is available for the deaf or hard of hearing at **1-800-990-6654**.

**Send claims to:**  
Canada Life  
Out-of-Country Claims Department  
P.O. Box 6000  
Winnipeg, MB R3C 3A5

**Do I need to purchase additional health care coverage when I travel?** – Your Canada Life benefits plan provides out-of-country and Travel Assistance coverage for emergency medical treatment that may be required when you're travelling temporarily outside of Canada. However, it's impossible to foresee all the costs you may incur.

To help you plan, consider the maximums and reimbursement levels available in your benefits plan. These are included in your benefits booklet.

For example, if your benefits plan reimburses 80% of the balance after any applicable provincial plan benefits have been paid, you may want to buy additional coverage for the remainder. If you do buy additional insurance, Canada Life will co-ordinate the payment of your claim with your other insurance provider.

**Does my Travel Assistance plan include trip cancellation insurance?** – Travel Assistance doesn't cover transportation costs if you're unable to leave home at the start of a trip due to a death in your family, or if you or a family member becomes seriously ill. This type of coverage is provided by trip cancellation insurance.

If you miss prearranged and prepaid return transportation to Canada because you're in a hospital, the travel assistance provider will arrange and pay the cost of comparable return transportation for you.



## Who do I call in case of a medical emergency?

If you experience a medical emergency while outside Canada or 500 km away from home, call:

Canada or U.S.A.:	1-855-222-4051
Cuba:	1-204-946-2946*
All other countries:	1-204-946-2577*

\*Submit long distance charges to Canada Life for reimbursement.

The toll-free number is meant to be used in case of emergency only but may not work in all circumstances. This is because cell phones don't always connect to toll-free numbers and some pay phones may need payment to place the call.

These numbers are also on the back of your benefits card and on [canadalife.com](http://canadalife.com).



# Dialogue virtual healthcare service

## A virtual health and wellness clinic in your pocket

### Have you heard of the Dialogue Health app?

It's a health and wellness app that lets you talk to doctors, nurses or other healthcare professionals for non-urgent medical care. You can use it anywhere you're comfortable chatting through text, video or phone.

### It's full of convenient, time-saving features:

- Renew your prescriptions and get them delivered at no extra charge
- Get referred to see a specialist in person
- Access your care plans and message history through the app

### It's secure!

Don't worry – all information on the Dialogue app is secure and protected.

### When can you use Dialogue?

You can use Dialogue 24/7.

### How much does it cost?

You get Dialogue through your group benefits plan and chatting with healthcare professionals is free. Extra fees may apply to see specialists (e.g., nutrition, mental health, life coaching, etc.). You can pay through the app and you may be able to claim these fees through your group benefits plan.



**Check out the  
Dialogue Health  
app today!**

Download the Dialogue Health app on your phone or tablet. Or go to [app.dialogue.co](https://app.dialogue.co) using Chrome, Firefox or Safari. You'll get an email with steps to sign up.





Best Doctors®

## YOUR PARENTS PROTECTED YOU. NOW YOU CAN RETURN THE FAVOUR.

**Great news!** Access to in-depth medical reviews from leading expert physicians is now available to your parents and parents-in-law as part of the Best Doctors Extended Family Benefit.

This extended service aims to help address the challenges you may face caring for elderly family members. Now your parents and parents-in-law have access to the same full range of Best Doctors services as you, giving them more health care options and the guidance they need when faced with medical uncertainty.

**BEST DOCTORS IS YOUR FAMILY'S  
SOLUTION TO MEDICAL UNCERTAINTY**

# BEST DOCTORS' EXTENDED FAMILY BENEFIT.

Best Doctors brings together the best medical minds in the world to help you navigate through the complex and often restrictive health care system. We now also provide the resources and support needed for aging parents and parents-in-law, delivering greater peace of mind and the comfort of knowing your parents and parents-in-law have access to a global network of leading medical specialists.

