2015 Member’s Annual Statement

We continually strive to find new and better ways to serve you, our 3sHealth Employee Benefit Plan members. We hope you find the information in this year's Member's Annual Statement beneficial. Enclosed with this newsletter you will find your Member’s Annual Statement for the year. We encourage you to visit our website, www.3sHealth.ca, or the Great-West Life website www.greatwestlife.com for further information regarding the benefits and services available to you.

There’s an App for That!

Great-West Life’s free GroupNet Mobile app brings the convenience of GroupNet to your Android™ device, BlackBerry® or iPhone:
• Submit claims online with Member eClaims
• Access information about your benefits, coverage balances, claims and more
• Locate the nearest provider who has access to Provider eClaims, through a built-in GPS mapping tool

You can even save your Pay Direct Drug Card and your Travel Assist Card right to your phone. Saving your cards to your phone means you no longer need to carry your cards in your wallet. You will not require an internet connection to access your cards once you have saved them to your phone.

It’s as easy as 1, 2, 3:
1. Sign up for GroupNet for Plan Members at www.greatwestlife.com,
2. Download the GroupNet Mobile app to your device, and
3. Sign in to your GroupNet for Plan Members Account.

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.
The Special Support Program (SSP) was introduced by Saskatchewan health services in 2002 to help people who have high prescription drug costs in relation to their income. Saskatchewan residents must apply to the SSP to receive coverage under the plan.

Saskatchewan health services determines your family’s deductible and co-payment amounts for prescription drugs based on your family’s annual adjusted income. Income adjustments are made by deducting $3,500 for each dependent child under age 18 from your combined annual family income. Your family’s co-payment amount is determined by the amount your family drug costs exceed 3.4% of your adjusted combined family income.

3sHealth Employee Benefits: Quality and delivery come first for our customers

The 3sHealth benefit administration team provides service and support to both employers and employees who belong to the 3sHealth Employee Benefit plans. Ease of access to information and a quick response to inquiries is a top priority for our team. There are a number of ways plan members can get the information they need:

• **Visit www.3shealth.ca**
  Searching for the information you need is easier than ever at 3sHealth.ca. There are a number of ways you can find what you are looking for including searching from the 3sHealth home page, searching from the Employee Benefits home page, or accessing quick links to our most frequently requested documents on the Employee Benefits home page.

• **Call our toll free number**
  If you can’t find the information you need on line, 3sHealth provides a dedicated toll free number 1-866-278-2301 that is staffed between the hours of 8 a.m. and 4:30 p.m., Monday through Friday.

• **E-mail us**
  Inquiries and requests for assistance for all benefit eligibility, claims and coverage, retirement, and life insurance can be made by e-mail at ebp@3shealth.ca

Our team meets daily to track the number of service requests that we receive and to ensure we are meeting our promise to process requests as quickly as we can.

In 2014, the 3sHealth benefit administration team:

• Processed 23,538 pieces of mail
• Received 11,056 in-bound telephone calls
• Facilitated 553 life insurance claims and provided 710 cheques to beneficiaries.

Our promise to our customers:

1. **We will respond to and process 90% of all incoming mail within 5 business days.**
In 2014, we improved our service level target from 7 days to 5 days, representing a 28.58%
improvement in our service delivery. We are pleased to report that we exceeded our target by processing 97% of service requests within 5 business days. In 2015, we have set a new delivery target of completing 100% of service requests within 4 business days.

2. **Ensure our daily work is free of errors.**
   We complete daily quality checks to ensure our daily work is error free. Our goal is always 100% accuracy. In 2014, we achieved 96.35% quality.

3. **Answer 90% of telephone calls within 30 seconds.**
   We use hosted call centre technology that ensures our benefit services officers are available to answer calls promptly and in the order they are received. In 2014, we achieved our target of 90%. In 2015, we have raised this target to 100% of calls answered within 30 seconds.

There are two types of SSP Applications:
1. The Special Support Annual Application Form, and
2. The Special Support – CRA Application/Consent Form (one time).

The annual application must be completed each year. The CRA Application/Consent Form ensures automated renewal so that families are not required to re-apply to the SSP every year. When the CRA Application/Consent Form is completed, an SSP approval letter will automatically be sent each year when income tax is filed.


**Receiving your Approval Letter**
Once SSP has received and processed your application, they will send you an SSP Approval Letter. The SSP Approval Letter will state your deductible and co-payment amount for your family’s prescription drugs for the year.

**You may be asked by Great-West Life to provide your SSP Approval Letter**
On 3sHealth’s behalf, Great-West Life reviews all prescription drug reimbursements. Once you and your family reach $1,200 in drug claims in a year, a copy of your SSP approval letter will be requested. You will be given 30 days from the date of the letter to provide Great-West Life with your SSP approval letter.

