Quick Reference for Group Administrators



Answers to the most common questions Group Administrators ask about their Alberta Blue Cross plans.

Employee eligibility

- Employees must apply for coverage if they
 - are employed on a permanent basis AND
 - work the minimum number of hours per week as stated in the group contract.
- Alberta Blue Cross must receive employee benefit applications for all eligible employees/dependents within 31
 days of their effective date of coverage following the plan waiting period (probation period). This is to ensure
 the new employee is not administered as a Late Applicant, which could delay the benefit effective date.
- An employee can choose to waive benefits due to spousal coverage. The employee is able to rejoin your benefit plan only if spousal coverage has been terminated or significantly reduced. **Employees must apply within 31 days of the change**.
- Eligible employees with dependents must apply for family coverage.

For groups with Life and Disability benefits:

- Employees who waive either Life or Disability benefits must opt out from entire Life and Disability coverage rather than from select benefits.
- A non-evidence limit (NEL) refers to the amount of coverage available for Life, AD&D, Weekly Indemnity and Long-Term Disability without the submission of a medical evidence questionnaire.
- If a Statement of Health or other medical evidence forms are required, Alberta Blue Cross will request them.
- If employees do not submit applications within 31 days of their eligibility date, they may be asked to undergo a medical examination and complete a Statement of Health. Late applications will result in either a Request for Medical Evidence of Insurability or premiums being charged retroactively (depending on Life Contract).
- To ensure no delays in processing applications, make certain that all submitted forms are completed in full and signed.
- Please remember that submitting an application does not guarantee coverage and that the applicant is responsible for the cost of obtaining any additional information for a late application.

Waiting periods

• A plan waiting period, or a probation period, is the period of continuous permanent active employment that must be completed by employees prior to becoming eligible for group coverage.

Waiting period examples

• An employee becomes eligible for coverage first day of the month following three months of continuous permanent active employment OR three months from the exact date of hire. Note: If the first working day of the month falls on a day other than the first day of the month, that month will be calculated toward the plan waiting period.

When does an employee become eligible?	date of hire	eligibility date
first day of the month following three months of	June 15	October 1
continuous permanent active employment	July 3 (first working day of the month)	October 1
three months from the exact date of hire (rates will be deducted as of December 1)	August 15	November 15

 Any employee changing from part-time to full-time employment must complete the waiting period once full-time employment begins.



Change in eligibility

Report any of the following changes in an employee's status:

- Employee terminations
- · Marriage or common-law relationships*
- Legal separation or divorce*
- Section changes
- · Benefit status changes
- Waiving coverage
- Employee address change, name and/or employee number changes
- Reinstatements
- Adding or deleting dependents*
- *Remember to complete a beneficiary form in addition to an Employee Benefit Change form, when applicable.

For groups with life and income replacement benefits:

- Salary changes
- Occupation changes
- Change of beneficiary*
- * Any changes to the original application form that relates to beneficiary designation or relationship must be submitted on an Alberta Blue Cross Beneficiary Appointment/Change form (ABC 30081).

To report changes, complete an Employee Benefit Change form and submit the form to Alberta Blue Cross within 31 days of the of the requested effective date of change.

Terminations

- When an employee leaves your company, inform Alberta Blue Cross immediately by submitting an Employee Change form.
- Let the terminated employees know when their Alberta Blue Cross benefits will expire and advise the employees that any use of an invalid identification card is a fraudulent act.

Making your payment

- Your Alberta Blue Cross benefit plan is a **prepaid** program. Your payment is due the first day of the month in which your group is being billed. If your payment has not been received by the payment due date, any claims incurred/submitted will not be processed.
- Additions, terminations and/or changes will be processed when Alberta Blue Cross receives the appropriate form, and adjustments will appear on a future Statement of Account.
- If paying by cheque, you must forward the perforated portion of page one of your monthly Statement of Account along with your payment.
- If you wish, you can sign up to have your monthly rates withdrawn from your bank account as a pre-authorized debit.

Questions?

Group Administrators

For all inquiries, contact Alberta Blue Cross at **780-498-5925** (Edmonton) or toll free at **1-866-498-5925**.

Forms, including Employee Benefit Application and Employee Benefit Change, are available at www.ab.bluecross.ca.

Employees

If your employees have questions about their claims or benefits, they should contact Alberta Blue Cross Customer Services at **780-498-8000** (Edmonton) or toll free at **1-800-661-6995**.



