

ABC Provider
Provider org
123 Sesame Street
Winnipeg, MB R1N 3V3



June 2, 2015

We're changing the way you get paid

Great-West Life is excited to announce that we're enhancing the way we pay you for services. **Starting in July**, we'll be introducing weekly direct deposit payments and our new, easy-to-read electronic statement.

Signing up is easy

Great-West is working with TELUS Health to make signing up for direct deposit and electronic statements fast, easy and secure. On Great-West's behalf, TELUS Health is collecting the information to pay you electronically, and your information will be kept strictly confidential and used only for the purposes of claims adjudication and payment.

If you do not sign up for direct deposit payments, you'll be paid by mail with one cheque twice monthly and the new, easy-to-read statement.

Privacy & Security

Security and confidentiality is paramount. TELUS Health adheres to all provincial and federal regulations as it relates to the privacy and protection of data.

What does direct deposit mean for you?

- **Greater convenience:** Direct deposits reduce or eliminate the cost of handling and depositing cheques at the bank.
- **Streamlined payments:** Your payments will be grouped so you can receive weekly single deposits directly into your bank account.
- **Easier reconciliations:** A new, easy-to-read statement will be securely emailed to you on the date of deposit, helping you quickly reconcile outstanding claim payments.
- **Increased flexibility:** You can choose to have the payments issued to the clinic or directly to the individual providing the service.

www.telushealth.com/directdeposit

**Visit today for more information and to sign up
Frequently Asked Questions**

GENERAL INFORMATION:

WHAT'S CHANGING?

To serve you better, Great-West Life will be issuing scheduled bundled payments to service providers rather than payment on a claim-by-claim basis. If you choose to register, payments will now be issued by direct deposit into a bank account you designate, and all claims details will be summarized on a new statement securely emailed to you.

WHY REGISTER FOR DIRECT DEPOSIT?

- **Streamlined payments:** Your payments will be bundled into convenient single deposits directly into your bank account.
- **More frequent payment:** Great-West will send you a weekly payment by direct deposit. Otherwise, your payments will be issued twice per month by cheque.
- **Greater convenience:** Direct deposits reduce or eliminate the cost of handling and depositing cheques at the bank.
- **Easier reconciliations:** A new, easy-to-read statement will be emailed to you on the date of deposit, helping you quickly reconcile outstanding claim payments.
- **Increased security and control:** Direct deposit payments can help reduce fraud, such as the theft of cheques which are fraudulently cashed.
- **Increased flexibility:** You can choose to have the payments issued to the clinic or to yourself, based on your business model.
- **Better for the environment:** Using less paper helps reduce our environmental footprint.

PAYMENTS:

WILL I GET A PAYMENT FOR EACH CLAIM, OR WILL THEY BE BUNDLED FOR A PERIOD OF TIME?

For ease of reconciliation, and in an effort to potentially minimize banking fees for you, claim payments will be bundled and paid out on a predetermined schedule.

WHEN WILL I RECEIVE PAYMENT?

Your payment schedule will be determined based on where you are located in Canada.

Cheque payment:

- Ontario: Printed statements and cheques on the 4th and 18th of every month
- QC, Atlantic Canada and Territories: Printed statements and cheques on the 8th and 22nd of every month
- BC, AB, SK, MB: Printed statements and cheques on the 11th and 25th of every month

Please note that if your payment falls on a Saturday it will be mailed out on the following Monday. If your payment falls on a Sunday, it will be mailed out on the following Tuesday. If your payment falls on a holiday, it will be mailed out the next business day.

Direct deposit:

- Ontario: Emailed statement and electronic payment every Thursday

- QC, Atlantic Canada and Territories: Emailed statement and electronic payment every Wednesday
- BC, AB, SK, MB: Emailed statement and electronic payment every Tuesday

Please note that there still may be delays in seeing your deposit into your account depending on your bank.

WHAT HAPPENS IF MY ELECTRONIC PAYMENT FAILS TO GO THROUGH?

