Important Changes to the 3sHealth Group Life Insurance, Extended Health Care and Dental Plans in 2016.

The following benefit plan improvements were introduced effective July 1, 2016:

- **Dependent Life Insurance** decreased from $4.26 to $3.48 per month.
- The Dependent Life Insurance amount for a child increased from $2,500 to $5,000 per child; a pre-natal benefit was added; the monthly premium rate for Dependent Life Insurance decreased from $42.60 to $34.90 per month.
- **Dental Benefits** increased from 50% to 100% coinsurance to a maximum of $1,000 per lifetime for any one eye surgery up to two times the annual vision maximum (up to $300 x 2 = $600) once per lifetime with the restriction that a claim for prescription eyewear cannot be made for four years following the procedure. Please note the vision restrictions may be pro-rated for other-than-full-time employees.
- **Vision Care**
  - Prescription sunglasses and prescription safety glasses are eligible for reimbursement under the $300 vision maximum once every two years. Please note the vision maximum may be pro-rated for other-than-full-time employees.
  - Part members will be eligible for reimbursement for laser eye surgery up to five times the annual vision maximum (up to $300 x 4 = $1,200) once per lifetime with the restriction that a claim for prescription eyewear cannot be made for four years following the procedure. Please note the vision maximum may be pro-rated for other-than-full-time employees. You may not claim for laser eye surgery if you have already used your full vision maximum for the current 2 year period.
- Plan members may direct questions about coverage under the Disability Income Plan to the Disability Income Plan department, the Disability Management office, or they may visit www.3sHealth.ca and use Live Chat to communicate with a Benefits Services Officer.

Weekly Winners of a Fitbit

- Michelle Hiepka – Saskatoon Health Region
- Elke Wing – Regina Qu'Appelle Health Region
- Luise Clavdios – Regina Qu'Appelle Health Region
- Lisa Miller – Regina Qu'Appelle Health Region
- Teresa Roesler – Luthercare Communities
- Megan Burdi – Regina Qu'Appelle Health Region
- Georgia Shvidt – Etonia Personal Care Home
- Wendy Kistner – Kelsey Trail Health Region
- Christine Bradley – Sunny Hill Health Authority
- Helena Harder – Saskatoon Health Region
- April Wiltse McCready – Regina Qu'Appelle Health Region
- Chantelle Martin – Saskatoon Health Region

Grand Prize Winners

- **$250 Subway gift card**
  - Amanda Thompson – Regina Qu’Appelle Health Region
  - Shakira Donauer – Regina Qu’Appelle Health Region
  - Alan Brown – Saskatchewan Health Employees’ Pension Plan
  - Anthony Nunn – Manawan Churchill River Regional Health Authority
- **$500 SportCheck gift card**
  - Ray Brady – Regina Qu’Appelle Health Region
  - Rosanne Martin – Regina Qu’Appelle Health Region
  - Cheryl Cupid – Regina Qu’Appelle Health Region
  - Charlene Wethington – Saskatoon Health Region

Bow Flex

- Private Gabat – Santa Maria Senior Citizens Home
- Tread Cliff
  - Sharon Fonkyl – Heartland Health Region

Thank-you to everyone who participated.

For more information about the benefits and services available visit 3s-health.ca.

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**Disability Management Claim Application Process**

For an employee who is suffering from an injury or illness, applying for disability benefits can seem confusing and perhaps overwhelming. To assist employees through the claims process, the Disability Income Plan department, with input from employer and union representatives, has designed a comprehensive booklet which includes the information to help you make the best use of the coverage available. The booklets are being distributed across the province; for more information, please visit 3sHealth.ca.

**Claim Application Process**

For more information about Disability Income Plan claim application process. Also included in the booklet is a letter for the claimant to provide to their physician so the physician knows what medical information is required to complete the application. The booklets are being distributed across the province; for more information, please visit 3sHealth.ca.

