

Flexstyle Claim Submitting Instructions

How do I Submit Claims?

In order to be reimbursed for eligible medical and dental expenses the following forms and supporting documentation must be submitted to Benecaid:

Prescription Medication

- Benecaid Claim Form with original signature
- Original computerized Official Prescription Receipt with Pharmacist signature or stamp

Dental Treatments

- Benecaid Claim Form with original signature
- Original Standard Dental Claim Form, including the Dentist's signature or stamp

Optical Services

- Benecaid Claim Form with original signature
- Copy of Original Prescription for Eyeglasses or Contact Lenses
- Original receipt of payment

Other Services (ie. Chiropractic, Chiropodist, RMT, etc.)

- Benecaid Claim Form with original signature
- Original receipt from the licensed Medical Practitioner, including all the following information:
 - Practitioner, Address and Phone Number
 - Name of the licensed Medical Practitioner who performed the service
 - License number and credentials of the Medical Practitioner
 - Patient Name
 - Date of Service
 - Amount of money paid
 - Description of service or treatment including cost per treatment
 - Signature or stamp of the licensed Medical Practitioner who performed the service

How do I submit a claim when there are two insurers?

When submitting your claims you should send them to the primary carrier first (i.e. you send your claims to Benecaid and your spouse's claims go to their insurance carrier). If any portion of the claim is not reimbursed by the primary carrier, then the claim should be forwarded to the other insurance company with the original Explanation of Benefits (EOB) and copies of the receipts. Children's claims will be reimbursed under the parent whose date of birth (month and day) falls first in the year. If the parents have the same date of birth then the claims will be reimbursed based on alphabetical order of the parent's first name.

If Benecaid is the second payer then a photocopied receipt along with the original Explanation of Benefits from the primary payer is required. If the EOB is for a dental claim, the EOB should contain procedure codes, tooth codes, tooth surfaces and provider information. If the EOB does not contain this information please submit a photocopy of the dental claim along with the EOB.

Should I keep Copies of my Original Receipts?

Always retain photocopies of your original receipts for your records.

Where do I Mail Claims?

All claims and supporting documentation must be mailed to Benecaid at the following address:

**Benecaid Health Benefit Solutions Inc.
PO Box 1325
Station K
Toronto, ON M4P 3J4**