

OPS FACT SHEET

Benefits Guide FAQs

What is the Joint Benefits Review Committee (JBRC)?

The JBRC is a bilateral committee, consisting of an equal number of AMAPCEO and the Employer, established under the Collective Agreement. The JBRC deals with issues such as: the review and adjudication of benefits claims denials, the monitoring of carrier performance, communication regarding group health plans and other matters related to benefits.

What is the purpose of the Benefits Guide?

To help members become informed consumers of health benefits provided under the Collective Agreement.

What if there are differences between the Guide and the Collective Agreement?

The Collective Agreement supersedes both the Guide and carrier contracts (LTIP, Dental, Life Insurance, Supplementary Health and Hospital) where there are any differences.

When did the Guide become effective and when does it expire?

The current Guide is now in effect and incorporates changes in our group health plans that were negotiated during the last round of collective bargaining. The current Guide remains in effect for the duration of the current Collective Agreement which expires on March 31, 2022.

What do I do when the insurance carrier denies a benefit?

Please refer to page ten (10) of the current Guide. You can first appeal to the carrier in writing. Provide new or additional information, if possible, to the carrier to address its

issues. Keep a record of any documents you send to the carrier and also keep a written record of all telephone conversations with the carrier. If your appeal to the carrier is unsuccessful, contact AMAPCEO. We review the facts of the denials and, if necessary, present cases on appeal to the JBRC.

What if my appeal is not successful to the carrier?

If AMAPCEO supports the appeal the Association can at the JBRC, provide a rationale to the employer and seek its agreement to overturn the carrier's denial. Following discussion between the parties at the committee, either the committee (if both parties agree) or AMAPCEO representatives alone (if the employer does not agree) can refer the appeal to an independent third party. The decision of the third party is final and binding on all parties including the employer and the insurance carrier.

Can I attend the JBRC meeting if I am appealing?

Only the JBRC can review appeals, as stated in the Collective Agreement. AMAPCEO receives the appeal file from the carrier (with your written consent), talks with you about the appeal, accepts your written submissions (if requested), presents the appeal and advises you of the outcome. An affected member may be asked, in special circumstances, if AMAPCEO deems it necessary.

If I am appealing, can I forward suggestions or concerns to AMAPCEO or the JBRC?

You are entitled to make written comments and suggestions to AMAPCEO about the appeal process or benefit improvements. AMAPCEO will carefully review these comments and suggestions.