**All extended health care and dental claims incurred in 2016 must be submitted to Great-West Life 1.866.278.2301 or 306.347.5559.**

**All extended health care and dental claims incurred in 2016 must be submitted to Great-West Life 1.866.278.2301 or 306.347.5559.**

**For further information please contact Disability Income at 1.866.278.2301 or 306.347.5559.**
**How to use Member eClaims**

You can save time and paper by submitting many of your claims online through GroupNet™ for Plan Members, Great-West’s secure online system. Using Member eClaims is easy:

1. **Sign in to GroupNet for Plan Members. Not registered yet?** You need your group benefits plan number (330353) and your Employee Number.
2. **You haven’t already signed up as Great Deposit of your claim payments (you need your bank account information) and select “Claims” for email notification when payments are paid. You’ll need these features to access Member eClaims. You can also choose to get text messages on your mobile phone advising when you have claims that are processed.**
3. **On the GroupNet home page, click “Claims” – Online Claim and select the details to submit your claim.**

**What type of claims can be submitted online with Member eClaims?** Claims can be submitted online where Great-West is the first or only provider of the service. Great-West supports claims submitted electronically if:

- your service was provided in Canada, and
- the service was incurred within the last six months, and
- payment is to be made payable to you.

Claims cannot be submitted online if:

- they are for medical equipment or supplies
- they are to be paid by Great-West directly to the service provider
- they are for a Type of Claim or Expense that is not listed as an option
- the service was incurred more than six months ago.

In this case, submit the claim using a paper claim form.

**eClaims Protecting your benefits**

Great-West is committed to protecting the benefits you have earned. An audit of your claims may be conducted unless your claim is selected for audit. If selected, you'll be notified. This audit feature is designed to protect your benefits plan from the cost of fraud and plan misuse.

**Traveling offers many rewards and challenges.** One challenge you don’t need is an emergency medical situation. By following these tips you can protect your benefits plan from the cost of fraud.

- Great-West’s out-of-country coverage is designed to provide benefits during a medical emergency while you or your dependents are temporarily outside Canada for business, education or vacation.
- These are some examples of what might be considered a medical emergency:
  - A sudden, unexpected injury
  - An acute episode of a medical condition that was not identified or being treated prior to departure from Canada
  - Any unexpected and unforeseen acute episode of a previously unidentified medical condition that was stable and controlled at the time of departure from Canada.

In assessing whether a previously identified medical condition is stable and controlled at the time of departure, Great-West will consider whether, within three months prior to your departure:

- You had any new medications or changes in dose
- Your doctor has prescribed or recommended any medical, surgical or diagnostic procedures for you
- Your medical condition has worsened

Great-West will also consider whether your doctor has advised you not to travel.

In some cases, Great-West will require your medical records to assess your claim.

Out-of-country coverage generally covers expenses associated with the initial treatment of a medical emergency, such as doctors fees, lab fees and hospital fees. Here are some examples of non-emergency expenses that may not be covered:

- Non-emergency care or follow-up care after the initial emergency treatment
- Expenses related to pregnancy or delivery after the 34th week of pregnancy or anytime prior to the 34th week if the patient’s Canadian physician considers the pregnancy to be high-risk
- Continued medical care following an emergency outside Canada if the patient’s medical condition permits a return to Canada for treatment
- If you have a medical condition, you may wish to check with your doctor before traveling. If you are advised it is safe to travel and you avoid the identification of your out-of-country coverage, call the Assistance Centre – Claims Department at 1-866-530-6025.

**Ensuring adequate coverage for extended periods outside Canada**

If you are leaving Canada for more than six months, you should inquire about getting a coverage extension under your provincial healthcare plan prior to leaving the country.

In addition, you should be aware that the 3sHealth Extended Health Care Plan provides coverage for the first 60 days of your trip. If you are travelling outside Canada for periods beyond 60 days, you may want to consider purchasing additional coverage.

If you are leaving Canada specifically to obtain medical treatment, you should contact representatives of your provincial healthcare plan and Great-West to determine if coverage is available.

**Keeping contact information current**

You must maintain coverage with your provincial healthcare plan prior to entering any other extended health care plan. For this reason, it is important that you keep your personal information current with your provincial healthcare plan. This includes providing notification of any address and name changes as well as any information about moving away from Canada for extended periods.

**In case of medical emergency**

If you experience a medical emergency while outside Canada, call the number on your travel assistance card. The assistance company will help arrange for appropriate medical care and the requested healthcare insurance coverage and provide necessary assistance, such as, flight, hotel accommodation and vehicle rental.