If the electronic payment fails, TELUS will contact you to correct any errors in your banking information. Once your banking details are corrected, your payment will be resubmitted.

HOW WILL I KNOW I HAVE BEEN PAID?

Direct Deposit:

You'll receive a statement with the payment details and a summary of each claim processed during the payment period by secure email. To ensure you receive the secure message, please add providerclaimpayment@gwl.ca to your email contacts.

Cheque:

You will receive a cheque in the mail with your statement.

STATEMENTS:

WHAT WILL BE LISTED ON THE STATEMENT?

The statement will include a detailed summary of all claims processed during the payment period. Claim details currently available on Great-West Life's Explanation of Benefits (EOB) will be displayed, in addition to new details such as how you submitted the claim. **View a sample of the new statement:** www.telushealth.com/GWLDentalProviderStatement -

HOW DO I USE THE STATEMENT TO COORDINATE BENEFITS?

Plan member and patient privacy is of utmost importance. If you're coordinating benefits with another carrier, please be sure to only show the details for the claim you're submitting. The statement does have sufficient detail to submit to a secondary plan, however, make sure all other patients' details are removed from the page. You can do this by covering the other patients' details and taking a photocopy, or by blacking them out. Alternatively, you can submit the Explanation of Benefits that may have been received when the claim was transmitted.

SECURE EMAIL:

WHAT IS SECURE EMAIL AND IS IT SAFE?

- When you provide your email address, all statements will be emailed to you securely using encryption software. The initial email will have an HTML attachment in the message. Once opened, the attachment will launch your internet browser so that you can read the secure email message containing your statement.
- When using this service for the first time, you will be asked to register with a password of your choosing. If you are a returning user, you will be asked to login using your previously created password.

WHAT IS AN HTML ATTACHMENT?

An HTML attachment is a file that will be opened by your default internet browser on your computer. In this case, it tells your computer how to allow the secure email message so that you can read it.

WHY DO I HAVE TO REGISTER TO OPEN THE EMAIL?

All emails sent with statements contain sensitive plan member data, which is why the emails are encrypted.

CAN I OPEN THE SECURE MESSAGE ON MY SMARTPHONE?

Access to your secure message is dependent on the HTML attachment included in the notification email. When opening HTML files, some mobile devices such as smartphones and tablets will modify the file which is the key to access your encrypted message. Due to this, some mobile devices will not be able to access the secure message. If you encounter problems using a smartphone or tablet, we recommended that you open the secure message using a desktop or laptop computer.

WHAT IF I FORGOT MY PASSWORD?

On the login screen, click on the Forgot Password link. A password reset email will be automatically sent to your email address. If you don't receive the email, be sure to check your spam or junk folder. Once you receive the email, click the reset link in the email and enter your new password.

WHAT IF I NO LONGER HAVE ACCESS TO MY EMAIL ADDRESS TO RESET MY PASSWORD, OR MY EMAIL ADDRESS HAS CHANGED?

Without access to the registered email address, you will not be able to reset your password. You will need to log in to the portal (<http://www.telushealth.com/directdeposit>) and update your email address so that future statements will be delivered to you correctly. To request past statements that you can no longer access, please contact Great-West Life at 1-800-957-9777.

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CAN I REPLY TO THE EMAIL MESSAGE?

The email messages are delivered using an automated system. If you reply to the email, you will not receive a response. Please use the communication methods suggested in this FAQ (see below).

WHY AM I STILL RECEIVING PAPER DOCUMENTS IF I SIGNED UP FOR SECURE EMAIL?

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WHO DO I CONTACT FOR SUPPORT?

WHO DO I CALL IF I DID NOT RECEIVE PAYMENT?

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WHO DO I CALL IF MY PAYMENT OR STATEMENT WAS LOST OR DAMAGED?

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Cheque:

Please contact Great-West Life at 1-800-957-9777.

WHO DO I CALL IF I HAVE A QUESTION ABOUT THE PAYMENT STATEMENT I RECEIVED?

