

Invoice Guide

FOR GROUP ADMINISTRATORS



Last update: June 2021



TABLE OF CONTENTS

PAYING YOUR INVOICE..... 3

PREMIUM BILLING INVOICE- SUMMARY..... 4

PREMIUM BILLING INVOICE - DETAILS..... 5

INVOICE BACKUP REPORT..... 6

CUSTOM REPORTING ATTRIBUTE AND ALTERNATE IDENTIFICATION NUMBER..... 7

PREMIUM BILLING INVOICE WITH HSA AND/OR PSA CLAIMS..... 8

ASO CLAIMS BASED INVOICE..... 9

ASO CLAIMS BASED INVOICE DETAILS..... 10

APPENDIX FOR ADDITIONAL INVOICE INFORMATION..... 12

PAYING YOUR INVOICE

Medavie Blue Cross offers the following payment options:

Pre-Authorized Debit - Please complete and return the Pre-Authorized Debit Agreement located in the PDF document section on the Group Administrator Portal Online Toolkit at medaviebc.ca/en/administration/gap-guide. The premium will be withdrawn from your bank account on the first business day of the coverage period.

Online Payment - In your online banking application, set “Medavie Blue Cross Group” as the payee. In the account number field, enter the Medavie Blue Cross MX number. Once you have made your payment, please email: bc_remittance@medavie.bluecross.ca with your policy, division and MX number as it appears on the stub of your invoice so that the payment can be applied to the correct account.

Payment by Electronic Funds Transfer - Please reach out to your Service Representative or the Contact Centre to make arrangements. Once you have made your payment, please email: bc_remittance@medavie.bluecross.ca with your policy, division and MX number as it appears on the stub of your invoice so that the payment can be applied to the correct account.

Cheque - For payment by cheque, please remit payment to Medavie Blue Cross and mail the cheque to the address as indicated on the payment remittance section of the invoice (bottom of the first page). Please include the remittance section of the invoice with your cheque.

Note: Payment must be received no later than one day before the next invoice to be captured on that invoice. If received later, the payment will not be reflected on your next invoice.

MORE INFORMATION

Should you need additional information or assistance, please call us toll-free:


- 1-800-667-4511 (Atlantic and Ontario)
- 1-800-456-6595 option 3 (Quebec)
- 1-888-873-9200 (National)

PREMIUM BILLING INVOICE - SUMMARY

What can you expect to see on your Premium Billing invoice?

Your invoice is a multi-page invoice; each page will give you a different level of detail depending on what page you are looking at. On the first page, an overall summary will be given.

- 1 - Current Premium, Adjustments from previous coverage periods and Absence Case Management Services.
- 2 - Additional charges such as ASO, HSA, PSA, Tax, etc.
- 3 - Due date for current Period Charges.
- 4 - If payment is pre-authorized, funds will be withdrawn on the first business day of the month.
- 5 - If payment is pre-authorized, amount paid will be displayed in amount paid box at the bottom right of the summary page.
- 6 - When remitting payment by internet, you must refer to the internet / tel Account # provided on the invoice.


Group Invoice

Medavie Company ABC
Line 1
Text 2
KITCHENER QC E1E 1E1


Personal and Confidential

Statement Date: 13-Jul-2020
Coverage Period: 01-Aug-2020 to 31-Aug-2020
Policy Number: 45678 090
Invoice Number: 1681219


Billing Summary

Opening Balance	\$210,966.15	
Payments and Adjustments	(64,830.12)	
Due Upon Receipt		\$146,136.03
Current Premium	\$58,338.36	
Premium Adjustments	(1,199.32)	
Total Premium Charges		\$57,139.04
Total HSA Charges		\$5,304.66
Total Tax Charges		\$5,101.20
Total Current Period Charges	01-Aug-2020	\$67,544.90
Total Due		\$213,700.93

GST/HST Reg. #12292 8013 RT0001


Toll Free 1-800-667-4511
Website: www.medaviebc.ca

If your policy has salary based benefits, maintaining up-to-date salary information is critical in the event of a life or disability claim. When salaries are not maintained, salary based benefits may not align with income which may result in a benefit payment that is lower than expected.



Thank you. We appreciate your business!