**Making a claim**

As a plan member, you are ultimately responsible for managing your out-of-country care and any related medical expenses. In addition to knowing your rights and responsibilities, you should be aware that the 3sHealth Extended Health Care Plan provides coverage for the first 60 days of your trip. If you are travelling outside Canada for periods beyond 60 days, you may want to consider purchasing additional coverage.

**Before you leave**

If you have a medical condition, consider talking to your doctor about whether it’s safe to travel. Follow up with Great-West if you need clarification of out-of-country coverage under your plan.

Be sure to pack your travel insurance information, along with emergency help numbers, your provincial health insurance card and your family doctor’s contact information. Let family members and travelling partners know the details of your travel insurance.

If you have your travel insurance card, visit Great-West’s GroupNet for Plan Members website to print a card. Travel Assist booklets are available through GroupNet for Plan Members, or by calling 3sHealth benefits service at 1-866-279-2000. The booklet is the same size as your passport and contains all of the information you will require when travelling.

**Did you know…**

You can save your travel assist card right to your phone with the GroupNet App.
Claims cannot be submitted online if:
- another provider, if:
- first payor or where claims payment is coordinated with

Claims can be submitted online where Great-West is the online with Member eClaims.

What type of claims can be submitted online with Member eClaims?
Claims can be submitted online where Great-West is the first payor.

How to use Member eClaims
This article is provided courtesy of Great-West Life.

Help us fight fraud by keeping these tips in mind:
- They're equipped with an expert anti-fraud team, advanced technology and rigorous claim controls.

Traveling offers many rewards and challenges. One challenge you don't need is an emergency medical situation.

Great-West Life's out-of-country coverage is designed to provide benefits during a medical emergency while you or your dependents are temporarily outside Canada for business, education or vacation.

There are some examples of what might be considered a medical emergency:
- A sudden, unexpected injury
- An acute episode of a medical condition that was not identified or being treated prior to departure from Canada
- An unscheduled, unexpected acute episode of a previously unidentified medical condition that was stable and controlled at the time of departure from Canada

In assessing whether a previously identified medical condition is stabilised and controlled at the time of departure, Great-West will consider whether, within three months prior to your departure:
- You had any new medications or changes in dose
- Your doctor has prescribed or recommended any medical, surgical, or diagnostic procedures for you
- Your medical condition has worsened

Great-West will also consider whether your doctor has advised you not to travel.

In some cases, Great-West will require your medical records to assess your claim.

Out-of-country coverage generally covers expenses associated with the initial treatment of a medical emergency, such as doctors' fees, lab tests and hospital fees. Here are some examples of medical expenses that may not be covered:
- Non-emergency care or follow-up care after the initial emergency treatment
- Expenses related to pregnancy or delivery after the 34th week of pregnancy or at any time prior to the 34th week if the patient's Canadian physician considers the pregnancy to be high risk
- Continued medical care following an emergency, outside Canada if the patient's medical condition permits a return to Canada for treatment

If you have a medical condition, you may want to check with your doctor before travelling. If you are advised it is safe to travel and you accept the certification of your out-of-country coverage, call Assistance Centre – Claims Department at 1-855-503-4025.

Ensure adequate coverage for extended periods outside Canada
If you are leaving Canada for more than six months, you should inquire about getting a coverage extension under your provincial healthcare plan prior to leaving the country.

In addition, you should be aware that the 3sHealth Extended Health Care Plan provides coverage for the first 60 days of your trip. If you are travelling outside Canada for periods beyond 60 days, you may want to consider purchasing additional coverage.

If you are leaving Canada specifically to obtain medical treatment, you should contact your provincial or territorial government to inquire about getting a coverage extension under your provincial health care plan.

Time requirements for claim submission vary by jurisdiction. Please be aware of these requirements to ensure you submit your claims within the designated time period.

When submitting an out-of-country claim to the Assistance Centre, please ensure you complete an out-of-country claim form, rather than an extended health care claim form. Claims can be mailed to:

Assistance Centre – Claims Department
P.O. Box 837, Station A
Mississauga ON L5A 2Y9

For more information

For out-of-country claim forms, visit Great-West’s website at www.greatwestlife.com and click Client Services, or use the GroupNet for Plan Members website. If you have any questions about out-of-country coverage, please call 1-855-503-4025.

