



REPORT COTAPSA MEMBER RESPONSE TO GREENSHIELD (GSC) ISSUES

Date Provided: March 7, 2017
Response Due: March 17
Submitted by: Executive Director
To: City HR - **CONFIDENTIAL**

ISSUES – In the fall of 2016 COTAPSA worked with the City to communicate the change of insurance carrier from Manulife to Greenshields (GSC). We were told and promoted that 'coverage was to remain the same' but became concerned in Jan/17 when numerous calls were received regarding issues encountered with GSC. Resultantly, a Member Bulletin was sent requesting input. Many responses were received.

Greatest concerns

- * Negative attitude expressed by GSC reps, in many cases reps are not knowledgeable, and overall there seems to be poor customer service: *"he indicated this was a general complaint being registered by many, and this was due not to a reduction in coverage during switch to GSC, but more that coverage is now being properly administered.*
- * GSC reps telling members that they *don't have to offer the same as Manulife* – which is not what COTAPSA was led to believe.
- * Members 'sandwiched' between Manulife and GSC when trying to recover claims reimbursement
- * Lack of information on the new plan

The aim of this exercise is to have the issues sorted out for the membership. We receive a multitude of complaints – some with a great deal of detail – we honed down the materials and placed under eight most prominent areas of concern and then broke into smaller categories.

We are providing this in advance of the meeting on April 4th so we can have a fulsome discussion

Part A	Operations
Benefits Booklet/Pay Schedule	<p>Multiple, multiple complaints that benefits booklet and information in general on the GSC plan is not available</p> <p>Example of responses:</p> <ul style="list-style-type: none"> • <i>Understand there will be changes, but main concern is we have no idea what they are, as we have nothing from GSC confirming coverage...</i> • <i>Manulife booklet was the sole source for information pertaining to coverage, there does not appear to be a similar booklet available from GSC.</i>

	<ul style="list-style-type: none"> • <i>Discrepancies in benefits were identified and clarification on coverage was requested. No reply.</i> • <i>There is nothing comprehensive on the GSC website detailing coverage.</i> • <i>Manulife pay schedules compared to the Green Shields schedule -- Should be the same and the plan members should have access to this information.</i> • <i>Had dental procedures in Jan/17, what is the Manulife pay schedule as compared to the GSC schedule. It should be the same and the plan members should have access to this information</i> • <i>In two emails, I included proof that my prescription was fully covered by Manulife (for many years), received no response to either email</i>
Travel Insurance and travel issues	<p>No information in regard to coverage(s). GSC contacted, could not provide details and suggested employee obtain <i>own travel medical</i> insurance as the GSC Rep <i>could not "confirm coverage until the transition is complete"</i>.</p>
	<p>Going to Europe, contacted GSC, <i>no one could tell me what my travel coverage is</i> and there is no information on the website</p>
	<p>Submitted Expenses & Receipts to GSC received from the Doctor while under his care in Honduras. Amount: \$70 (or \$91.85 Canadian), response was Eligible = \$0, Paid = \$0 There was a note that the <i>Product is not a Drug Benefit Prescription Number: 1</i> <i>Adjusted to reflect correct DIN / Procedure Code Not a Benefit of Your Plan.</i> Member wrote GSC that Honduras may not use DIN Numbers and is probably very limited on the options that they had to treat their patients. No response from GSC</p> <p>Response: Require employee name to confirm with GSC.</p>
Slowness and related issues	<p>Reimbursement claim submitted early Jan/17. Received no response so GSC was emailed, GSC then requested details regarding what the claim was for and did not acknowledge receiving the initial claim. Next day, the claim paid -- just placed in my account</p> <p>Response: Require employee name</p>
	<p>Slow in processing claims. Several claims sent by registered mail on Jan 31/17, not paid until Feb 22.</p>

