



Save time by submitting your claims through *my-benefits eClaims*.



my-benefits eClaims allows you to electronically submit the majority of your Health and Dental claims, including your drug claims that were not processed through your Pay-Direct drug card. Travel Health claims will continue to require a traditional paper-based claim form.

To submit a claim using *my-benefits eClaims*, follow these steps for **each receipt**:

- 1 Read and agree** to the "Terms and Conditions".
- 2 Select the patient who used the services** – you or a covered dependent.
- 3 Select the service or product supplied** (the type of claim). You can also submit claims coordinated with another plan by simply indicating to us who holds the other coverage.
- 4 Enter the service date and amount charged by the provider.** Attach an electronic copy of the original receipt, and an *Explanation of Benefits* statement if coordinating with a plan which has already paid a portion of the expense.

Click on ***Submit a Claim*** to repeat the process. A new submission is required for each claim receipt.

It's as simple as that.

You will receive an email notice when your *Explanation of Benefits* has been prepared and claim payments have been deposited into your designated account. You can view the status of any claim, at any time, under the *Claims Usage and History* tab.

To protect the Plan from fraud and misuse, claims submitted using *my-benefits eClaims* will be subject to random audits and verification. You must retain all original documents for 12 months from the date of submission, for presentation, should a claim be selected for audit.

my-benefits.ca