Before you leave
If you have a medical condition, consider taking your doctor’s advice and staying safe to travel. Follow all guidelines. If you need clarification of out-of-country coverage under your plan. Be sure to pack your travel insurance information, along with emergency help numbers, your provincial health insurance card and your family doctor’s contact information.

Let family members and travelling partners know the details of your travel insurance.

If you have a travel or hospital stay abroad, visit Great-West’s GroupNet for Plan Members website to print a new card.

Travel Assist booklets are available through GroupNet for Plan Members. www.3sHealth.ca or by calling a 3sHealth benefit services adviser at 1-888-279-2300. The booklet is the same size as your passport and contains all the information you will require when travelling.

Did you know...
You can save your travel assist card right to your phone with the GroupNet App.


How to use Member eClaims

If you suspect fraud, you can report it to Great-West Life anonymously. Call 1-866-810-8477 or email confide@gwl.ca.

If you commit fraud, you could face job loss, fines and even jail time.

Great-West’s fraud detection practices are more sophisticated than ever.

When people collect insurance benefit payments they’re not entitled to, we all pay a price.

• Don’t accept money, products or services in exchange for your benefits information.

• Refuse to take part in any fraud schemes a service provider may suggest.

• Never submit claims for services that weren’t provided.

• In assessing whether a previously identified medical condition is still disabling at the time of departure, Great-West will consider whether, within three months prior to your departure:

  • You had any new medications or changes in dose.

  • Your doctor has prescribed or recommended any medical, surgical or diagnostic procedures for you.

  • Your medical condition has worsened.

Great-West will also consider whether your doctor has advised you not to travel.

In some cases, Great-West will require your medical records to assess your claim.

Out-of-country coverage generally covers expenses associated with the initial treatment of a medical emergency, such as doctors fees, lab fees and hospital fees. Here are some examples of claims that may not be covered:

• Non-emergency care or follow-up care after the initial emergency treatment.

• Expenses related to pregnancy or delivery after the 34th week of pregnancy or any time prior to the 34th week if the patient’s Canadian physician considers the pregnancy to be high-risk.

• Continued medical care following an emergency outside Canada if the patient’s medical condition permits a return to Canada for treatment.

• If you have a medical condition, you must wait to check with your doctor before travelling. If you are advised it is safe to travel and you accept the certification of your out-of-country coverage, call Centre Department at 1-800-530-6025.

In case of medical emergency

If you experience a medical emergency while outside Canada, call the number on your travel assistance card. The assistance company will help arrange for appropriate medical care and provide necessary assistance, such as flight, hotel accommodation and vehicle service.

Making a claim

As a plan member, you are ultimately responsible for managing your out-of-country coverage. This includes correctly filling out forms. Great-West has made amendments with the provincial and territorial governments in order to allow more efficient administration of claims. In all provinces and territories, you should submit your claim directly to the Assistance Centre – Centre Department. Great-West will pay the province’s or territory’s share of the claim cost and reimburse you for the balance of expenses covered under your group plan.

Time requirements for claim submission vary by jurisdiction. Please be aware of these requirements to ensure you submit your claims within the designated time period.

When submitting an out-of-country claim to the Assistance Centre, please ensure you complete an out-of-country claim form, rather than an extended health care claims form. Claims can be mailed to:

Assistance Centre – Centre Department
P.O. Box 87, Station A
Minneapolis, MN 55440

For more information

For out-of-country claim forms, visit Great-West’s website at www.greatwestlife.com and click Client Services or use the GroupNet for Plan Members website. If you have any questions about our out-of-country coverages, please call 1-800-530-6025.

Before you leave

If you have a medical condition, consider talking to your doctor about your safety to travel. Follow up with Great-West if you need clarification of out-of-country coverage under your group plan.

Be sure to pack your travel insurance information, along with emergency help numbers, your provincial health insurance card and your health doctor’s contact information.

Let family members and travelling partners know the details of your travel insurance.