Tel: 1-800-667-4511 Fax: 506-867-4651

Treasury: Medavie Blue Cross
PO Box 220
Moncton NB E1C 8L3

Policy No. 45678 090
Internet/tel Account # MX45678
Medavie Company ABC

Invoice no. 1681219

Due Upon Receipt

Amount Paid

Subsequent pages of your invoice will give you additional details and breakdown including information at the division, class and member level. The member level information is only available on the pdf invoice. The summary also provides an overall view of your benefits coverage amounts, and displays the member's status (F- family, S- single, etc.). A legend is provided at the bottom of the summary page.

Note: Any adjustments on the invoice will have an adjustment code. A legend is provided at the top of the pdf member level breakdown of the invoice. The Unbilled Certificates section of the invoice lists members terminated since the last invoice run.

INVOICE BACKUP REPORT

Invoice details at the covered life level are available using the invoice backup function.

Each tab will give you details for members including any premiums charges, manual adjustments, ASO claim charges, HSA, PSA or any Case Management claims. This excel format report has the same current charges and adjustments as provided on the detailed pdf version of your invoice. It does not include the opening balance, payments received or total due.

Invoice Backup Report														
Report Run Date:														
Legend														
A - New or Reinstated Certificate														
B - Benefit Change														
E - Class Change														
F - Family Status Change														
P - Province Change														
PD - Premium Difference														
R - Rate Change														
V - Volume Change														
W - Waiver Change														
Y - Age, Gender or Smoker Change														
Policy: 66666-000 Invoice: 1681275														
ID	Alternate ID	Custom Report	Province	Member Last Name	Member First Name	Class	Coverage From Date	Coverage To Date	Adjustment Code	Benefit	Rate	Volume Unit	Volume	Status
000011351		ON	NATALIE	NATALIE	C1	01-07-2020	06-07-2020		STD	\$ 69300	10	697		
000011351		ON	NATALIE	NATALIE	C1	01-06-2020	30-06-2020		STD	\$ 69300	10	697		
000011351		ON	NATALIE	NATALIE	C1	11-05-2020	31-05-2020		STD	\$ 69300	10	697		
000011445		ON	LUC	LUC	C1	01-08-2020	31-08-2020	B	Member Life	\$ 23900	1,000	59,000		
000011445		ON	LUC	LUC	C1	01-08-2020	31-08-2020		STD	\$ 69300	10	748		
000011445		ON	LUC	LUC	C1	01-08-2020	31-08-2020	B	LTD	\$ 98600	100	2,721		
000011445		ON	LUC	LUC	C1	01-08-2020	31-08-2020	PD	Health					F
