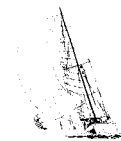


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From the Masthead



Mainstay Insurance Brokerage Inc. Phone: (905)886-9203

Employee Questions & Answers...

In order to serve you better

To assist you with your employee benefit plan, we are continually updating our website. Located at:

www.mainstayinsurance.ca

The site provides easy access to many insurance company's websites and to the health and dental claim forms you utilize on a regular basis. We have also added links to the log-on pages for members (employees) in order to provide quick entry to websites.

If you use a form that is not on our website and would like it added, please send us an e-mail at:

feedback@mainstayinsurance.ca

Want to cut your costs?

Do you share a large portion of your health and dental premium with your employer (e.g. 50/50 split)?

Does your spouse have benefits paid for by their employer that cover both you and your dependents?

If the answer to both these questions is yes, you may wish to consider the benefit of "waiving" extended health and dental coverage.

By doing so your eligible claims would be covered ONLY by your spouse's plan (rather than by both). This would result in a reduction in the cost of benefits for both you and your employer.

Contact your plan administrator for more information.

Your plan administrator, our firm and the insurance companies are often faced with questions about claims.

In this issue we deal with questions regarding dental coverage and claims.

Q. My dentist makes me pay for the cost of treatment and then I submit my claim for reimbursement. A co-worker never has to submit any form or pay a thing. Why?

A. There are a number of ways to make dental claim submissions to the insurer. There are also a number of ways to have those claims paid. Each of these depends on the system that your dentist uses in his or her practice.

The newest form of claim submission is electronic data interchange (EDI). With EDI the dentist transmits your claim electronically at the time of your visit. The dentist can also tell you, while you are still in the office, what will or will not be covered based on your plan design and limits.

If your dentist does not utilize the EDI system, the second most common method of submission is to have the dentist print out a completed claim form for you. In most cases, the dentist can print the claim on a Canadian Dental Association (CDA)

standard claim form. If you provide a current home address, plus your policy and certificate number, the dentist can prepare the claim form so that you only have to sign it and mail it to the insurer

The final method of claim submission is to complete the form manually and attach your dentists' bill. This is the method used if your dentist does not have the capability to use EDI or print claim forms. This system is also used for orthodontic work, as there are no codes utilized like there are with regular dental visits.

There are also a number of alternatives for the payment of your claim.

Depending on the method utilized to submit your claim, your reimbursement cheque will follow in anywhere from two days (for EDI claims with auto deposit) to three weeks (with manually completed forms being mailed in and returned).

With the first payment option, you pay your dentist the full amount owing at the time of your visit. This is the most preferred payment method as it keeps you fully aware of the services being performed and the accompanying fees that you are being charged for.

Alternatively, your dentist may allow you to assign

payment of the benefits directly to them. With this process payment is made from the insurer directly to the dentist. You pay only the costs that are not covered by your plan.

If you are considering assigning benefits directly to your dentist due to a cash shortage, an alternative may be for you to provide payment by credit card or by post dated cheque. Doing so will result in you receiving the reimbursement cheque from the insurer before the credit card bill or post-dated cheque are due. Check with your dentist about options that they provide.

Q. What is a dental pre-determination?

A. A pre-determination is a detailed estimate of the work that your dentist is planning. It includes both the codes and costs associated with each procedure. Insurers suggest that you obtain pre-determinations from your dentist prior to undergoing higher cost services. By submitting this information in advance of the procedure occurring, you will receive details about what is and is not covered. By doing so there will be no surprises about the costs you will be responsible for when the dental work actually occurs.



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Note: This side of the newsletter is intended for you, the plan administrator. The information on the 'front' is targeted more to your staff and can be copied and distributed for their reference.

Just in case you were wondering...

We have seen renewal rate increases DROP dramatically this year. From the 12-15% inflation of past years, we are now seeing single digit increases on average, with many clients having rate holds and decreases.

We hope these trends continue but at the same time note that the insurer's are not reducing the trend and inflation numbers from their renewal calculations. As you budget for next year, be cautious and not overly optimistic. Many high cost treatments are still entering the market and next year may not be as good as the past year.

This information is provided as a reference to clients of Mainstay Insurance Brokerage Inc. It is not intended as advice. Your situation and the contract provided by your insurer as well as any relevant legislation shall always take precedence. Always obtain appropriate legal, human resource or accounting advice.

Do you have American staff requiring EHC coverage?

Do you have sales or service staff or a satellite office in the United States? We can assist in setting up health care coverage for those staff.

If they are Canadian staff that reside in Canada and are covered by their provincial health plan then the out of province/country coverage provided by your carrier may suffice.

If the total days per year spent working and residing in the US surpasses the provincial plan maximums, or if your staff are American citizens that have become full time employees of your firm, then you may have to put a plan in place specifically for these people.

We work with a number of carriers that can help to

make this process easier. By using an American broker and a US based insurance carrier, you will receive coverage that fits the needs of your US staff and that is recognized by local service providers so that claims are paid more efficiently by local sources.

We deal with a number of brokerage firms depending on the size of your staff. For firms with 1-50 staff in the US, Digital Insurance Brokerage provides advice and access to Blue Cross and Blue Shield plans in each state as well as to other carriers.

For offices with more than 50, Clearpoint can help to design a plan that meets the needs of staff in one or many states. They use

a variety of US based carriers that specialize in the small to mid sized employer market.

If you currently have your plan with Great West Life (GWL), they have the ability to provide coverage to US based offices with their CANUSA product. The plan provides a selection of plan designs for you to choose from. They utilize both national pharmacy and dental preferred provider organizations (PPO's) as well as non - PPO plan options, depending on your needs and budget.

If you would like more information on these plans or a referral to a contact in the US, please call the office at (905)886-9203 or by email at info@mainstayinsurance.ca.

Communicating with clients. Newsletter to Website

Our web site is created to help make life easier for both employers and employees. With that in mind, we regularly update information in an effort to provide quick access to the data you need.



The best source of information that should be added to our site comes from you. When we receive a question about a tax issue for example, we find the answer and then post a link to the site for future reference for others.

If you have forms, links or data that you think would be helpful to access in this way, please let us know and we will add them to our site. We are also adding articles from a variety of publications that may provide assistance in the insurance, benefits or human resource areas. If you come across useful data in these areas, we can approach the publishers with permission to add them as well.

This quarterly newsletter "From the Masthead" is meant to keep you and your staff up to date on issues affecting insurance. Some of the articles are reprinted at the same time each year (tax issues for example) while others are in response to

questions received in the previous months.

We have included a copy of the newsletter on the website so that back issues and copies can be obtained at your convenience for review or to copy for distribution to your staff.

