Claim	Health		
Company	Manulife Financial		
Phone Number	1-800-268-6195		
Plan Contract	15900		
Number			
Member Certificate	your WIN number		
Number			
Website	http://groupbenefits.manulife.com/canada/GB_v2.nsf/Public/pm_login		
Benefit Card	You can register to the online website and print it out OR you can call the phone number for them to print a plastic one for you.		
	Your Benefit Card - Windows Internet Explorer		
	https://www.ec7.manulife.com/GBPlanMemberUI/Secured/Coverage/BenefitCard.aspx		
	ile Edit View Favorites Tools Help		
	Favorites 🚖		
	🔐 🔻 🛂 nursing home - Google Sea 🎉 Your Benefit Card 💢 🛗 Pay and Benefits Administr 🛗 HROntari		
	For your future  Group Benefits  PLAN MEMBER SITE  Welcome		
	MY SERVICES Your benefit card		
	Direct deposit for claims Receive electronic statements Health eLinks Send a note  COVERAGE Personal overview Dependants CLAIMS Health Submit a claim Online claim status Search my claims PLAN DOCUMENTS Forms and brochures Benefit card		

Claim	Dental		
Company	Great West Life		
Phone Number	1-800-874-5899		
Plan Contract Number	330021		
Member Certificate	your WIN number		
Number			
Website	https://groupnet.greatwestlife.com/public/signin/login.public?blank&brand=pn		
	lang=en		
Benefit Card	You can register to the online website and print it out OR you can call the phornumber for them to print a plastic one for you.		
	Forms & Cards	Help with this page	
	Claim Forms	Claim forms may be pre-filled with your plan and personal information.	
	Printable Cards	Provides the ability to print plan coverage cards that apply to you.	
	You can now submit claims online for several types of expenses - its fast and easy!  To submit claims online, you must have Direct Deposit and eDetails.  Claim Forms  Please see below for a list of the forms that are available to print. For your convenience, Claim Forms may be pre-filled with your plan information.		
	Click on the form of your choice.		
	Fill out the editable parts of the form directly on the Adobe Acrobat PDF document.		
	Update any pre-filled information that is incorrect before printing the form.		
	Print the form, sign it and att     Deliver the form to the addre     dentist, doctor, plan sponsor	ess indicated on the form, or other appropriate location (i.e. your	
	Dental Claim Form	[Help with this form]	
		Back to Top	
	Printable Cards Please see below a list of cards to	that are available to print.	
	Click on card of your choice		
	Verify that the information on the card is correct.		
	Print card, cut and carry the card with you.		
	Wallet ID Card - 330021		