000011445		ON	LUC	LUC	C1	01-08-2020	31-08-2020	PD	Dental					F
000011445		ON	LUC	LUC	C1	01-08-2020	31-08-2020	PD	My Good Health					F
000011445		ON	LUC	LUC	C1	01-08-2020	31-08-2020	PD	Second Opinion					F
000011445		ON	LUC	LUC	C1	01-07-2020	31-07-2020		Member Life	\$ 23900	1,000	59,000		
000011445		ON	LUC	LUC	C1	01-07-2020	31-07-2020		STD	\$ 69300	10	748		
000011445		ON	LUC	LUC	C1	01-07-2020	31-07-2020		LTD	\$ 98600	100	2,721		
000011445		ON	LUC	LUC	C1	01-07-2020	31-07-2020		Health					F
000011445		ON	LUC	LUC	C1	01-07-2020	31-07-2020		Dental					F
000011445		ON	LUC	LUC	C1	01-07-2020	31-07-2020		Second Opinion					F
000011445		ON	LUC	LUC	C1	01-07-2020	06-07-2020		STD	\$ 69300	10	748		
000011445		ON	LUC	LUC	C1	01-07-2020	06-07-2020		Health					F
000011445		ON	LUC	LUC	C1	01-07-2020	06-07-2020		Dental					F
000011445		ON	LUC	LUC	C1	01-07-2020	06-07-2020		Second Opinion					F
000011445		ON	LUC	LUC	C1	01-06-2020	30-06-2020		Member Life	\$ 23900	1,000	59,000		
000011445		ON	LUC	LUC	C1	01-06-2020	30-06-2020		LTD	\$ 98600	100	2,721		
000011445		ON	LUC	LUC	C1	11-05-2020	31-05-2020		Member Life	\$ 23900	1,000	59,000		
000011445		ON	LUC	LUC	C1	11-05-2020	31-05-2020		LTD	\$ 98600	100	2,721		
000031518		ON	SARA	SARA	C2	01-08-2020	31-08-2020		Health					S
000031518		ON	SARA	SARA	C2	01-08-2020	31-08-2020		Dental					S
000031518		ON	SARA	SARA	C2	01-08-2020	31-08-2020		My Good Health					F
000031518		ON	SARA	SARA	C2	01-07-2020	31-07-2020		Second Opinion					F
000031518		ON	SARA	SARA	C2	01-07-2020	31-07-2020		Member Life	\$ 23900	1,000	53,000		Waived
000031518		ON	SARA	SARA	C2	01-07-2020	31-07-2020		LTD	\$ 98600	100	2,487		Waived
000031518		ON	SARA	SARA	C2	01-06-2020	30-06-2020		Member Life	\$ 23900	1,000	53,000		Waived
000031518		ON	SARA	SARA	C2	01-06-2020	30-06-2020		LTD	\$ 98600	100	2,487		Waived
000031518		ON	SARA	SARA	C2	01-05-2020	31-05-2020		Member Life	\$ 23900	1,000	53,000		Waived
000031518		ON	SARA	SARA	C2	01-05-2020	31-05-2020		LTD	\$ 98600	100	2,487		Waived
000031518		ON	SARA	SARA	C2	01-05-2020	31-05-2020		Health					S
000031518		ON	SARA	SARA	C2	01-05-2020	31-05-2020		Health					S
000031518		ON	SARA	SARA	C2	01-05-2020	09-05-2020		Member Life	\$ 23900	1,000	53,000		Waived
000031518		ON	SARA	SARA	C2	01-05-2020	09-05-2020		LTD	\$ 98600	100	2,487		Waived
000031518		ON	SARA	SARA	C2	01-05-2020	09-05-2020		Health					S
000031518		ON	SARA	SARA	C2	01-05-2020	09-05-2020		Health					S
000086782		ON	DONALD	DONALD	C2	01-08-2020	31-08-2020	B	Member Life					
000086782		ON	DONALD	DONALD	C2	01-08-2020	31-08-2020		STD					