## TOP-RANKED PHYSICIANS

Best Doctors carefully identifies and partners with the top 5% of practising physicians worldwide, selected through a certified ongoing peer-to-peer polling process. There are currently more than 50,000 physicians in over 450 specialties and subspecialties in the Best Doctors global database.

## BENEFITS OF BEST DOCTORS FOR YOU AND YOUR PARENTS AND PARENTS-IN-LAW:

### **Breadth:**

Unlimited access to all the same Best Doctors' services available to you, each designed to help you and your family be confident in your care.

### **Convenience:**

Best Doctors' services are easily accessed by phone or email.

### **Support:**

Best Doctors can serve as your or your parents' personal health ambassador to the support, resources and peace of mind needed to make confident medical decisions.

### **No Restrictions:**

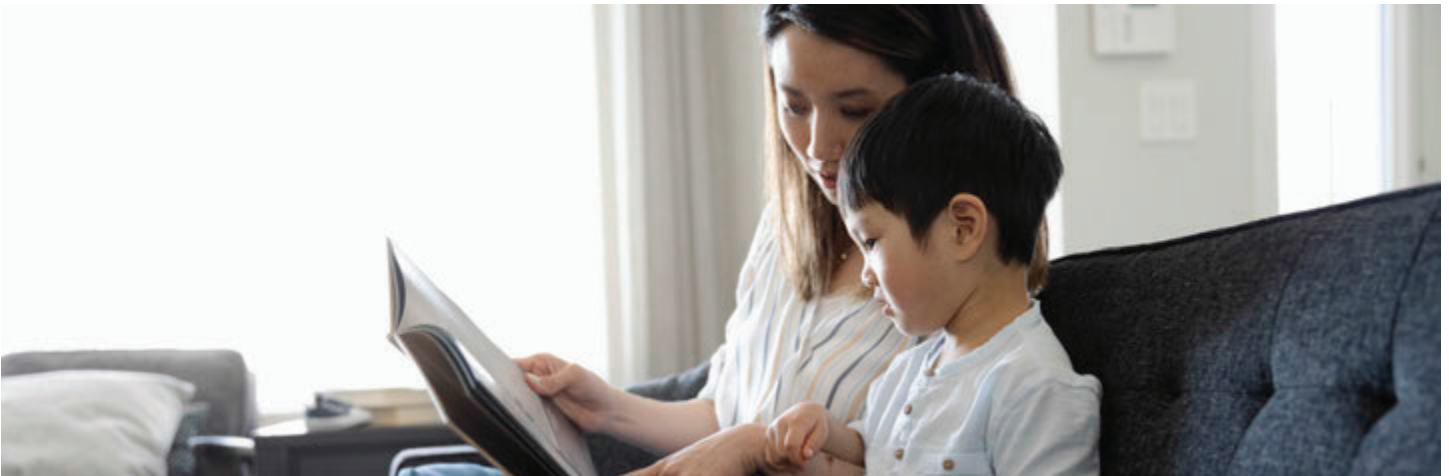
Best Doctors is available to covered members' parents and parents-in-law without restrictions, regardless of their age.



CONTACT BEST DOCTORS TODAY AT

**1.877.419.2378 • [customer.ca@bestdoctors.com](mailto:customer.ca@bestdoctors.com)**

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# Contact

## Employee and family assistance program

When facing a major life change or hard times, it can be hard to stay focused. An employee and family assistance program (EFAP) can guide you to get the help you need.

Contact™ supports well-being with confidential support for you and your family. Service is in both English and French, 24 hours a day, seven days a week.

### You can get help with:

- Marital and other relationships
- Family and parenting
- Career
- Addictions

### How does it work?

A qualified counsellor works with you to find solutions to problems in a short time frame. This short-term counselling is flexible and includes as many sessions as you need. You can choose from six counselling options: face to face, phone, e-counselling, video counselling, online chat, and using self-directed resources.

If you need long-term, specialized attention, counsellors will refer you to a professional or agency to help you. Although this third-party counselling isn't covered under Contact, your Contact counsellor will keep in touch with you (with your permission) and manage the case until your treatment ends.

