

General Employees' Master Agreement (GEMA)
March 25, 2023 – March 19, 2027

Changes to Benefits: Vision, Drug and Dental
Frequently Asked Questions (FAQs)

1. When do the changes to Dental, Vision and Health Spending Account (HSA) plans take effect?

The changes are effective March 9, 2024.

As of April 30, 2023, all benefit changes were updated by Manitoba Blue Cross. Log into [mybluecross®](#) to see the updated changes.

2. When do the changes to the Drug plan take effect?

The changes are effective April 1, 2023.

3. Who is eligible for the Drug plan maximum increase?

Anyone who is active and had drug coverage in effect on April 1, 2023. See Question 7 for more information for eligibility.

4. What changes were made to the Drug plan?

As part of the recently negotiated settlement, changes were made to the Drug plan.

There was an increase from \$800.00 to \$900.00 per certificate (i.e., per family unit) per calendar year for Full-time (FT) employees; and an increase from \$400.00 to \$540.00 per certificate (per family unit) for Part-time (PT) employees.

Full-time employees will be able to retroactively claim up to \$100 from Blue Cross for expenses that were not previously eligible.

5. Are part-time employees able to retroactively claim the Drug plan increase of \$140?

No. Part-time employees can retroactively claim \$50 only.

The increase to 60% of the annual maximum for part-time employees is effective the first day of the bi-weekly pay period following the date of signing (March 9, 2024).

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6. Who is eligible for this retroactive increase in the annual entitlement under the Drug plan?

An employee who has submitted drug claims in excess of \$800 FT and \$400 PT and paid the balance out of pocket during the 2023 calendar year.

7. Who is not eligible for this retroactive increase in the annual entitlement under the Drug plan?

- Anyone who has been terminated.
- Anyone who does not have a drug claim submission in excess of \$800 FT and \$400 PT in 2023 calendar year.
- Anyone who has already submitted drug claims and were fully reimbursed through the drug and/or HSA plan.
- Anyone who has submitted drug claim was fully paid through coordination of benefits with their spouse's plan.

8. What if the drug claim is still in the HSA and has not been paid out?

Manitoba Blue Cross will reprocess those claims under the drug plan.

9. What if I was set up for spousal coordination of benefits (COB) but no longer have plan coverage and my excess drug claim was rejected?

Please contact Manitoba Blue Cross to update your COB information and manually submit the rejected letter from the other plan.

10. When do I receive my reimbursement if I am eligible?

It is anticipated that reprocessing and payment of drug claims will be completed by May 31, 2024.

Manitoba Blue Cross will automatically re-evaluate all eligible and submitted claims on file. Eligible employees will receive a deposit of funds up to \$100 in their bank account (or by cheque if they are not set up with direct deposit).

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11. What do I need to do to receive my reimbursement?

Nothing. You do not need to do anything to get reimbursed.

12. What if I am eligible but do not receive a reimbursement by May 31, 2024?

- **Step 1:** Check your email for an explanation of benefits notification from Manitoba Blue Cross.
- **Step 2:** Log into [mybluecross®](#) to check the status of your claims and claims payment.
- **Step 3:** Check if you got a transaction from your bank or a cheque in your mailbox (if you are not set up with direct deposit).
- **Step 4:** Call Manitoba Blue Cross to enquire. Ensure you have details of the specific claim you want reimbursed before placing a call.

13. What if I have additional questions or concerns about the Drug plan increases.

You can contact Manitoba Blue Cross directly by telephone: 204.775.0151 or 1.888.596.1032 (toll free).

The Call Centre is open Monday to Friday, 8:00 a.m.- 5:30 p.m. (closed weekends).

You can also find additional information on the Manitoba Blue Cross website: [Manitoba Blue Cross](#)