The plan that determines benefits second (secondary carrier) limits its benefits to 100% of all eligible expenses reduced by all other benefits payable for the same expenses by the primary plan. Here is how to determine which carrier to submit your claim to first:

1. You submit your claim to the 3sHealth Benefit Plans first.
2. Your spouse will submit claims to his/her employer’s Benefit Plan first.
3. Dependent children submit claims to the plan of the parent with the earlier birth date (month/day) in the calendar year. In situations where parents are separated / divorced, then the following order applies:
   a) the plan of the parent with custody of the child,
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Please note – if you have coverage under an employer sponsored benefit plan, you must contact Great-West Life and provide them with the information before you begin using your pay direct drug card. If your spouse’s coverage changes, you will need to update Great-West Life with the information. You can call Great-West Life using the 3sHealth dedicated toll-free line at 1-866-408-0213.

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3sHealth will also be introducing the “Better-Than-Benefit” for Extended Health Care plan members from CUPE, SEIU-West, SGEU, and RWDSU. SUN and HSAS plan members already receive this benefit. The “Better-Than-Benefit” provides 100% Extended Health Care coverage to plan members who qualify for 80% or 90% Extended Health Care and Enhanced Dental coverage.

If you have any questions about these exciting plan enhancements, please contact a 3sHealth Benefit Services Officer at 1.866.278.2301 or by email at ebop@3shealth.ca.

3shealth.ca has a fresh look that is responsive to mobile devices.

Follow our new icon for Employee Benefits forms and information.
The Convenience of Technology

Information courtesy of Great-West Life

Great-West Life gives you flexibility in how and where you use your group benefits, with industry-leading technology solutions designed with a busy lifestyle in mind.

Sign up once, benefit any time
Access to your group benefits information has never been easier with Great-West’s GroupNet™ for Plan Members. If you’re not already registered, go to www.greatwestlife.com, click GroupNet for Plan Members and follow the registration instructions. You will need your Group #335663 and your Benefit ID # located on your pay-direct drug card.

It’s simple, secure and available 24-7. Register once and you’ll connect to a world of secure, user-friendly services:
- Submit many of your claims online
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* Compatibility of GroupNet Mobile may vary by mobile device and/or operating system.

Claims: faster, greener and more convenient than ever with Provider eClaims
Great-West’s Provider eClaims offers on-the-spot claims submission at approved providers, such as chiropractors, physiotherapists and visioncare providers.

Great-West Life currently has more than 22,000 healthcare providers signed up for Provider eClaims across Canada. To find providers in your area, go to www.greatwestlife.com and check out the Provider eClaims listing under Client Services > Group Benefits Plan Members > Health, Dental and Out-of-Country Coverage and Claims.

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A virtual medicine cabinet in your pocket
DrugHub, the first free app available from Great-West, lets you use your iPhone to:
- Search thousands of medications – ingredients, interactions and side effects
- Set reminders for you and your family to take medications on schedule
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Two-way text messaging ramps up the convenience factor
Get instant access to your benefit details with GroupNet Text: Sign up on GroupNet for Plan Members, under the Your Profile tab.

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Text CHIRO to 204-289-1667 for information on your chiropractic benefit coverage. For a complete list of key words, text Help. For a description of the type of information a key word provides, text Help and the key word.

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Maximum Reimbursement Schedule for the 3sHealth Core and Enhanced Dental Plans
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- expenses incurred for procedures not contained in the 3sHealth Maximum Reimbursement Schedule
- charges in excess of the specific limitations and maximum amounts contained in the 3sHealth Maximum Reimbursement Schedule.

Payment for claims reimbursement, including co-ordination of benefits, will not exceed the fee amounts in the Schedule.

If you would like a copy of the 3sHealth Maximum Reimbursement Schedule visit our web site at www.3sHealth.ca.

Update on Marketing of the Benefit Plans
As announced earlier this year, 3sHealth is leading a project to review the pricing and services of our current insurance provider.
This project includes a Request for Proposal that all insurance providers in Canada were invited to respond to. Some of the key points under review are:
- Pricing,
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- The carrier’s ability to work in partnership with 3sHealth.

The RFP closed in September. In late October, finalists were invited to present to the Selection Committee. The results are under review and we anticipate a decision by January, 2015. If it is determined that a change to our insurance provider will be beneficial to our members, the change would occur in the middle of 2015. A full communication strategy will be developed as part of a transition plan to ensure that our plan members are kept informed of any changes. Please watch for further information regarding the marketing of the Benefit Plans.

2015 Disability Income Plan Contribution Rates
3sHealth is pleased to report that the contribution rates for the CUPE Disability Income Plan and the SUN Disability Income Plan will be reduced effective the first full pay period in April 2015. The contribution rates for the SEIU-West and General Disability Income Plans will remain unchanged.

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Co-ordination of Benefits

The Canadian Life and Health Insurance Association developed The Co-ordination of Benefits Guidelines for insurers to ensure consistency within the industry in situations where a person can submit a claim to more than one group insurance plan.

Payment on a particular claim cannot exceed 100% of the eligible expenses. Each insurance carrier adjudicates the claim taking into account reasonable and customary charges, maximums and contractual fee guide limits in the normal fashion. The Co-ordination of Benefits Guidelines work like this:

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