1 - Invoice type: Select the appropriate tab to view the report needed. Terminated certificates are in the Unbilled Certificate tab.

2 - Invoice Adjustment reasons are explained. Legend is provided at the top of the invoice report.

Legend

A - New or Reinstated Certificate

B - Benefit Change

E - Class Change

F - Family Status Change

P - Province Change

PD - Premium Difference

R - Rate Change

V - Volume Change

W - Waiver Change

Y - Age, Gender or Smoker Change

Note: The invoice backup report will substitute the detailed member level breakdown pdf shown on page 5.

CUSTOM REPORTING ATTRIBUTE AND ALTERNATE IDENTIFICATION NUMBER

A unique alternate identifier number can be added for each member in addition to the Certificate number that appears on the ID card.

For client internal invoicing purposes, a custom reporting attribute can be added to further break down the information on the invoice. This attribute can be used to help identify a Cost centre, regional location or business sector.

MEDAVIE BLUE CROSS																			
Invoice Backup Report																			
Policy: 11111.001 Invoice: 193311																			
Report Run Date: 12/03/2018 23:53																			
ID	Alternate ID	Current Report Attribute	Province	Member Last Name	Member First Name	Class	Coverage From Date	Coverage To Date	Adjustment Code	Benefit	Volume	Rate	Water Source	Premium	RST	GST/HST	PST/QST	Total	Employee
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	31-03-2018		Member Life	41,000	-11.61	0.00	0.00	0.00			-11.61	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	31-03-2018		Member AD & D	41,000	-2.15	0.00	0.00	0.00			-2.15	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	31-03-2018		STD	561	-21.62	0.00	0.00	0.00			-21.62	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	31-03-2018		ITO	561	-31.06	0.00	0.00	0.00			-31.06	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	31-03-2018		InConfidence	5	-3.25	0.00	-0.48	0.00			-3.74	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	28-02-2018		Member Life	41,000	-11.61	0.00	0.00	0.00			-11.61	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	28-02-2018		Member AD & D	41,000	-2.15	0.00	0.00	0.00			-2.15	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	28-02-2018		STD	561	-31.06	0.00	0.00	0.00			-31.06	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	28-02-2018		ITO	561	-31.06	0.00	0.00	0.00			-31.06	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	28-02-2018		InConfidence	5	-3.25	0.00	-0.48	0.00			-3.74	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	10-02-2018		Member Life	41,000	4.13	0.00	0.00	0.00			4.13	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	10-02-2018		Member AD & D	41,000	8.77	0.00	0.00	0.00			8.77	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	10-02-2018		STD	561	7.72	0.00	0.00	0.00			7.72	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	10-02-2018		ITO	561	11.09	0.00	0.00	0.00			11.09	
502095470	000000000	A100	ON	Lastname1	Firstname1	C	01-01-2018	10-02-2018		InConfidence	5	1.38	0.00	0.17	0.00			1.55	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-04-2018	30-04-2018		Member Life	50,000	18.20	0.00	0.00	0.00			18.20	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-04-2018	30-04-2018		Member AD & D	50,000	3.00	0.00	0.00	0.00			3.00	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-04-2018	30-04-2018		STD	507	30.37	0.00	0.00	0.00			30.37	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-04-2018	30-04-2018		ITO	2,196	43.70	0.00	0.00	0.00			43.70	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-04-2018	30-04-2018		Health	5	71.09	0.00	0.00	0.00			71.09	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-04-2018	30-04-2018		Dental	5	32.66	0.00	0.00	0.00			32.66	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-04-2018	30-04-2018		My Good Health	5	0.00	0.00	0.00	0.00			0.00	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-04-2018	30-04-2018		InConfidence	5	9.25	0.00	0.49	0.00			9.74	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-04-2018	30-04-2018		Second Opinion	5	0.00	0.00	0.00	0.00			0.00	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	31-05-2018		Dependent Life	5	-2.85	0.00	0.00	0.00			-2.85	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	31-05-2018		Health	5	71.09	0.00	0.00	0.00			71.09	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	31-05-2018		Health	5	-199.74	0.00	0.00	0.00			-199.74	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	31-05-2018		Dental	5	32.66	0.00	0.00	0.00			32.66	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	31-05-2018		Dental	5	-77.56	0.00	0.00	0.00			-77.56	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	31-05-2018		InConfidence	5	3.25	0.00	0.49	0.00			3.74	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	31-05-2018		InConfidence	5	-3.25	0.00	-0.49	0.00			-3.74	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	28-02-2018		Health	5	71.09	0.00	0.00	0.00			71.09	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	28-02-2018		Dental	5	-199.74	0.00	0.00	0.00			-199.74	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	28-02-2018		Dental	5	32.66	0.00	0.00	0.00			32.66	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	28-02-2018		Dental	5	-77.56	0.00	0.00	0.00			-77.56	
785748195	000000018	A100	NB	Lastname2	Firstname2	C	01-05-2018	31-05-2018		Member Life	40,000	-18.20	0.00	0.00	0.00			-18.20	

- 1 - Alternate ID – A client specified identification number
- 2 - Custom Reporting Attribute
- 3 - Terminated certificates are in the Unbilled Certificate tab

Note: The member unique identifier number and the client custom reporting attribute are only available in the CSV data file and invoice back up report.

Alternate ID, maximum 9 characters


- Uppercase characters: A to Z
- Space
- Numeric 0 through 9
- Special characters: “-”

Custom Reporting Attribute, maximum 9 characters

- Uppercase/lowercase characters: A through Z and a through z
- Space
- Numeric 0 through 9
- Special characters: “-”
- French characters

PREMIUM BILLING INVOICE WITH HSA AND/OR PSA CLAIMS

If you have HSA and/or PSA benefits, the total for each of these benefits will be indicated in the Billing Summary on the first page of the invoice. A breakdown of HSA and/or PSA charges will be in the Billing Summary Details on the second page of the invoice.