**What happens if I don’t submit the approval letter in 30 days?**
If you do not respond to Great-West Life, your prescription drug coverage will be suspended until Great-West Life receives your SSP approval letter. **Your coverage will not be terminated; it will only be suspended.** If you have a pay direct drug card and your pharmacist receives the...
message “card terminated”, please be assured that your coverage is not terminated. Your eligible claims will be honored when your SSP approval letter is received by Great-West Life.

You can submit your approval letter by:
- Mailing it to Great-West Life with your completed claim form.
- E-mailing it to 3sHealth at ebp@3shealth.ca
- Faxing it to 3sHealth at 306.347.5909

Always include your Group # 335663 and your Benefit ID Number on your SSP approval letter before submitting it.

Once your family has reached your deductible amount through the SSP your claims will be paid first by Saskatchewan health services. This will happen automatically at the pharmacy at the time of purchase. Any unpaid portion may then be submitted to Great-West Life for consideration.

Although this process may seem inconvenient, these measures are in place to help make certain the 3sHealth Extended Health Care Plan remains financially viable for the long term. When plan members make application to the SSP, they ensure that the actual costs attributed to claims on the 3sHealth plans are paid by Great-West Life.

GroupNet Text! 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.

While you’re in the Your Profile tab, you can also sign up to receive texts from Great-West that notify you that your claims have been processed.

Try it out!
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.
Submitting Prescription Drug Claims

The 3sHealth Extended Health Care plan is unique in the way it provides options to plan members when making prescription drug claims. The plan offers a convenient Pay Direct Drug Card that provides instant payment at the pharmacy less a $10 per prescription deductible.

The plan also offers a reimbursement option. You may pay the full amount of your prescriptions at the pharmacy, submit your claims for reimbursement and pay a $9 per family per day prescription deductible.

1. When you use your Pay Direct Drug Card

   Present your prescriptions and Pay Direct Drug Card to the pharmacist
   You pay $10 for each prescription plus any amount not covered by the Plan
   Submit any unpaid portion to your spouse’s employer sponsored plan

2. When you pay out of pocket and submit your claim to Great-West Life for reimbursement

   Present your prescriptions to the pharmacist. You must purchase prescriptions on same day
   You pay the full cost of your prescriptions
   Complete a GWL Claim form on-line or paper and send with receipts to Great-West
   Great-West Life will assess your claim submission
   You will be reimbursed the full amount covered by the Plan less $9 per family per day
   Submit any unpaid portion to your spouse’s employer sponsored plan

The benefit to plan members is the ability to select the right option for you, each time you take your prescriptions to the pharmacy.

When plan members use the Pay Direct Drug Card, it helps to avoid out of pocket costs and there are no claim forms to complete. The claim process is complete when you leave the pharmacy.

For plan members using the reimbursement method, you receive a higher level of reimbursement when all of the prescriptions are purchased for you and your family members on the same day.
Have you quit smoking?

What is the definition of a smoker?
You are categorized as a smoker if you have smoked or used any nicotine replacement products in the past 12 months.

Did you know...
The optional life rates for a non-smoker are half of that of a smoker? If you have optional life and are no longer categorized as a smoker, please contact your employer to obtain the form necessary to update your information.

Marketing of the 3sHealth Benefit Plans

3sHealth completed the marketing of the Employee Benefit Plans in January 2015. The purpose of the marketing project was to ensure we continue to provide the right services and technology to our plan members. The marketing review took approximately seven months and included a request for proposal, a careful review of the responses, finalist presentations, and on-site meetings with selected carriers. A selection committee was formed and included representation from employers, unions, and 3sHealth.

Some key points that the selection committee considered were:
- Cost and pricing;
- Customer services including claims payment and call centre;
- Value added services such as on-line services for plan members, personal health risk assessments, and reporting, and
- The carrier’s ability to work in partnership with 3sHealth.

After careful consideration and evaluation, the selection committee concluded that we will remain with our current carrier Great-West Life. The decision will realize significant savings for the Employee Benefit Plans and ensure we continue to provide the best service possible to plan members.

Provider eClaims: faster, greener and more convenient than ever

Great-West’s Provider eClaims offers on-the-spot claims submission at approved providers, such as chiropractors, physiotherapists and vision care 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.

Member eClaims

You can save time and paper by submitting many of your claims on-line through GroupNet for Plan Members or GroupNet Mobile, Great-West’s secure online services. Get reimbursed quickly and accurately – you will usually receive your benefit payment within 24 to 48 hours.