	<p>Took 16 business days to process.</p> <p>Response: Require employee name</p>
	<p>Numerous problems and delays getting reimbursed. Every transaction required contact to straighten out a problem:</p> <ul style="list-style-type: none"> • Measured for orthotics Dec 29/16, claimed early Jan/17, straightened out in late Feb. After 2 months and multiple phone call was reimbursed • 3 children to the dentist. Dental office submitted claims for all 3, GSC only reimbursed for 2. Dental office sent all 3 to GSC but is now re-submitting 3rd. Another follow-up required. <p><i>Only had to call Manulife 4 times in 19 years.</i></p> <p>Response: Require employee name</p>
Co-ordination of Benefits	<p>As my partner is with GSC coordination of benefits should be easy <i>as they claim</i> however with medication it's not the case. GSC caps medication costs for one member, if it's reached, they don't care if a coordination of benefits is on file, and they won't pay any difference owing.</p> <p><i>They don't understand coordination of benefits</i></p> <p>Response: Require employee name</p>
	<p>Must submit all dependents claims through partners carrier initially (manually) and then through the City provider.</p> <p>Response: Require employee name</p>
	<p>Difficulty getting started with GSC ... resolved problems on own after many phone calls between the City and GSC.</p> <p>Never had a problem coordinating benefits with Manulife.</p> <p>Response: Require employee name</p>
	<p>Drug claim for dependent declined because I submitted it rather than my husband (whose birthday comes first). The GSC agent readily saw we both had City of Toronto benefits and that we had both signed the statement. She kept me on hold, resolved the problem and ensured the payment was posted during the call.</p>

	<p>When I asked, she advised me to submit our dependent's claims with my husband listed in Section 1 and me in Section 2. I still plan to list my email address and phone number as I am the contact who best understands the process after all these years.</p> <p>Response: Require employee name</p>
Adding dependents to benefits	<p>Trying to add partner (2.5 year in common law relationship) and her two kids to benefits.</p> <p>City now has a "positive enrolment" plan and member must submit specific documentation to prove they are common law. Told to provide a marriage certificate (are not being married until the end of 2017) so other option is to provide a Service Canada '<i>Statutory Declaration of Common Law Union</i>' but he has been advised by Service Canada (responsible for) this information is incorrect rather a Notary Public is required to sign a common law declaration.</p> <p>Concerns: 1) the additional cost, 2) why the City can't accept other forms of proof that hold similar significance (mortgage paper) and 3) previously added a dependent (prior relationship) to benefits with Manulife with no issue.</p>
Claim submission documentation, accepted receipts and lack of use of email	<p>Numerous complaints received on these items – Claims Submission documentation, Accepted Receipts and lack of use of email</p> <p>Claim submission for extended health care returned multiple times for insufficient documentation. GSC required original documents including proof of payment. An invoice marked "paid" by the service provider was not acceptable. GSC requires submission of receipt from the debit/credit machine or a bank/credit card statement with all other transactions blacked out.</p> <ul style="list-style-type: none"> • If a cash payment, now required to obtain a refund and then to pay by debit/credit in order to obtain '<i>proper documentation</i>'. This process not in line with what Manulife required. • If providing a bank statement, cannot submit a claim for up to 4 weeks after the date of the service. • Service provider's conduct business by email as most businesses do, but GSC won't accept. • It is unacceptable for GSC to require such an onerous procedure for documentation.
Form – Language Concern	<p>Para 3, Sec 4 of the GSC Claim Form and the Enrollment Form is troublesome. Should be changed to remove the <i>possibility</i> of having coverage terminated.</p> <p>The last phrase should be changed to add "as a result of my <i>intentionally providing false, incomplete or misleading information</i>."</p>