Group Invoice

XYZ Company
Line 1
Text 2
Line 3
Toronto ON E1E 1E1

Personal and Confidential

Statement Date: 13-Aug-2020
Coverage Period: 01-Aug-2020 to 31-Aug-2020
Policy Number: 99999 200
Invoice Number: 1681265


Policy Number

Billing Summary

Opening Balance	\$104,037.16	
Payments and Adjustments	(104,037.16)	
Due Upon Receipt		\$0.00
Current Premium	\$61,908.49	
Premium Adjustments	370.79	
Total Premium Charges		\$62,279.28
Total HSA Charges		\$34,362.62
Total PSA Charges		\$31,390.61
Total Tax Charges		\$11,511.81
Total Current Period Charges	01-May-2021	\$139,544.32
Total Due		\$139,544.32

First Page HSA/PSA Summary

GST/HST Reg. #12292 8013 RT0001



Toll Free 1-800-355-9133
Website: www.medaviebc.ca

If your policy has salary based benefits, maintaining up-to-date salary information is critical in the event of a life or disability claim. When salaries are not maintained, salary based benefits may not align with income which may result in a benefit payment that is lower than expected.



Group Invoice

Billing Summary Details

Opening Balance	\$104,037.16	
Payment	31-Mar-2021	(104,037.16)
Due Upon Receipt		\$0.00
Current Premium	\$61,908.49	
Premium Adjustments	370.79	
Total Premium Charges		\$62,279.28
HSA Claims Paid for March 2021	\$32,580.47	
HSA Administration Charges	1,782.15	
HSA Commission Charges	0.00	
Total HSA Charges		\$34,362.62
PSA Claims Paid for March 2021	\$29,762.61	
PSA Administration Charges	1,628.00	
PSA Commission Charges	0.00	
Total PSA Charges		\$31,390.61
ON Premium Tax (HSA)	\$684.29	
ON Premium Tax (PSA)	627.81	
ON RST (Premiums)	4,951.26	
ON RST (HSA)	2,737.19	
ON RST (PSA)	2,511.26	
Total Tax Charges		\$11,511.81
Total Current Period Charges	01-May-2021	\$139,544.32
Total Due		\$139,544.32

HSA/PSA Claims paid and charges during the billing period

Statement Date: 13-Aug-2020
Coverage Period: 01-Aug-2020 to 31-Aug-2020
Policy Number: 99999 200
Invoice Number: 1681265

Thank you. We appreciate your business!

Policy No. 99999 200 Invoice no. 1681265
Internet/tel Account # MX12345
XYZ Company

Due Date: 31-May-2021

Amount Paid




Medavie Blue Cross, an independent licensee of the Canadian Association of Blue Cross Plans.

TM The Blue Cross symbol and name are registered trademarks of the Canadian Association of Blue Cross Plans used under license by Medavie Blue Cross, an independent licensee of the Canadian Association of Blue Cross Plans.

page 2

ASO CLAIMS INVOICE

Most of the time, an ASO Claims-based invoice has its own Policy Number and Internet Account Number assigned to its details. This Policy Number or Internet Account Number should be included with your payment details.


		Group Invoice	
XYZ Company Line 1 Text 2 Line 3 Toronto ON E1E 1E1	Personal and Confidential	Statement Date: 13-Aug-2020 Coverage Period: 01-Aug-2020 to 31-Aug-2020 Policy Number: 99999 200 Policy Number Invoice Number: 1681265	
Billing Summary			
Opening Balance	\$4,904.85		
Payments and Adjustments Due Upon Receipt	(144.42)		
	<u>\$4,760.43</u>		
Current Premium	\$0.00		
Total Premium Charges	\$0.00		
Total ASO Charges	\$1,280.37		
Total Tax Charges	\$159.80		
Total Current Period Charges Due Upon Receipt	<u>\$1,440.17</u>		
Total Due	<u>\$6,200.60</u>		
		GST/HST Reg. #12292 8013 RT0001	
		 Toll Free 1-800-667-4511 Website: www.medaviebc.ca	
		If your policy has salary based benefits, maintaining up-to-date salary information is critical in the event of a life or disability claim. When salaries are not maintained, salary based benefits may not align with income which may result in a benefit payment that is lower than expected.	
		Thank you. We appreciate your business!	
Tel: 1-800-667-4511 Fax: 506-867-4651		Policy Number Policy No. 99999 200 Invoice no. 1681265 Internet/tel Account # MX12345 XYZ Company Internet Account Number	
Treasury: Medavie Blue Cross PO Box 220 Moncton NB E1C 8L3		Due Upon Receipt <input type="text"/> Amount Paid <input type="text"/>	
<small>TM The Blue Cross symbol and name are registered trademarks of the Canadian Association of Blue Cross Plans used under license by Medavie Blue Cross, an Independent Licensee of the Canadian Association of Blue Cross Plans.</small>			

Note: If you receive multiple invoices, it should be noted that each invoice contains a different policy division number reference. Please indicate all policy division reference numbers as part of your payment details.