If you have used your travel assistance card, visit Great-West’s GroupNet for Plan Members website to print your card. Travel Assist booklets are available through GroupNet for Plan Members. www.greatwestlife.com or by calling 311 health benefits service at 1-888-273-2731. The booklet is the same size as your passport and contains all the information you will require when travelling.

The high price of fraud

When people collect insurance benefit payments they’re not entitled to, we all pay a price.

Great-West Life’s fraud detection practices are more sophisticated than ever.

They’re equipped with advanced technology and trained claim experts.

Help us keep it that way by keeping these tips in mind:

• Never submit claims for services that weren’t provided.

• Don’t accept money, products or services in exchange for your benefits information.

• Check your explanation of benefits statements to ensure the stated services and expenses are appropriate.

If you commit fraud, you could lose your job, fines and even jail.

If you suspect fraud, you can report it to Great-West Life anonymously. Call 1-855-810-8377 or email confide@gwl.ca.
Important Changes to the 3sHealth Group Life Insurance, Extended Health Care and Dental Plans in 2016.

Effective July 1, 2016: The following benefit plan improvements were introduced:

- The maximum amount was increased from $3,000 to $5,000 per child; a pre-natal benefit was added: the monthly premium rate for Dependent Life Insurance decreased from $4.26 to $3.49 per month.

- Maximum; additional prescription smoking cessation therapy increased from $100 lifetime maximum to a $500 lifetime maximum.

- The Private Duty Nursing benefit increased from $7,500 to $10,000 per insured person per calendar year.

- The maximum amount of $400 per insured person per calendar year for paramedical services including massage therapy, social worker, physiotherapy, occupational therapy, and psychologist/psychomotor.

- A prescription or physician’s referral is no longer required if you have already used your full vision maximum for the year. The vision maximum may be pro-rated for other-than-full-time employees.

- Coverage for therapeutic equipment increased from 50% coinsurance to 100% coinsurance to a maximum of $1,000 per claim, and then the claim is paid at 60% coinsurance to a maximum of $3,000 per calendar year.

- The annual maximum amount was increased from $2,000 to $3,000 for dental benefits for individuals with bad teeth, bridges, crowns, and fillings.

- The unlimited coverage does not apply to diabetics.

- Diabetes: No new claims can be covered using the paper drug card method. The $10 per drug identification number (DIN) deductible will apply to all pay direct drug card transactions. Claim for diabetics may still be submitted using the paper claim method.

- Paramedical Services: A prescription of a physician is no longer required for paramedical services including massage therapy, physiotherapy, occupational therapy, and psychologist/social worker.

- Acupuncture was added as a covered service in the amount of $410 per insured person per calendar year.

- Private Duty Nursing: The Private Duty Nursing benefit increased from $7,000 to $10,000 per insured person per calendar year.

- Smoking Cessation Drugs: The coverage for smoking cessation drugs increased from a $100 lifetime maximum to a $200 lifetime maximum; additional prescription smoking cessation drugs were added.

- The annual maximum amount was increased from $2,000 to $3,000 for diabetics such as test strips, syringes, and lancets. Please note that the unlimited coverage does not apply to diabetic equipment.

- Diabetic supplies can now be covered using the pay-direct drug card method. The $10 per drug identification number (DIN) deductible will apply to all pay direct drug card transactions. Claim for diabetics may still be submitted using the paper claim method.

Here is the complete list of prize winners:

- Michelle Hedge – Saskatoon Health Region
- Elise Wing – Regina Qu’Appelle Health Region
- Luluita Drabicka – Regina Qu’Appelle Health Region
- Helen Stoddard – Regina Qu’Appelle Health Region
- Teresa Rowles – Lothian Communities
- Sherri Misko – 3sHealth Employee Benefits
- Megan Sudu – Regina Qu’Appelle Health Region
- Corinna Hunte – Etobicoke General Hospital
- Wendy Kolmet – Kisbaey Trail Health Region
- Christine Bradly – Sunera Health Authority
- Helena Harder – Saskatoon Health Region
- April Ward McCreary – Regina Qu’Appelle Health Region
- Charlene Martinez – Saskatoon Health Region

We wish to extend our thanks to all of you for participating in the Better U Challenge! We gave away many prizes over the course of the Challenge. Here is the complete list of prize winners:

