

Green Shield Users

Comments About EHC Support

253 User Comments

NOTE: These comments reflect the opinions of individuals, and their description of services and terms reflect their perceptions. Always check with the provider as to the terms of coverage. EHC Survey gave users an opportunity to comment if they had requested support from their provider. These review comments are background information, and do not necessarily represent the opinion of the BCRTA. All comments in these survey results are unedited, except for a few redactions of comments that could be viewed as libellous to individuals or blatantly incorrect.

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| <p>It is a cumbersome process for some claims. Having to explain to explain the same claim time and time again is tiresome: chronic conditions do not go away.</p> |
| <p>I contacted them for clarification of information in their booklet. I was referred back to the booklet. When I pushed, I was told I would have to fill out a pre-approval request form. I don't see why they can't answer simple questions. If their printed information was clear, I wouldn't need to call them.</p> |
| <p>The \$200. deductible per person means very little is claimed at this time</p> |
| <p>While we have our service manual, all the information is not provided. While coverage for orthotics seems simple, Iris not. It is easier for someone with healthy feet to be reimbursed for orthotics than someone who requires them as a medical necessity.</p> <p>I required a power wheelchair following extensive foot surgery where I was required to be non-weight bearing for 4 months. Because I have a chronic health problem, my claim was denied 3 times even though I had numerous letters from specialists. When I spoke with the agent I was told coverage was only for palliative or acute reasons. I asked her to define acute. My perseverance paid off. She realized my need was due to surgery and later my claim was approved. Of the \$5000 I was supposed to be allowed, I was only reimbursed for \$1200 meaning that I paid most of the powerchair costs myself.</p> |
| <p>Telephoning them was the way I found out about drugs not being covered and they were quite flippant about it and did not seem to care one way or the other.</p> |
| <p>We were switched from Blue Cross to GSC by the BCRTA. [ED NOTE: No, change was made by TPP, who sponsor the GSC plan] I have been mostly happy. There was one little hitch when Blue Cross had previously covered some orthotics for my husband, and GSC declined. Then, it also seems that optical services were cut back. Otherwise, I have been most pleased with GSC, especially being quick and easy to get through to a representative on the phone! Thank you.</p> |
| <p>I have not been asked about my GS dental coverage. It is the worst coverage EVER! They mysteriously dont cover certain items and when you call they treat you like stupid dirt. Who is responsible for making retired teachers have this plan? A new carrier should be found at once. The bad dental plan sours me on any GS coverage. Best example? A my recent dentist root canal visit, they refused to cover the freezing cost! A root canal without freezing!! Call to enquire?? Forget any help...snide comments...complete lack of interest in helping. GET RID OF THEM from your retired teachers' lives. