



## Coordination of benefits

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# What does “coordination of benefits” mean?

When different members of the same family have jobs, or multiple jobs, or are enrolled in an educational institution, they may have health or dental care coverage under more than one group insurance plan. If this applies to you, you may be able to claim up to 100% of the expenses you incur for healthcare costs by submitting separate claims to each plan. That’s what we mean by “coordination of benefits”.

## In which order do the claims have to be submitted?

Different factors can influence the order in which claims should be submitted, but the first thing to consider is—who incurred the expenses?

### Expenses incurred by a PLAN MEMBER

**SITUATION 1** You are covered under a group insurance plan as an active plan member AND as a dependant under your spouse’s group plan. Your claims must be submitted in the following order:

1. Your plan
2. Your spouse’s plan

**SITUATION 2** You are covered under two separate group insurance plans as an active plan member AND you are also covered as a dependant under your spouse’s group plan. Your claims must be submitted in the following order:

1. The plan under which you have been covered as an active plan member for the longest period of time
2. The plan under which you have been covered as an active plan member for the shortest period of time
3. Your spouse’s plan

**SITUATION 3** You are covered as an active plan member AND a retired plan member under two separate group insurance plans. Your claims must be submitted in the following order:

1. The plan under which you are covered as an active plan member
2. The plan under which you are covered as a retired plan member



## Expenses incurred by a SPOUSE

**SITUATION 1** Your spouse is covered as a plan member under his/her own group insurance plan AND as a dependant under your plan. He/she has to submit claims in the following order:

1. His/her plan
2. Your plan

## Expenses incurred by DEPENDANT CHILDREN

**SITUATION 1** You live with the parent of your children.

If your children are covered under both your plan and your spouse's plan, claims must be submitted in the following order:

1. The plan of the parent whose birthday comes first in the calendar year (the year of birth is not taken into account)
2. The plan of the second parent

### **EXAMPLE :**

The father's birthday is April 18, and the mother's birthday is December 10. In this case, claims have to be submitted to the father's plan first.

**Note:** If both parents were born on the same day, the alphabetical order of the parents' first names determines which plan the claim is submitted to first.

### **EXAMPLE :**

Both parents were born on May 16. The mother's name is Francine and the father's name is Larry. In this case, claims have to be submitted to the mother's plan first.



**SITUATION 2 You are separated and have shared custody of your children.**

In the event that each parent has a new spouse and your children are covered under all of the following plans, claims must be submitted in the following order:

1. The plan of the parent whose birthday comes first in the calendar year (the year of birth is not taken into account)
2. The plan of the second parent
3. The plan of the spouse of the parent whose birthday comes first
4. The plan of the spouse of the second parent

Depending on the situation, four group plans may reimburse up to 100% of the eligible expenses.

**SITUATION 3 You are separated and have sole custody of your children.**

In the event that each parent has a new spouse and your children are covered under all of the following plans, claims must be submitted in the following order:

1. Your plan
2. Your current spouse's plan
3. Your ex's plan
4. Your ex's current spouse's plan

Depending on the situation, four group plans may reimburse up to 100% of the eligible expenses.



**SITUATION 4** Your dependant child is enrolled at an educational institution and has a part-time job. Your child is covered through work, through school and through your group plan.

Your child must first submit any claims to the plan through work, then to the student plan and then to your plan. The only exception to this rule applies to **drug** claims in **Quebec**, which must first be **submitted to your child's employer and then to your plan BEFORE being submitted to the student plan**.

Here is the order in which they must submit their claims, depending on the type of expenses incurred and your province of residence.

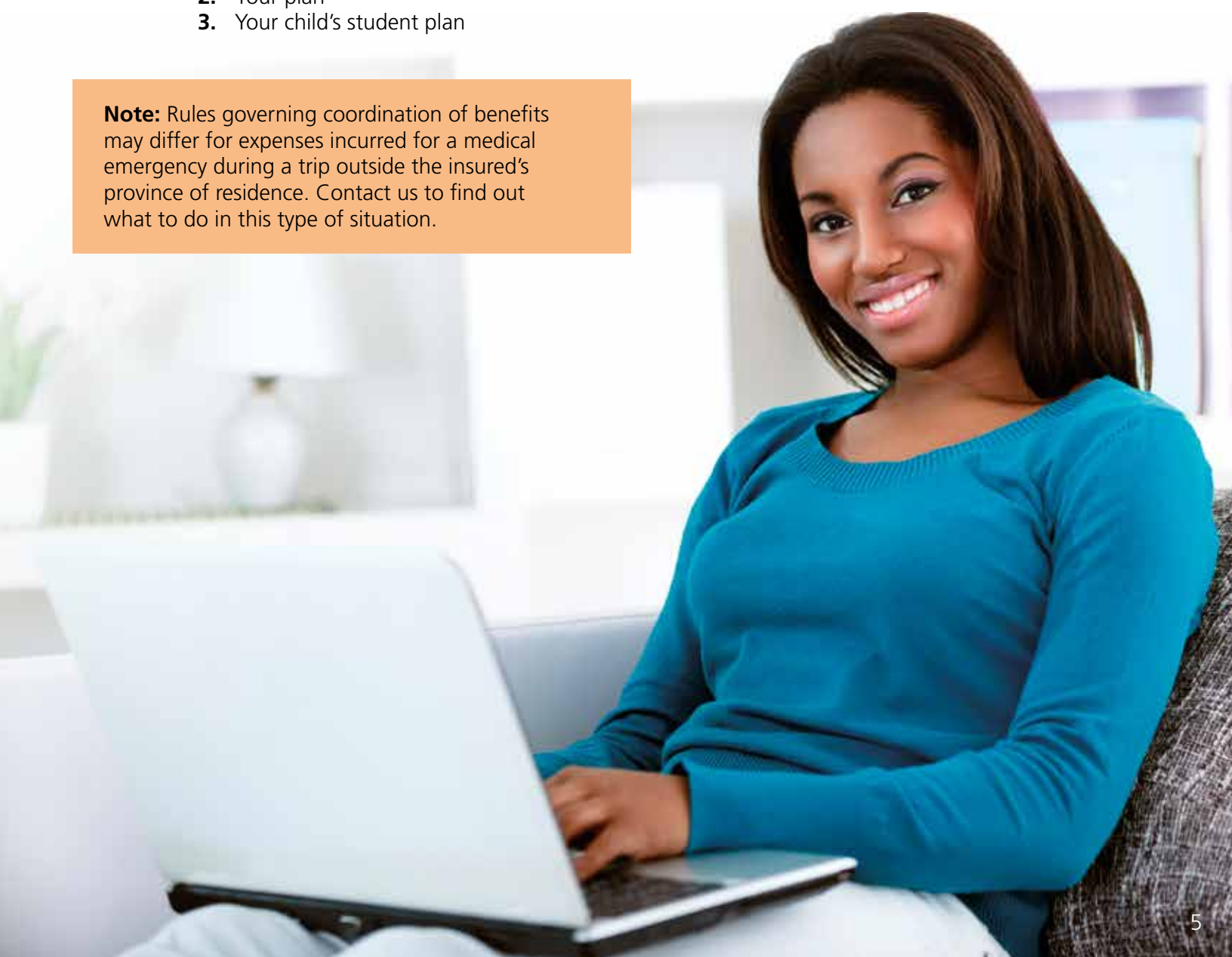
**Medical and dental expenses (except drug expenses for Quebec residents):**

1. Your child's employer's plan
2. Your child's student plan
3. Your plan

**Drug expenses (for Quebec residents):**

1. Your child's employer's plan
2. Your plan
3. Your child's student plan

**Note:** Rules governing coordination of benefits may differ for expenses incurred for a medical emergency during a trip outside the insured's province of residence. Contact us to find out what to do in this type of situation.



# How are your reimbursements calculated?

Based on the rules set out by the Canadian Life and Health Insurance Association (CLHIA), the first plan calculates your reimbursement based on the parameters that apply to your coverage (deductible, reimbursement percentage, maximum, etc.) up to the maximum amount you are eligible for under that plan. You can then submit the amounts that were not reimbursed to the second plan. If your claim is eligible, the second plan will reimburse you for the lesser of the following amounts:

- The amount it would have paid if it had been the first payer OR
- 100% of the expenses eligible under the plan, less the amount reimbursed by the first payer.

These reimbursement terms also apply to the third or fourth payer, if applicable. However, the total reimbursement cannot exceed 100% of the eligible expenses.

Any medical expenses not reimbursed may be eligible for medical expense tax credits.

**Here are two sample reimbursement calculations for \$150 in incurred medical expenses.**

## EXAMPLE 1:

**\$150 in expenses eligible under both plans AND subject to a \$25 deductible under the first plan only**

Your plans	Eligible expenses	Deductible	Reimbursement %	Calculation	Your reimbursements
1 <sup>st</sup> plan	\$150	\$25	80%	$(\$150 - \$25) \times 80\%$	<b>\$100</b>
2 <sup>nd</sup> plan	\$150	\$0	80%	$(\$150 - \$0) \times 80\% = \$120$ $(\$150 - \text{\textcircled{\$100}}) = \$50$	\$50 (lesser of the two)
Your total reimbursement = 100% of expenses incurred					<b>\$150</b>

## EXAMPLE 2:

**\$150 in expenses not eligible under the first plan, BUT eligible under the second plan and subject to a \$25 deductible**

Your plans	Eligible expenses	Deductible	Reimbursement %	Calculation	Your reimbursements
1 <sup>st</sup> plan	\$0	\$0	80%	$\$0 \times \$0$	<b>\$0</b>
2 <sup>nd</sup> plan	\$150	\$25	80%	$(\$150 - \$25) \times 80\% = \$100$ $(\$150 - \text{\textcircled{\$0}}) = \$150$	\$100 (lesser of the two)
Your total reimbursement					<b>\$100</b>

## Tips for making claims processing easier:

- Give your healthcare professional and insurers (or other payers) the contract and certificate numbers for the plans that cover you and your dependants.
- Always keep a copy of your claims and any receipts you submit.
- Send the next payer a copy of your original claim, along with the explanation of benefits paid by the previous payers.



## Find out more

If you have any questions about your insurance coverage, refer to your employee booklet or contact your plan administrator.

You can also consult your insurance file online through the secure site for plan members at [desjardinslifeinsurance.com/planmember](https://desjardinslifeinsurance.com/planmember).

Desjardins Insurance refers to Desjardins Financial Security Life Assurance Company.

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