You can contact Great-West Life for support at 1-800-957-9777.



Benefit Payment Office
PO Box 3050 Station Main
Winnipeg MB R3C 0E6
Tel 1.800.957.9777

1 Premier Dental Clinic
54 Dental Avenue
Winnipeg MB R5Y 2X0

2 Date: March 6, 2015

3 Payment No: 16598977

4 Great-West Account No: 1234567890

A payment has been issued for claims processed since your last statement. Claim details relating to this payment are provided in the enclosed statement.

DIRECT DEPOSIT ADVICE

The amount of \$1,296.53 will be deposited directly into your account.

With normal bank clearing procedures the deposit will appear in your account within the next few days.

NOT NEGOTIABLE

NOT NEGOTIABLE

Sample notice of direct deposit and benefit statement

- 1 This is a sample notice of a direct deposit, using a fictitious name and address for the payee.
- 2 Date the statement and payment were issued.
- 3 The Payment No. is the direct deposit number. If you received payment by cheque, this would be the Cheque No.
- 4 Payee's unique identification number assigned by Great-West Life.

		5 Statement Payment No: 16598977 Date: March 6, 2015 Page: 1 of 2												
7 Total paid to Premier Dental Clinic			8 \$ 1,296.53 CAD											
9 Dr. Susan Smith	10 54 Dental Avenue, Winnipeg	11 Registration No. 000000793	12 Location No. 0255 13 Total Paid \$ 624.65											
14 Plan: 12345	15 ID: E00000011													
Patient First Name	Patient Last Name	Reference Number	Service Date	Service Description	Tooth Number(s)	Submission Type	Submitted Expense	Eligible Expense	Other Insurance	Deductible Applied	Payable At	Amount Paid	Notes	
Jane	Anderson	559797	Mar 2, 2015	Dental Exam (01202)		Electronic	31.60	30.70	0.00	0.00	100%	30.70	56	
Jane	Anderson	559797	Mar 2, 2015	Polishing (11101)		Electronic	36.00	36.00	0.00	0.00	100%	36.00		
Sub-totals							\$67.60	\$66.70	\$0.00	\$0.00		\$66.70		
Notes: 56 We calculated benefits using the fee guide specific in your plan.														
Totals for ID E00000011							\$67.60	\$66.70	\$0.00	\$0.00		\$66.70		
Plan: 66543		ID: E121212121												
Patient First Name	Patient Last Name	Reference Number	Service Date	Service Description	Tooth Number(s)	Submission Type	Submitted Expense	Eligible Expense	Other Insurance	Deductible Applied	Payable At	Amount Paid	Notes	
Mary	Doe	226987	Mar 4, 2015	Basic Filling(s) (23321)	11	Electronic	141.20	50.00	0.00	0.00	100%	50.00	58	
Sub-totals							\$141.20	\$50.00	\$0.00	\$0.00		\$50.00		
Notes: 58 This person's maximum benefit has been paid.														
Hillary	Doe	226987	Mar 4, 2015	Dental Exam (01202)		Electronic	31.60	31.60	0.00	25.00	100%	6.60		
Sub-totals							\$31.60	\$31.60	\$0.00	\$25.00		\$6.60		
Totals for ID E121212121							\$172.80	\$81.60	\$0.00	\$25.00		\$56.60		
Plan: 88888		ID: E000000333												
Patient First Name	Patient Last Name	Reference Number	Service Date	Service Description	Tooth Number(s)	Submission Type	Submitted Expense	Eligible Expense	Other Insurance	Deductible Applied	Payable At	Amount Paid	Notes	
Jamie	Jamieson	26449	Mar 5, 2015	Crown(s) (27211)	27	Paper	702.70	702.70	0.00	0.00	50%	351.35		
Jamie	Jamieson	26449	Mar 5, 2015	Lab or Materials Fee		Paper	300.00	300.00	0.00	0.00	50%	150.00		
Sub-totals							\$1,002.70	\$1,002.70	\$0.00	\$0.00		\$501.35		
Totals for ID E000000333							\$1,002.70	\$1,002.70	\$0.00	\$0.00		\$501.35		