General complaints	<p>Many complaints received regarding services like: massage therapy, dental and optical. Opinion is GSC is totally different from Manulife</p> <p>Response: Require employee name</p>
	<p><i>Growing impatient with GSC and don't know who to talk to...often on hold for 20 minutes at a time trying to get an answer.</i></p> <p>Their customer service is poor.</p>
	<p>The differences between Manulife and GSC are very frustrating.</p> <p><i>If nothing was to have changed, why are certain things not covered now?</i></p> <p>Response: Require employee name</p>
Part B	Dental
Cleaning	<p>An application of desensitizing solution for sensitive teeth to gums after cleaning was included in Manulife coverage, not GSC. Told the treatment is only covered when done in conjunction with two other procedures (deep gum scaling etc.). A charge of \$52 was not covered.</p> <p>Response: Require employee name</p>
Night Guard	<p>GSC was contacted by dentist regarding coverage for a <i>night guard</i>. 2 quotes provided – 80% and 97% coverage. Previously Manulife covered 100%.</p> <p>Response: Require employee name</p>
Dental fluoride	<p>No coverage for dependent over 16 years of age – covered before</p> <p>Response: Require employee name</p>
Zoom Whitening	<p>No longer covered.</p> <p>Response: Require employee name</p>

Dental Exam	<p>GSC limits the number of dental exams to 3 per year. This includes normal recall exam and emergency exam. 2017 I visited dentist for emergency exams 4 times. GSC covered 3 occasions but for the 4th paid out my pocket. For the remainder of the year I was told I had exceeded my limit for dental exams, therefore cost for other exam in 2017 are mine.</p> <p><i>I do not recall Manulife's coverage of dental exams</i></p> <p>Response: Require employee name</p>
Implants/bridge	<p>Implant in 2016. Final procedure was the installation of crown, dentist submitted estimate to Manulife Nov/16. Manulife did not approve the crown for the implant <u>but</u> approved amount for dental bridge. (Manulife paid to the amount for a dental bridge).</p> <p>Unable to have the crown installation in Dec/16, was done in Jan/17. Submitted claim with supporting documentation. Denied reimbursement by GSC. After 2 months of fighting finally received payment.</p> <p>I had a front tooth implant in Mar/10. Manulife covered half of the cost of the implant, approx. \$2,000. In discussions with Manulife at that time, they covered the cost as if I had received a dental plate. NOTE -- If I had a dental plate additional 2 healthy teeth would have been destroyed to make the plate work.</p> <p>I had no issues with Manual life and they covered the crown with no issues.</p> <p>When I shared information with GSC I was asked to provide proof. I no longer have the paper work nor should I have to provide proof. GSC as I understand received all documents so they should be able to look this information up.</p> <p>Manulife authorized implants based on cost for a denture or partial plate and patient was to pay the remainder. Practice has changed.</p> <p>An implant is a onetime expense if you go the route of a denture or dental plate then there is continual costs in repairs and up keep.</p>
	<p>Dental estimate for implant submitted, GSC responded with \$0 benefit.</p> <p>Manulife had covered Alternate Treatment for implant in the past (equal to estimate for a bridge).</p> <p>GSC Customer Service stated they would not cover Alternate Treatment since it was not part of the Policy.</p>
Estimates/ Coverage	<p>A dental procedure approved by Manulife in Dec/16 was not approved by GSC in Jan/17.</p> <p>Predetermination from Manulife had to be resubmitted then it took another month for GSC approval and payment.</p>