### What Contact offers

- Confidential assessment, counselling, and referral
- Crisis intervention
- Trauma response
- Health information and assessment
- Nutrition and naturopathic information
- Legal and financial consultation and referral
- Childcare and eldercare information and resource referral
- Wellness seminars and newsletters



### How to reach Contact

You can call toll-free 24/7. Call centres are bilingual and can serve you in more than 200 languages through LanguageLine Solutions translation services. TTY (text telephone for the hearing impaired) is also available in English and French.

**English:** 1-844-880-9142

**French:** 1-844-880-9143

**TTY:** 1-877-338-0275





# Optional group term life insurance

Additional protection for you and your spouse

## Helping you prepare for the “just in case”

Imagine for a minute the unthinkable – what if you suddenly died? Your group benefits plan provides some life insurance, but would it cover all your expenses and still take care of your loved ones?

Optional group term life insurance helps your loved ones with life’s extra expenses. Maybe this includes ongoing payments such as bills, a mortgage or student loans? Or maybe it involves paying for your kids’ post-secondary education? It’s up to you!

Together, we can top-up your basic group life insurance and help you build a plan to ensure your loved ones’ financial future is secure.

## You should know

Your monthly premium comes right off your paycheque. You don’t even have to think about it.

You can increase your existing insurance coverage, at low group rates, to help meet the needs of you and your loved ones.

## Who’s eligible?

Are you and your spouse under the age of 65 years old? You can apply for coverage!

**Talk to your plan administrator to learn more about optional life insurance today!**



# Optional group accidental death and dismemberment insurance

## Coverage for any time, anywhere

### Prepare for anything, even the unthinkable

You want to be ready for anything and everything. We get that. After all, accidents happen every day and you want to make sure that you and your family are ready just in case.

Optional accidental death and dismemberment (AD&D) insurance can help provide financial support. You're covered anytime, anywhere – whether an accident happens when you're at work, at home or on vacation.

### How does it work?

Your insurance gives you and your family coverage for 365 days from the date of an accident that results in loss of:

- Life
- Use of limbs, sight, speech or hearing

Talk to your plan administrator to learn more about family plan options.

### Who's eligible?

If you're an active employee under the age of 65, you're eligible to apply. You can extend coverage through our family plan, to your spouse and your unmarried, dependent children.

You must already have coverage, before suffering an accident to be eligible for benefits.

### How do I make payments?

Payment comes directly off your paycheck. You don't have to arrange to make payments.

### What more do I need to know?

You can talk to your plan administrator to learn more about:

- Employee and family plan options
- Listed coverages and payment percentages
- Benefit limitations
- And other important information (reattachment surgery, body preparation and transport, special reimbursements/benefits, etc.)

**Talk to your plan administrator about optional AD&D insurance today!**





# Optional group critical illness insurance

## Financial support at a critical time

### Critical illness insurance is a wise thing to have!

Did you know that the chance of being diagnosed with a critical illness is not all that uncommon?

When people have a critical illness, they usually can't work for long periods. Optional critical illness insurance can help with the extra expenses that life insurance or disability insurance might not cover. Best of all, it lets you focus on getting better.

You can add extra coverage through group critical illness insurance, which provides financial support should you be diagnosed with a critical illness.

### How does it work?

It's a tax-free, one-time payment for you to use however you need. Whether it's related to your illness or not, it's there for you to use. Some examples include:

- Replace your lost income
- Private nursing or medical care
- Cover out-of-pocket expenses (medications, medical devices, treatments not covered by other plans, etc.)
- Modifications to a home
- Provide additional help at home for you and your family (e.g., childcare costs)
- And more!

### Am I eligible?

You can apply for coverage if you're a full-time employee between the ages of 18 and 64.

You must apply for coverage before being diagnosed with a critical illness.

### How can I get covered?

Your group benefits plan doesn't include critical illness insurance automatically. Don't worry, you can add it!

**Talk to your plan administrator to learn more about optional critical illness insurance today!**