- 5** This is a sample statement, using fictitious names and addresses. The Payment No. is the direct deposit number – the same number from the previous page (or Cheque No. if payment was made by cheque).
- 6** Date the statement was issued (same as the previous page).
- 7** The payee's name.
- 8** The total dollar amount paid to the payee for the payment period.
- 9** The first provider's name. Since the payee is a clinic with multiple providers, the statement includes a breakdown by provider.
- 10** Provider's address or store number.
- 11** Identification number assigned by TELUS.
- 12** Work location identification number assigned by TELUS.
- 13** Total dollar amount paid for claims by the first provider.
- 14** Plan member's Great-West group policy number. The statement includes clearly separated information for each plan member.
- 15** Plan member's Great-West identification number.

16 Dr. Roger Riverton 54 Dental Avenue, Winnipeg Registration No. 000000793 Location No. 0255 **17** Total Paid \$ 671.88

Plan: 12345		ID: E000000011											
Patient First Name	Patient Last Name	Reference Number	Service Date	Service Description	Tooth Number(s)	Submission Type	Submitted Expense	Eligible Expense	Other Insurance	Deductible Applied	Payable At	Amount Paid	Notes
Jeremy	Anderson	4477	Mar 3, 2015	Dental Exam (01202)		Electronic	31.60	31.60	15.80	0.00	80%	15.80	
Jeremy	Anderson	4477	Mar 3, 2015	Polishing (11101)		Electronic	36.00	36.00	18.00	0.00	80%	18.00	
Sub-totals							\$67.60	\$67.60	\$33.80	\$0.00		\$33.80	
Mavis	Anderson	4477	Mar 3, 2015	Dental Exam (01202)		Electronic	31.60	31.60	0.00	0.00	80%	25.28	
Mavis	Anderson	4477	Mar 3, 2015	Polishing (11101)		Electronic	36.00	36.00	0.00	0.00	80%	28.80	
Sub-totals							\$67.60	\$67.60	\$0.00	\$0.00		\$54.08	
Melanie	Anderson	4477	Mar 3, 2015	Dental Exam (01202)		Electronic	31.60	31.60	0.00	0.00	80%	25.28	
Melanie	Anderson	4477	Mar 3, 2015	Polishing (11101)		Electronic	36.00	36.00	0.00	0.00	80%	28.80	
Sub-totals							\$67.60	\$67.60	\$0.00	\$0.00		\$54.08	
Totals for ID E000000011							\$202.80	\$202.80	\$33.80	\$0.00		\$141.96	

Plan: 51111		ID: E000119999											
Patient First Name	Patient Last Name	Reference Number	Service Date	Service Description	Tooth Number(s)	Submission Type	Submitted Expense	Eligible Expense	Other Insurance	Deductible Applied	Payable At	Amount Paid	Notes
Johnny	Simple	99088	Mar 6, 2015	Basic Filling(s) (23321)	22	Electronic	141.20	137.20	0.00	25.00	90%	100.98	56
Johnny	Simple	99088	Mar 6, 2015	Basic Filling(s) (23323)	36	Electronic	245.20	238.30	0.00	0.00	90%	214.47	56
Johnny	Simple	99088	Mar 6, 2015	Basic Filling(s) (23323)	46	Electronic	245.20	238.30	0.00	0.00	90%	214.47	56
Sub-totals							\$631.60	\$613.80	\$0.00	\$25.00		\$529.92	
Notes:		56	We calculated benefits using the fee guide specific in your plan.										
Totals for ID E000119999							\$631.60	\$613.80	\$0.00	\$25.00		\$529.92	

16 The second provider's name. Since the payee is a clinic with multiple providers, the statement includes a breakdown by provider.

17 Total dollar amount paid for claims by the second provider.