	<p>Dentist submitted request for an estimate on Jan 25/17, still no response as of Feb 24</p> <p>Response: Require employee name</p>
	<p>Root canal provided dental pre-estimate, same procedure done in 2016, covered by Manulife. 2016 dentist estimated \$948, Manulife covered \$934, balance of \$14 paid by employee. Same procedure, 2017 the dentist estimate \$1111, GSC covering \$894, employee to pay \$217.</p> <p><i>Agreed I might pay more because the dental estimate higher in 2016. However, why is coverage less in 2017 than 2016 for same procedure when benefits were to be the same? At a minimum, it should be the same amount as received 2016, but is \$40 less.</i></p> <p>Response: Require employee name</p>
	<p>Estimate submitted for crown. Member informed only 80% coverage for "major" work. <i>Manulife full coverage</i></p> <p>Response: Require employee name</p>
	<p>April/16 diagnosed by dentist as needing crown, predetermination was obtained from Manulife Apr/16. Manulife pre-treatment estimate 80% - \$828 of the eligible amount of \$1,035. (Did not have procedure).</p> <p>Jan/17 dentist again flags need for crown before further deterioration. Even though the coverage was to be identical to Manulife, I obtained a predetermination of coverage from GSC</p> <p>Predetermination received Jan/17 -- \$0 covered as GSC requires x-rays of the tooth. Dental office had mailed to GSC (<i>GSC does not accept x-rays by email or fax as Manulife did</i>).</p> <p>March/17 received GSC predetermination. GSC does not provide the same coverage for the procedure and provides no indication as to how the eligible amount of \$314 was calculated aside from stating "<i>The eligible amounts are in accordance with the fee guide allowed by your benefit plan</i>". If the benefit plan does not provide 80% coverage for crowns then the benefit plan has changed contrary to the reassurances that health and dental coverage would remain unchanged.</p>

	Response: Require employee name
	GSC short paid compared to Manulife. I paid the difference of \$70 to my dentist. Response: Require employee name
	Two employees had a root canal procedure and received payments of a different rate. It appears this is for two reasons: <ol style="list-style-type: none"> 1. GSC pays for only one root canal and will pay for a 2nd only if the dentist provides x-rays to them – this was never the case with Manulife. 2. Another employee – for the same root canal was paid a lower amount than even the single root as they also deducted the pulp treatment – GSC is looking at history of the tooth – employees understanding is that because this was part of an emergency treatment and with a separate dentist the pulp treatments should <u>not</u> have been deducted – (under the ODA if the same dentist then they have to deduct 50%) - it would not have been deducted with Manulife <p>Both procedures are part of Part 11 -100% claims at the 2016 rates.</p> <p>Response: Require employee name</p>
Part C	Optic
Eye exams/ prescription glasses	Received multiple complaints on this item Eye exam \$95 and prescription glasses over \$500. GSC only covered to a maximum of \$475 (includes eye exam and prescription together). Change from Manulife where the two items were paid separately.(exam one payment, glasses another)
Part D	Pharmacy
Co-pay/ dispensing fees	Received multiple complaints and questions regarding this item <ul style="list-style-type: none"> • Prescription under GSC coverage, pharmacy demands \$9 "co-pay" fees. <i>No idea what this is, never paid it under the Manulife. Is it a change in policy at the pharmacy or due to the drug plan?</i> • <i>Encountered issues regarding dispensing charges</i> • <i>Charged a compounding fee for prescription previously covered by Manulife. The cost was about \$24.</i>