ASO CLAIMS INVOICE DETAILS

The Billing Summary Details page of your invoice will indicate the coverage period for any ASO Claims and the total ASO Claims for that period.

Note: The coverage period for ASO claims paid will not match the coverage period on the top right hand side of the invoice, which is the coverage period for premiums. Claims can only be invoiced after they have been paid. Premiums are invoiced in advance.



Group Invoice

Billing Summary Details

Opening Balance		\$4,904.85	
Payment	26-Jun-2020	(144.42)	
Due Upon Receipt			\$4,760.43
Current Premium		\$0.00	
Total Premium Charges			\$0.00
ASO Claims Paid for June 2020	Coverage Period	\$1,153.48	
ASO Administration Charges		126.89	
Total ASO Charges			\$1,280.37
QC Premium Tax (ASO)		\$44.56	
QC RST (ASO)		115.24	
Total Tax Charges			\$159.80
Total Current Period Charges	Due Upon Receipt		\$1,440.17
Total Due			\$6,200.60

Coverage Period Total

Statement Date:

Coverage Period:

Policy Number:

Invoice Number:

13-Aug-2020

01-Aug-2020 to 31-Aug-2020

99999 200


1681265

TM The Blue Cross symbol and name are registered trademarks of the Canadian Association of Blue Cross Plans used under license by Medavie Blue Cross, an independent licensee of the Canadian Association of Blue Cross Plans.

page 2

ASO CLAIMS INVOICE DETAILS

The ASO Claims Paid section of your invoice will indicate the coverage period and the total ASO claims based charges for that period.



Group Invoice

ASO Claims Paid for June 2020

MX12345 XYZ Company

	Benefit	Claim Amount	%	Administration Charges	%	Commission Charges	%	Pooling LAP/ILAP Charges	Premium Tax	RST	GST/HST	PST	Total
99999 200	TOTAL CLAIMS	1,153.48		126.89					44.56	115.24			1,440.17
June 2020	Total	1,153.48		126.89					44.56	115.24			1,440.17
QC	EHC	372.52	11.00	40.98					14.39	37.22			465.11
QC	Drug	780.96	11.00	85.91					30.17	78.02			975.06

Status: C = Couple; F = Family; S = Single; SP = Single Parent Family

page 7

TM The Blue Cross symbol and name are registered trademarks of the Canadian Association of Blue Cross Plans used under license by Medavie Blue Cross, an independent licensee of the Canadian Association of Blue Cross Plans.

Status: C = Couple; F = Family; S = Single; SP = Single Parent Family

page 7

TM The Blue Cross symbol and name are registered trademarks of the Canadian Association of Blue Cross Plans used under license by Medavie Blue Cross, an independent licensee of the Canadian Association of Blue Cross Plans.

APPENDIX FOR ADDITIONAL INVOICE INFORMATION

IMPORTANT DATES

Statement Date: The date the invoice is created.

Due Date: This is the date your premium is due. The due date is the first day of the coverage period and is usually the 1st of the month following the statement date. Premiums must be paid within 20 days of the due date for Fully Insured clients and 30 days for ASO clients to ensure your coverage remains in good standing.

Coverage Period: This is the premium period your statement is reflecting, typically a one-month period.

