How to submit an EHP or MHF claim

All members who have held a Teaching Assistant position for at least one term in the 2024–2025 academic year are eligible to apply for the EHP and/or the MHF. Please keep all the documentation like prescriptions, invoices/receipts, insurance statements and your banking information ready with you before you start the application process (see step 3 for a full list of documents needed for each claim). The process has changed since last year, so please read the instructions below carefully.

Step 1: Submit your claim to your primary insurance provider.

If your expense is covered by a primary insurance provider (i.e. Simply Benefits through SOGS or another equivalent primary insurance plan), submit to them first. Even if you've maxed out your insurance, we require the statement showing that your claim has been denied because you've maxed out your insurance plan for the year.

You can visit **http://sogs.ca/healthplan/** and follow the instructions for submitting a claim. If you have an alternate primary insurance provider, please follow their instructions to submit your claim.

Step 2: Submit a claim to the union for the remaining balance.

The remaining balance may be submitted to the union for reimbursement. There are some expenses that may not be covered by your primary insurer that may be reimbursed through the EHP or MHF. The "TA Benefits" section of the website has more information about these applications.

Supporting documents you'll need for each claim:

- Prescription or medical referral
- Receipt for the treatment/medication
- Insurance statement from your primary insurance company showing how much they've covered

***Note: Please save these documents as separate/individual files as there is a separate place to upload each individual file for each expense.**

General information you will be asked for:

The first page of the form will ask for your basic demographic information (eg. your name, email etc). Please make sure that the name you provide matches the name on your TA contract and that you provide the correct student number. If you have your TA contract, please upload it on this page. If you do not upload your contract, you will still be able to submit your application; however, we may contact you for proof of employment if we have not yet received this information from the University.

Choosing between Direct Deposit and Cheque:

We have moved to direct deposit (AFT) for the most convenient access to funds – for this we need the branch (transit), bank (institution), and account number related to your bank account. These three numbers or the void cheque can be downloaded as a pdf from your bank's app or website.

If you want the potential payment to be made by cheque, please note that our office hours are limited, and you will only be able to pick up your cheque during these office hours. Please check our website for posted office hours.

For each claim, you'll need to fill out the following information:

**Note: you will need to provide the information below for each treatment/receipt separately, so please keep all your documents as separate files. You can claim up to 5 expenses/receipts per claim.*

- Type of Expense
    - For **EHP**, please specify (eg. vision, dental, massage, physiotherapy, prescription medication, etc).
    - For **MHF**, please select from the drop-down menu.
- Date of purchase/treatment – Only the expenses incurred between Sep 1, 2024 to Aug 31, 2025 are eligible.
- Costs
    - Total Cost
    - Amount covered by your primary insurer
        - If the amount covered by your primary insurer is 0, you will need to provide the specific reason why it was not covered by insurance (eg, "Maxed out coverage", "Not covered by insurance", etc) and provide documentary proof. Without this documentary proof, your claim may not be considered.
    - Amount you are claiming from the union (ie. the difference between the total cost and the amount covered by your primary insurer)
- If the claim is for a dependent (child, spouse, or common-law partner), you will

be asked to provide those details.

- Attach supporting documents

At the end of each page, you will be asked if you have more expense lines. If you have additional receipts to submit, select "Yes" and you will be taken to a new page to submit another expense/receipt. You can submit up to 5 expenses/receipts per claim.

Note: If you have more than 5 expense lines/receipts, please fill out another application form.

Finalizing and submitting your application:

On the last page of the application, you will be asked to enter the total claim amount (ie. the sum of all the individual expense lines you entered on previous pages).

There is a space for you to upload additional supporting documents that you feel are necessary for your claim (eg. If the person you are claiming the benefits for is your dependent but not a child, spouse, or common-law partner, you can provide the tax return where they are declared as a dependent).

Lastly, you declare that all the information you have entered is accurate and complete and submit your application.

Step 3: Processing of your application.

You will receive an email (to the address you input on the first page of your application) confirming receipt of your application on our system. Applications are processed in accordance with the Bylaws, and in general, the processing time is approximately 4 weeks. If we require more information to process your application, we will reach out to you. However, if you have provided all the information we require, you will receive an email indicating when the cheque will be ready or when the direct deposit will be made.

If you have not received an auto-reply to your application, please check your Spam/Junk folder.

Should you have any questions, please refer to our FAQs first. If your question has not been answered here, please email staffpsac610@gmail.com.