

Sign up once.
Benefit any time.

GroupNet for Plan Members

Access to your group benefits information has never been easier with Great-West's GroupNet™ for Plan Members. Join the more than one million plan members who have signed up and connect to a world of secure, user-friendly services – available online, any time!



- Submit many of your claims online!
- Get text messages on your mobile phone when your claims have been processed.
- Choose eDetails for email notification when your claims have been processed.
- Sign up for Direct Deposit Claim Payments – claims paid directly into your bank account.
- Access expanded coverage information quickly and easily.
- Browse our [Health & Wellness Site](#) and the [Great-West Life Centre for Mental Health in the Workplace](#) website for extensive healthcare information and tools.
- Enjoy all the benefits of GroupNet on your Android™ device, BlackBerry® or iPhone with our mobile app!

Member eClaims

Electronic claim submission is available for a variety of services, including prescription drugs, dental care, vision care and paramedical, depending on your plan design.

Registration is simple and secure

Follow these steps to register and log in for the first time:

1. Go to groupnet.greatwestlife.com
2. Click *GroupNet for Plan Members*
3. Click Register now

Have your plan number and member ID number available, as you'll be prompted to provide this information. (These details are available on the front of your benefit statements or on your Benefit ID card.)

4. Follow the instructions to register and choose your own user name and password

Enjoy the benefits – 24 hours a day, seven days a week! Registration will be confirmed in writing by posted mail. Sign up once, and return any time. All you need to remember is the personalized password and user name you've selected!

Sign up now at groupnet.greatwestlife.com.

Submitting your claims is
faster, greener and more
convenient than ever

eClaims

With Great-West Life's convenient eClaims services, you have more options than ever to submit your claims, with no paper forms to fill out.

Provider eClaims

Claims submitted on the spot at approved providers.

Member eClaims

Submit your claims online with a few clicks of your mouse.



How Provider eClaims works

Provider eClaims is very similar to the way claims are submitted by most dental offices. Providers including acupuncturists, chiropractors, massage therapists, naturopaths, physiotherapists and visioncare providers can submit your claim for the service you received, on the spot, *as long as the provider is approved and registered for Provider eClaims.*

Claims are assessed automatically while you wait, and your provider can let you know immediately whether the claim is approved, declined or held for review. To protect your privacy, providers do not have access to your coverage details.

Provider eClaims is available at approved providers nationwide. New providers are added daily.

To submit your claim using *Provider eClaims*, your provider will need to know your group benefits policy/plan number and your member ID number. If you don't know this information, you can find it by:

- **Checking on our *GroupNet Mobile app***
- **Logging on to *GroupNet for Plan Members*** – view or print your wallet ID card under **Forms & Cards**
- **Looking on your Great-West Life wallet ID card**
- **Checking your explanation of benefits (EOB)** from a recent health or dental claim
- **Asking your plan administrator**
- **Calling Great-West** at weekdays between 7 a.m. and 6 p.m. CST. TTY line for the deaf or hard of hearing: 1-800-990-6654

Don't know if your provider is registered?

Check out the *Provider eClaims* listing under Client Services – Group Benefits Plan Members – Health, Dental and Out-of-Country Coverage and Claims on www.greatwestlife.com, or at your next visit, ask your provider if he or she has heard about *Provider eClaims*. To learn more, providers can contact TELUS Health Solutions at 1-866-240-7492. TELUS provides the network and registers providers on Great-West's behalf.

How to use Member eClaims

You can save time and paper by submitting many of your claims online through *GroupNet™ for Plan Members*, Great-West's secure online services. Using *Member eClaims* is easy:

1. Sign in to [GroupNet for Plan Members](#). Not registered yet? You'll need your group benefits plan number and your member ID number.
2. If you haven't already, sign up for Direct Deposit of your claim payments (you'll need your bank account information) and select eDetails for email notification when your claims are paid. You'll need these features to access *Member eClaims*. You can also choose to get text messages on your mobile phone advising you when your claims have been processed.
3. On the *GroupNet* home page, click *Claims – Online Claim* and follow the steps to submit your claim.

What type of claims can be submitted online with Member eClaims?

Claims can be submitted online where Great-West is the first payor or where claims payment is coordinated with another provider, if:

- the service was provided in Canada, **and**
- the service was incurred within the last six months, **and**
- payment is to be made payable to you.

Claims cannot be submitted online if:

- they are for medical equipment and/or supplies **or**
- they are to be paid by Great-West directly to the service provider **or**
- they are for a Type of Claim or Expense Detail that is not listed as an option **or**
- the service was incurred more than six months ago. In this case, submit the claim using a paper claim form.



Protecting your benefits

Great-West is committed to protecting the benefits you value from the impact of benefits fraud and misuse. We apply state-of-the-art safeguards to all *eClaims*, along with additional electronic measures for even more protection. Claims submitted using our *eClaims* services are subject to random audits and detailed adjudication.

Hold on to your receipts

We ask that you retain your original receipt(s) for 12 months, as your claim may be randomly selected for audit upon submission, or within 12 months of submission. You do not need to send in your receipts when submitting a claim online unless your claim is selected for audit. If selected, you'll be asked to send us your receipt(s), along with a printout of the Audit Confirmation Screen. If the requested pieces aren't submitted, you risk losing access to *Member eClaims*. This audit feature is designed to protect your benefits plan from the cost of fraud and plan misuse.

The availability of online claims submission for specific types of benefits will depend on your plan design. For more information, contact your plan administrator.