COLLECTION POLICY AT MEDAVIE BLUE CROSS

If payment of premiums is not received when due, Medavie Blue Cross will contact you and follow the below process:

	Fully Insured	ASO
FIRST STEP	Clients will receive a letter advising them that their account is 20 days in arrears.	Clients will receive a letter advising them that their account is 30 days in arrears.
SECOND STEP	Clients will receive a letter advising them that their account is 45 days in arrears, and that all claims will be suspended if payment is not received in 60 days from the invoice due date.	Clients will receive a letter advising them that their account is 60 days in arrears, and that all claims will be suspended if payment is not received in 75 days from the invoice due date.
THIRD STEP	Clients will receive a letter for non-payment advising that all claims have been held effective 60 days from the invoice due date. This letter will be sent on the day of suspension.	Clients will receive a letter for non-payment advising that all claims have been held effective 75 days from the invoice due date. This letter will be sent on the day of suspension.
FOURTH STEP	Termination due to non-payment occurs 75 days from the invoice due date. A final invoice is issued as part of the termination process.	Termination due to non-payment occurs 90 days from the invoice due date. A final invoice is issued as part of the termination process.
FIFTH STEP	30 days after termination, if payment has not been received, a letter will be sent requesting immediate payment to avoid Third Party involvement.	30 days after termination, if payment has not been received, a letter will be sent requesting immediate payment to avoid Third Party involvement.

Please contact your Medavie Blue Cross representative for more information or email BC_Collection@medavie.bluecross.ca

APPENDIX FOR ADDITIONAL INVOICE INFORMATION

TAXES

Provincial Premium Tax is included in all group insurance premium rates. It is the responsibility of Medavie Blue Cross to remit this tax directly to the applicable province. Premium tax also applies to invoices with ASO Claims, HSA and PSA.

RST (Retail Sales Tax) currently applies on all group insurance premiums in the provinces of Ontario and Quebec. In Manitoba, the RST applies only to the Life, AD&D, Critical Condition and Short- or Long-Term Disability Benefits.

GST / HST currently applies to non-insurance services and wellness benefits such as inConfidence, My Good Health, etc.

How Premium is Calculated for Your Members

- Your Group Insurance Premium is pro-rated to ensure the premium is only billed for those dates a member has coverage under your group insurance policy.
- All eligible members are effective under your policy as of their effective date.
- Effective date is the first day after completing any waiting period, or the date of hire if there is no waiting period.

Note: It is important to update the member via the Group Administrator Portal or forward the member's application to our Administration department within one month of a member's effective date.

PRE-AUTHORIZED DEBIT

If the Pre-Authorized Debit option meets your needs, please contact Medavie Blue Cross and we can provide answers to any questions you may have regarding this option. Alternatively, please complete and return the Pre-Authorized Debit Agreement located in the Resources section on the Group Administrator Toolkit at medaviebc.ca/en/administration/gap-guide.

MISCELLANEOUS CHARGES

If this charge is on the first page of your invoice, the charges will be listed under the Premium Benefit Summary section of the invoice. They can include inConfidence and Second Opinion.

Miscellaneous Adjustments

Miscellaneous adjustment details and adjustment descriptions will be available on both the invoice backup report and in the detailed pdf invoice.

APPENDIX FOR ADDITIONAL INVOICE INFORMATION

INVOICE OPTIONS

Invoice Delivery Method: eBill invoice delivery method is available if you have access to the Group Administration Portal. Paper invoice delivery method is also available, with the restriction that only one invoice recipient will receive a paper invoice and is available only in the summary format.

Detailed Invoice:

- **Sort Order by Member Name:** This option will display all members alphabetically by the member's last name. This option is for eBills.
- **Sort Order by Member ID:** This option will display all members by the member ID number. This option is for eBills.
- **Sort Order by Class ID:** This option will display all members alphabetically by the member's class ID. This option is for eBills.

Summary-Only Invoice: With this option, there are no member details.

Adjustment-Only Invoice: If the invoice delivery method is paper, you have the option to receive member details that have adjustments only. This option is not applicable for eBills.

Volume Suppression: This option will suppress the total volume amounts on the paper summary for life products, meaning no volume amounts will be displayed on the paper summary invoice.

Employer/Member Contribution: This option displays the employer's portion of the premium and the member's portion of the premium.

Invoice Backup Report: The invoice backup report is an online report that will provide your invoice details in an excel format. These same details are also available in the pdf detailed invoice.

ASO Arrears and Premium Invoices:

If you receive multiple invoices, it should be noted that each invoice contains a different policy division number reference. Please indicate all policy division reference numbers as part of your payment details.

CSV INVOICE FORMAT

A CSV invoice format is available if your invoice delivery method is eBill. A sample of this format is located in the Resources section on the Group Administrator Toolkit at <https://www.medaviebc.ca/en/administration/gap-guide>.