	<ul style="list-style-type: none"> • For 4 years dispensing fee not charged at pharmacy, now charged. Never paid with Manulife. • GSC hard caps dispensing fees at \$9, anything over will not be covered • Manulife the annual deductible was \$10 and I had to pay \$11.
100% payment	<p>Received multiple complaints about the 100% coverage</p> <ul style="list-style-type: none"> • Filled 2 antibiotic prescriptions last month, charged a portion of each prescription, and although a nominal fee of \$5 each, in the past this was not charged. • When discussing with GSC and explaining that Manulife would cover whatever my partners insurer did not, rep indicated this was a <i>general complaint being registered by many, and was due not to reduction in coverage during switch to GSC, but more that coverage is now being properly administered...</i> went on to say (was likely why the City chose GSC in the first place). He went on to say... Manulife typically paid out whatever drug was provided by pharmacy (even if not the "lowest cost alternative"), whereas GSC checks to see if a lower cost alternative exists, and only pays up to that amount. • Told the insurance carrier doesn't cover 100% of the dispensing fee, Manulife did. <p>Response: Require employee name</p>
Prescriptions not covered	<p>Prescription of a specific name brand <u>only</u> for a medication. "No Substitutions" specifically stated on the physician's script.</p> <p>GSC will not cover, they will authorize <i>generic</i> only for the medication – which is counter to the doctors written order</p>
	<p>Three complaints specific to drug RANIDITINE</p> <ul style="list-style-type: none"> • Prescription for RANIDITINE since May/16 covered by Manulife, GSC did not cover last prescription. GSC was contacted and they requested proof from Manulife of coverage, proof supplied but no response received • Dependent required multiple medications due to a life threatening medical condition (diagnosed in 2014), including RANITIDINE which has a DIN number and was covered by Manulife. GSC refuses to cover saying it is an off the counter medication (Zantac). Employee called GSC and told them Manulife covered for 3 years and was told just because Manulife covered does not mean GSC will • Been getting a prescription of 150mg Ranitidine for the last 20 years with Manulife with no issues. I recently went to the doctor to refill a prescription for this medication, and they had told me it is no longer covered with GSC. (They told me it was because it can be purchased over the counter, but the mg for this prescription is 150 mg, and the one over the counter is only 5 mg).

	<p>Medication for yeast infections -- Manulife covered, GSC will not</p> <p>Response: Require employee name</p>
	<p>Prescription filled and GSC will not cover, Manulife covered at 100%.</p> <p>Response: Require employee name</p>
	<p>Prescription for various <i>aspirin</i> for high blood pressure, GSC will not cover all or any part of the prescription, Manulife covered.</p>
	<p>Prescription covered through Manulife, recently pharmacy stated prescription was blocked by GSC. Pharmacist called GSC who advised the policy didn't cover the drug. Employee contacted GSC to ask why Manulife covered and GSC doesn't..... Placed on hold, then told the pharmacy was provided with incorrect information and employee directed to mail receipt to GSC's Windsor address and request refund. Still not received</p> <p>Response: Require employee name</p>
	<p>As a part-time (semi-retired) manager, I pay 60% of the monthly costs of health and dental coverage - more than 10% of my take-home pay. Now be required, without notice, to cover the full cost of the only prescription drug I take on a regular basis making it unacceptable and unaffordable. Went back to my doctor to obtain a new prescription for different drug dosage which GSC will cover. This change had negative consequences on my health, destabilizing a health problem which was well controlled on the prior medication regime for over 10 years.</p> <p>The drug GSC would not cover costs less (under \$50 for 100 days) then the one I was forced to switch to, which is about \$21 per month, (equivalent of almost \$70 for 100 days).</p> <p>Response: Require employee name</p>
Computer interpreting submission	<p>Jan/16 filled prescriptions, but warned by GSC (via letter) I had received more than 6 month supply of certain diabetes products. <i>The letter was misleading and wrong in some statements.</i></p> <p>GSC contacted to ensure ability to receive needed supplies. Turns out because insulin prescription was filled in Dec/16 under Manulife, GSC interpreted prescriptions to classify as a Type 2 diabetic rather than a Type 1 and system automatically issued the letter/warning on that basis.</p>

