

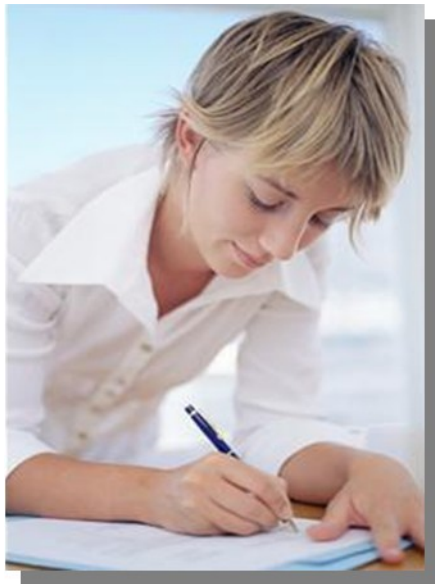
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**GROUP INSURANCE**



## Coordination of Benefits

A guide to the payment of claims when covered by more than one plan



You are entitled to Coordination of Benefits (COB) if a group health or dental plan is made available to you and/or your spouse/partner through your employer, a union, association or other organization.

Coordination of Benefits can help you and your family members receive the maximum eligible benefit from both policies. Payment of benefits is based upon the calculation rules specified by the Canadian Life and Health Insurance Association (CLHIA).

## Instructions when submitting a claim

## Claims for You and Your Spouse

*If the expenses are for YOU and you are the employee covered by Industrial Alliance through your employer.*

- Step one: You must first submit your claim to Industrial Alliance. Be sure to keep copies of all original receipts.
- Step two: Submit the unpaid portion of your claim to your spouse's plan by completing their insurer's claim form.
- Step three: Attach copies of your original receipts along with the explanation of benefits you received with your payment from Industrial Alliance.

*If the expenses are for your SPOUSE who is an employee covered under their own group insurance plan.*

- Step one: Submit the claim to their group insurance carrier first. Be sure to keep copies of all original receipts.
- Step two: Submit the unpaid portion of your spouse's claim to Industrial Alliance by completing our claim form.
- Step three: Attach copies of your spouse's original receipts along with the explanation of benefits they received with their payment from their group insurance carrier.

## Claims for Dependent Children

*If the expenses are for **DEPENDENT CHILDREN** who are covered under your plan and your spouse's group insurance plan.*

- Step one: Submit the claim to the group insurance carrier of the parent whose birthday comes first in the calendar year. If both parents were born on the same day, the alphabetical order of the parents' first names determines which plan the claim must be submitted to first. Be sure to keep copies of all original receipts.
- Step two: Submit the unpaid portion of the claim to the second carrier by completing their claim form.
- Step three: Attach copies of the dependent child's original receipts along with the explanation of benefits received with the payment from the first carrier.

*If you and your spouse are **SEPARATED** or **DIVORCED**.*

- Step one: Submit the claim to the plan covering the parent who has custody of the child. Be sure to keep copies of all original receipts.
- Step two: Submit the unpaid portion of the claim to the current spouse's plan by completing their insurer's claim form. Any unpaid portion can then be submitted to the former spouse's plan.
- Step three: Attach copies of the dependent child's original receipts along with the explanation of benefits from the first and/or second carrier.

## Claims for Post-Secondary Students (College/University)

*If your dependent children are enrolled in post-secondary studies and are covered under their COLLEGE OR UNIVERSITY INSURANCE PLAN and under your plan.*

- Step one: Health care and dental expenses must be submitted to their college or university plan first. Be sure to keep copies of all original receipts.
- Step two: Submit the unpaid portion of the claim to Industrial Alliance by completing our claim form.
- Step three: Attach copies of the dependent child's original receipts along with the explanation of benefits received with their payment from the college or university.

**Note that drug expenses for Quebec residents must be submitted to Industrial Alliance first. Any unpaid portion of the claim can then be submitted to the college or university.**

*If your DEPENDENT CHILD HAS A PART-TIME JOB and is enrolled in their employer's plan and is covered under your group insurance plan.*

- Step one: Your child must submit their claim to their own plan first. Be sure to keep copies of all original receipts.
- Step two: Submit unpaid portion of their claim to Industrial Alliance by completing our claim form.
- Step three: Attach copies of the dependent child's original receipts along with the explanation of benefits received with their payment from their employer.

## Claims for Retirees

*If you are RETIRED AND HAVE A PART-TIME JOB and are covered under a group insurance plan.*

- Step one: You must submit your claim to your *current* group insurance plan first. Be sure to keep copies of all original receipts.
- Step two: Submit unpaid portion of your claim to your *former* employer's group insurance plan by completing their insurer's claim form.
- Step three: Attach copies of your original receipts along with the explanation of benefits you received with your payment from the first group insurance plan.

**Note: If you are retired and have two group insurance plans, you must first submit your claim to the plan that has been in force the longest.**

## Claims if you have both an Individual and a Group plan

If you have a separate individual plan that you purchased on your own in addition to your group insurance plan, you must submit your claim to the group health or dental plan first. Any unpaid balance may be submitted for consideration to the insurer of the individual plan.

## Explanation of your benefit calculation

### *The first plan*

The first plan will reimburse the claim according to the specifications of your group insurance coverage. This means it will apply any deductible, reimbursement percentage and any maximum based on the coverage of that plan.

### Example – \$250.00 claim

| Eligible Expenses | Deductible | Reimbursement Percentage | Calculation                  | Your Reimbursement |
|-------------------|------------|--------------------------|------------------------------|--------------------|
| \$250             | \$50       | 80%                      | $(\$250 - \$50) \times 80\%$ | \$160              |

### *The second plan*

The plan that pays second calculates benefits for each individual item on the claim, based on the lowest of: a) the amount that would have been payable had it been the first plan, or b) 100% of the eligible expenses minus the benefits paid by the first plan. The combined payment from all plans cannot exceed 100% of the eligible medical or dental expenses.

### Example – Unpaid portion of claim from first plan (\$250.00)

| Eligible Expenses | Deductible | Reimbursement Percentage | Calculation       | Your Reimbursement |
|-------------------|------------|--------------------------|-------------------|--------------------|
| \$250             | \$0        | 80%                      | $(\$250 - \$160)$ | \$90               |

**Questions?**

If you have any difficulties coordinating benefits or if you have any questions, please refer to your group insurance plan booklet or contact your plan administrator.

