

Your responsibilities when submitting a health or dental claim

These general guidelines can help you understand some of your responsibilities when submitting claims for health care providers (such as dentists, pharmacists, hospitals and medical supply companies) and practitioners (such as chiropractors, massage therapists, chiropodists and physiotherapists). Improper claims can increase costs for plan sponsors resulting in decreased coverage for plan members. Following these principles will help ensure coverage is there when you need it.

- **Never sign a blank claim form** before or after visiting a health care provider. A claim form should always be complete before you sign it. When signing, check to make sure the date and patient's name are correct, the amount billed to the insurance company is the amount you paid, and the service billed is the treatment, product or service you received. **Your signature is our assurance** that the patient received the services appearing on the claim form.
- **Never submit a claim prior to receiving the medical treatment, service or product.**
- **Review claim acknowledgement statements for claims** that your health care provider submits directly to Manulife Financial. You should always receive a record or statement of your claim details from your health care provider, even if the payment was made automatically (as is the case when using your pay-direct drug card).
- **Never give anyone your policy numbers** or other information about your benefits plan, especially if they offer you cash or some other incentive.
- **Make sure you understand the treatments** being recommended for you and your family. It's natural to trust your health care provider, but don't be afraid to ask questions, particularly if treatment is extensive or "comes as a shock."
- **Ask your health care provider** if the treatments you receive are medically necessary. Ask if alternative treatments are available. Ask your dentist to prepare an action plan including treatments that are immediately necessary and those where a "watch and wait" approach is warranted.
- **Make sure your *Explanation of Benefit* statement is correct** when you receive it from Manulife Financial. If you have questions or detect errors, contact the Customer Service Centre at 1-800-268-6195. If you have registered access to the Plan Member Secure Site, you may use the *Send a note* feature on this site to contact the Customer Service Centre by e-mail.
- **Keep records of appointments, treatments and dates** so you have a personal medical history that you can refer to.
- **Know what your benefits are and how your benefits plan works** so you can make informed choices. Decisions are easier to make when you understand your plan and the coverage it provides.
- **Notify and reimburse Manulife Financial if items are returned for a refund** (such as eyeglasses or dentures) or if the provider offers discounts or incentives (such as out-of-country claims). Please note that only out-of-pocket expenses are eligible for reimbursement.

If you suspect fraud or the possible abuse of your benefits plan, your concerns can be reported anonymously at 1-877-481-9171 or e-mail gb.investigative.services@manulife.com