	There is no issue now as far as their filling the order <i>but of concern is that system made the interpretation and produced letter</i>
Age Restriction	3 part prescription – 1 st treatment covered by Manulife, now not covered by GSC due to age restriction Response: Require employee name
Part E	RMT/Osteopath
Osteopath	Some claims GSC requires an original receipt and other not. Member asked GSC why and was informed some providers are in 'good standing' with GSC, others aren't. When asked what that meant it was explained that it related to the practitioners billing being in order with GSC. Jan/16 GSC would not process further Osteopath claims as he was not in 'good standing'. Member provided GSC with original receipt and an invoice showing Osteopaths license number and GSC agreed to pay outstanding claims on a one time basis only, but no further payment of claims for this provider would be accepted, due to GSC billing problems with the provider. GSC billing issue with a provider should not limit which provider can be used
	After Dec 26/16, 1 or 2 receipts (osteopath) sent to GSC ...GSC denied saying they require a copy of the credit card/cheque used to pay for that service. <i>My first question is how to prove when you path cash? ...</i> Paid by cheque so could trace the payment but at additional cost out of pocket. Manulife never requested
Massage/ Physio	RMT 100% covered and reimbursed by Manulife but not with GSC. Response: Require employee name
	Previously RMT forwarded claim directly to Manulife and employee did not have to submit claim. Many RMT do not deal with GSC for direct claims
	Massage – decrease in eligible benefit Response: Require employee name
	Massage claims submitted for self and dependent January/17, amount claimed was not the amount reimbursed. With Manulife, once you reached your yearly maximum you then paid out of pocket. The claim was for \$135.60 each and reimbursement was \$84.66 each which is a partial reimbursement. Definitely not how it used to be issued with Manulife. Response: Require employee name

	<p>Manulife dealt with physio claims they were \$80 each and fully reimbursed. Now claim is \$85 but I am only getting \$84. My understanding as a grand-parented employee is that I was fully covered for physio and there was no cap of any sort. When I go into my record it seems to indicate that I have an overall grand total cap of \$16,500 - I was totally unaware that there was a cap of any sort</p> <p>Response: Require employee name</p>
	<p>Submitted claim for massage therapy (45 mins) and told reimbursement is based on an "hour" massage and therefore only received approximately \$76 Manulife payment not based on how long but cost. Spoke to a rep from Manulife last year and she indicated its' not based on the length of time for a massage but on the customary amount <i>the province sets forth as a standard</i>. If massage was an hour I received the customary amount paid but because I optioned for a lesser time, I got \$76 based on a formula used to calculate my benefit even though it cost more than \$102. It doesn't make sense and is not the way it was done by Manulife.</p> <p>Response: Require employee name</p>
	<p>Uploaded all the documents required by GSC (i.e. Dr note, receipt from RMT, MasterCard receipt indicating payment of service). Declined claim, Claim Statement included a message "<i>Original receipts accompanied with valid confirmation of payment (such as cancelled/cashed cheque or electronic credit/debit slip) is required to complete claim adjudication. Please mail this statement with the requested information</i>". She called GSC and was told to write her plan member number on supporting documents, message sent had nothing to do with her denial. Claim was finally processed but GSC made it more difficult. Couple of concerns:</p> <ul style="list-style-type: none"> - Nowhere on the GSC website does it indicate you have to write down the plan member number on supporting documents - Manulife accepted an official receipt from RMT and didn't require another proof of payment. <p>Response: Require employee name</p>
	<p>Submitted claim to GSC for massage therapy for 30 minute chair massage amount of \$54.18 include HST. GSC covered \$51 Manulife was covering the full amount.</p>

	Response: Require employee name
Requirement of Doctors note	GSC processed a claim for massage for a dependent on Dec/16 but advised they will not process future claims until dependent submits a letter from physician.
	Manulife allowed massage therapy without a Doc's note, GSC demands one
Part F	MEDICAL DEVICES
Orthotics	2016 quote submitted to Manulife to ensure coverage for a yearly pair of orthotics, received letter confirming. 24 Dec/16 purchased orthotics for self and spouse. Claim submitted to GSC, responded 17/Jan/17 no entitlement. Submitted Manulife entitlement letter and received no response, 2 weeks later called to check status and told was entitlement <u>but</u> GSC had to update their system to process claim. Called on Feb 22 told they did not know when the system would be updated, 24 Feb/17 GSC system still not updated in order to process claim. Response: Require employee name
	GSC advised orthotic coverage once every 2 years. Made a claim in 2015 and submitted a claim for orthotics I purchased in 2016. GSC further advised they are waiting for the City to provide updated coverage information. My claim was submitted late Jan/17, there is no resolution. I've tried to contact corporate benefits to no avail. Response: Require employee name
	Denied \$860 orthopedic expenses (GSC stated no coverage according to <i>my plan</i>). <i>Was covered before by Manulife.</i> Response: Require employee name
	Orthotics obtained and submitted the lab report requested (which is a new/different part of the process from Manulife) Still waiting on outcome. Response: Require employee name
	Benefits have been changed without any notification in advance. Manulife was covering Orthopedic modifications up to \$400 now GSC has lowered your coverage from \$400 to \$200 moving forward Response: Require employee name