- Grand Prize Winners
  - $250 Sobays gift card
  - Amanda Thompson – Regina Qu’Appelle Health Region
  - Sharenne Donauer – Regina Qu’Appelle Health Region
  - richard duncan – Saskatchewan Health Employees’ Pension Plan
  - Amanda Freedom – Mawson-Churchill River Regional Health Authority

- $500 SportChalk gift card
  - Hay Brady – Regina Qu’Appelle Health Region
  - Rosanne Martin – Regina Qu’Appelle Health Region
  - Cheryl O’Donnell – Regina Qu’Appelle Health Region
  - Charles Weiglach – Saskatoon Health Region

- Bow Flex
  - Private Gabrit – Santa Maria Senior Citizens Home

- Tread Climber
  - Sharon Forsyth – Heartland Health Region
  - Cherrylyn Dabao – Regina Qu’Appelle Health Region
  - Roxanne Martin – Regina Qu’Appelle Health Region
  - Christuih Chiu – Regina Qu’Appelle Health Region
  - Aram Kevorkian – Saskatchewan Health Employees’ Pension Plan
  - Amanda Thompson – Regina Qu’Appelle Health Region
  - Avril Wirth-McCready – Regina Qu’Appelle Health Region
  - Helena Harder – Saskatoon Health Region
  - Christine Bradley – Sunrise Health Region
  - Megan Budd – Regina Qu’Appelle Health Region
  - Shannon Domes – Prairie North Regional Health Authority
  - Teresa Roesler – Luthercare Communities
  - Faye Matthews – Regina Qu’Appelle Health Region
  - Michelle Haapala – Saskatoon Health Region
  - Michelle Hall – Regina Qu’Appelle Health Region

- Weekly Winners of a Fitbit
  - Ben Bannister – Regina Qu’Appelle Health Region
  - Pauline Penn – Regina Qu’Appelle Health Region
  - Anna Cooper – Regina Qu’Appelle Health Region
  - Michelle Thomas – Regina Qu’Appelle Health Region

- License Plate Hangers
  - Lisa Flood – Regina Qu’Appelle Health Region
  - Therese Zhang – Regina Qu’Appelle Health Region

- Fitness DVD
  - STRONG – Free Press Media
  - SHARING – True North Bank

- Beef Jerky
  - Winnipeg Saddles & General Store

- Nutrition Bar
  - Driscoll’s Berries

- T-Shirt
  - Flowers by Nona

- Coffee Mug
  - Starbucks

For more information about the benefits and services available visit 3s-health.ca.

Thank-you to everyone who participated.

For an employee who is suffering from an injury or illness, applying for disability benefits can seem confusing and perhaps overwhelming. To assist employees through the claims process, the Disability Income Plan department, with input from employer and union representatives, has compiled a comprehensive booklet which includes all the information required to complete the application.

The booklets are being distributed across the province; the goal is to have booklets available to all regions by November 1, 2016. Electronic versions will also be available on the 3sHealth website in the near future.

For further information please contact Disability Income at 1.800.362.3603 or 306.347.5559.
Important Changes to the 3sHealth Group Life Insurance, Extended Care Health and Dental Plans in 2016.

The following benefit plan improvements were introduced effective July 1, 2016:

- **Dental Benefits**: 100% coverage for dental services was added.
- **Dependent Life Insurance**: The maximum coverage was increased from $100,000 to $200,000 per insured person per calendar year.
- **Dental Benefits**: The annual maximum amount was increased from $12,000 to $24,000 per calendar year.
- **Diabetes Supplies**: The maximum amount was increased from $100 to $500 per calendar year.
- **Dental Benefits**: Acupuncture was added as a covered service in the dental plan.
- **Dental Benefits**: Doctor_EXCEPTIONS were added. The monthly premium rate for the Enhanced Dental Maximum Reimbursement Schedule was increased from $2,500 to $5,000 per child; a prenatal benefit was added; the monthly premium rate for Dependent Life Insurance decreased from $4.26 to $3.45 per month.
- **Dental Benefits**: Dependent Life Insurance decreased from $4.26 to $3.45 per month.
- **Dental Benefits**: The annual maximum amount was increased from $12,000 to $24,000 per calendar year.
- **Dental Benefits**: Dependent Life Insurance decreased from $4.26 to $3.48 per month.

