

TIPS FOR PLAN ADMINISTRATORS

1. Timeliness is key!!! Enrolment forms, Change of Name or Beneficiary forms, Requests for adding Dependents or changing Dependant Status, Requests for Partial Waiver of benefits, Application for Benefits Previously Waived, and Salary Changes, should be submitted within 31 days of the change/coverage effective date.

Note: With many insurers some of these forms, functions, as well as other services, can be found online. Check our website for further information.

2. Employee Terminations must be reported to the insurer immediately, especially if you have a Pay Direct Drug Card. Please complete and fax the appropriate form, or otherwise notify the insurers office, as soon as you know about an employee termination.

If the insurer is notified late, and Extended Health or Dental claims are incurred after the employee's effective date of termination, premiums will be charged for the benefits until the end of the period for which claims were incurred.

3. Administration forms must be completed FULLY. Incomplete forms will be returned for completion.
4. Original administration forms are generally required. The insurer may process enrolment forms or changes that are faxed to their office or done over the Internet, but will often hold onto ID cards until the original form is received.
5. Coverage under the appropriate Provincial Medical plan is a pre-requisite requirement for Extended Health coverage with all insurers.
6. Requests to waive waiting periods for key senior employees, who are new hires, will be considered by the insurers upon receipt of a letter explaining why it is being requested. Each request is considered on its own merits but certain criteria must be met in all instances. Approval is not automatic and application should be made no more than 2 weeks after the requested effective date.
7. Chiropractors, Massage Practitioners, Naturopaths, Physiotherapists, and other Medical Specialists Insurers will pay up to the recognized fee guide schedule. Charges in excess of that amount are the responsibility of the employee. One should inquire before treatment as to what the charges are in relation to the fee guide. Note that for a dentist you should request a pre-determination before commencing restorative work.
8. For your convenience, with most insurers you are able to establish a Pre-Authorized Payment Plan. This will save you both time AND money (i.e.: on stamps, incurring late payment charges, and it could reduce bank charges for bill payment.)
9. For business owners and key employees, your company can provide tax free reimbursement for excess health and dental expense. Contact us for further information.
10. If you have questions or concerns about how an insurer is dealing with a situation, or may deal with an upcoming situation, contact your agent. That is what we are paid for.
11. Advantage Benefits Plus has a web site, from which you can obtain most administration forms. Check out: www.benefits.bc.ca!!!