Health Care Spending	Jan/17 Health Care Spending money not yet transferred from Manulife back to the City then to GSC. As this have not been resolved, couldn't be reimbursed for a covered medical device.
	Asked GSC to top off my reimbursement with my Health Care Spending Account and was not done. GSC claimed the computer did not pick up my circled marks on the form when it was scanned. Response: Require employee name
CPAP	CPAP claim has been with a GSC Supervisor for review for 7 weeks. Call GSC weekly for update. Customer Service rep says they will email Supervisor asking about the review. No response received. GSC has cancelled and resubmitted the claim a few times but cannot get it right. Currently listed as overpaid when actually I'm owed \$395. Response: Require employee name
	Sleep Apnea machine and equipment estimate approved by Manulife. GSC will not cover same Response: Require employee name
	TWO references made to this -- A claim for CPAP mask was adjusted by GSC. The payment was lesser than the purchase cost. Manulife limited payment to maximum of \$350 whereas Green Shield's limit is \$325. Response: Require employee name
Cane	Disabled person requiring a cane. Manulife provided one cane per year. GSC eligibility is one cane every 2 years. <i>After a year's usage - it is battered, the pads worn, handle is broken and rough, ... a year is a minimum requirement</i>
Part G	MANULIFE/GREENSHEILD ISSUES
	Prior to Dec 31/16 Claims submitted to Manulife.

	<p>Received form letter from Manulife denying claim because no longer a member of the plan. Contacted City HR, advised 2016 expenses not covered by Manulife should be submitted to GSC.</p>
	<p>Dependent out of province required ambulance, dependent returned home employee then received invoice for approximately \$500 for the ambulance service. Aug/16 claim submitted to Manulife Dec/16, a request for more information received from Manulife. Jan/17, Manulife stated member no longer had coverage even though the claim was initiated in Aug/16. GSC has stated they won't cover and to contact plan administer. Can't contact plan administer to correct this issue</p> <p>Response: Require employee name</p>
Access to claims history	<p>Concerns as to ability to retrieve prior claims history as Manulife have removed access and informed that history will be migrated. GSC demanding information see below -- GREEN SHIELD CANADA ONLINE SERVICES <i>We have received your accumulations from Manulife however they have not sent us your prior claims. We would advise that you contact Manulife at 1-888-625-6733 in regards to your claims history.</i></p>
	<p>Manulife erred in processing a 2016 claim and admitted it, because the City is now with GSC, Manulife is saying GSC must pay the amount owing from the error. GSC will not cover and the member has been bounced between the two companies. They requested escalation in Manulife, who investigated, sent paperwork that it was their mistake and offered to conduct a three way teleconference with the member and GSC. GSC declined and escalated compliant to the Transition Team who is now asking member to provide the original invoice (with Manulife). Member told them no, <i>they have enough from Manulife and me to process the claim.</i></p> <p>Response: Require employee name</p>
	<p>Estimate approved in Dec/16 by Manulife. Was told to wait until New Year if it was close to or after 10/Dec/16 to submit. <i>Wish I didn't listen</i></p>
Part H	General Assessment
	<p>Many respondents commented that issues were likely a result of <i>the City not giving themselves the required time to effect the switch.</i></p>
	<p>5 emails sent to the TESS Payroll/Benefits group <i>with no reply</i></p>