**Therapeutic Equipment**

- Coverage for therapeutic equipment increased from 10% to 100%. This means the maximum of $1,000 per Walgreens for any one-like piece of equipment to 100% coverage to a maximum of $2,000 per Walgreens for any one-like piece of equipment.

**Vision Care**

- Prescription sunglasses and prescription safety glasses are eligible for reimbursement under the $300 vision maximum once every two years. Please note the vision coverage maximum will be pro-rated for other-than-full-time employees.
- Plan members will be eligible for reimbursement for laser eye surgery up to four times the annual vision maximum ($300 x 2 = $600 once per lifetime) with the restriction that a claim for prescription eyewear cannot be made for four years following the procedure. Please note the vision maximum may be pro-rated for other-than-full-time employees. You may not claim for laser eye surgery if you have already used your full vision maximum for the current two year period.

**Claim Application Process**

For an employee who is suffering from an injury or illness, the goal is to have booklets available to all regions by November 1, 2016. Electronic versions will also be available visit 3sHealth.ca.

**Disability Management Claim Application Process**

The booklet is being distributed across the province; the application is missing information that delayed the claim adjudication process. To assist employees through the Disability Income Plan claim application process, the 3sHealth administers four disability income plans: CUPE, SEIU-West, SWFT, and General. Each year plan members submit over 2,000 applications for disability benefit plans. Internal data gathering found that 30% of new applications are missing information that delayed the claim adjudication process.

For more information about the benefits and services available visit 3shealth.ca.

**Weekly Winners of a Fitbit**

- Michelle Haas – Saskatoon Health Region
- Elise Winger – Regina Qu’Appelle Health Region
- Lyrne Laidley – Regina Qu’Appelle Health Region
- Trisha Rowles – Regalia Community Health Centre
- Megan Stuif – Regina Qu’Appelle Health Region
- Cory Knuth – Elton Personal Care Home
- Wendy Kolmer – Estevan Trail Health Region
- Chelsea Bradly – University Health Authority
- Helena Harder – Saskatoon Health Region
- April Wrigh McCreary – Regina Qu’Appelle Health Region
- Chrystel Martin – Saskatoon Health Region

**Annual Claims Submission Deadline**

All extended health care and dental claims incurred in 2016 must be submitted to Great-West Life by April 30, 2017 in order to be eligible for reimbursement. If you experience assistance in submitting your claim please call Great-West Life at 1-866-505-2013.

For further information please contact Disability Income at 1-866-278-2301 or 306-347-5559.

**3sHealth Grand Prize Winners**

$250 Sobey’s gift card
- Amanda Thompson – Regina Qu’Appelle Health Region
- Shelley Donsauer – Regina Qu’Appelle Health Region
- Gareen D. – Saskatchewan Health Employees’ Pension Plan
- Ama Abu – Mawamishul Coastal Regional Authority

$500 SportChick gift card
- Kay Brady – Regina Qu’Appelle Health Region
- Roanne Martin – Regina Qu’Appelle Health Region
- Chrylly Colban – Regina Qu’Appelle Health Region
- Charlene Wether – Saskatoon Health Region

Bow Flex
- Private Glad – Santa Maria Senior Citizens Home

Treadmill
- Sharon Fong – Heartland Health Region

Thank-you to everyone who participated.

**3sHealth Patient Benefits:**

3sHealth administers four disability income plans: CUPE, SEIU-West, SWFT, and General. Each year plan members submit over 2,000 applications for disability benefit plans. Internal data gathering found that 30% of new applications are missing information that delayed the claim adjudication process.

For an employee who is suffering from an injury or illness, applying for disability benefits can seem confusing and perhaps overwhelming. To assist employees through the claim application process, the 3sHealth Disability Claims Team is available visit 3sHealth.ca.

The booklet is being distributed across the province; the goal is to have booklets available to all regions by November 1, 2016. Electronic versions will also be available visit 3sHealth.ca in the near future.

For further information please contact Disability Income at 1-866-278-2301 or 306-347-5559.