



Seventh-day Adventist Church in Canada
Health Benefits Administration
 1148 King Street East, Oshawa, ON L1H 1H8

**Retirement
 Health Care
 Benefit Request**

Please type or print information and return to Health Benefits Administration at the above address.

Retiree _____

Address _____ Postal Code _____

New Address Yes No S.I.N. _____

Patient's Name _____ Patient's Date of Birth _____

Patient's Relationship to Insured: Self Spouse Child Other

Any other Medical Benefits for Retiree, Spouse or Patient? Yes No

Coverage Provided through: Blue Cross Provincial Plan Employer Sponsored Plan Other

If other is chosen, please indicate: Name _____ Policy # _____

Was condition related to an accident? Yes No If yes, please give date _____

Description (how and where) _____

Attach Fully Itemized Statements

- Please pay provider (Statements **must** include: diagnosis, date of service and service performed)
- Please reimburse retiree

How to Request Benefits

Complete the Health Care Benefit Request form in full. It is important that you provide all the information requested. *If you omit needed information, benefit payments could be delayed.*

Provide Proof. Original bills of providers are accepted if they are on the letterhead of the provider or on a claim form, and contain the following information:

- Name of patient and name of employee
- Date of service, treatment or purchase
- Type of treatment
- Diagnosis
- Each item or service for which you are charged
- Amount of charge

Note: Non-itemized receipts or billings are not acceptable.

This claim form should not be completed for Dental or Prescription Drug claims. Dental claims should be submitted on a standard Dental Claim Form, available at your dentist's office.

Prescription drug expenses are reimbursed through your pay-direct card. Present the prescription along with your RX Plus card to the pharmacist and pay the required deductible amount per prescription. There may be certain circumstances where you have to pay cash for your prescription. If that is the case, you may be reimbursed by RXPlus by completing the RX Plus claim form. The claim will then be reimbursed directly to you from RX Plus.

Important Reminder

Please be sure you provide your Social Insurance Number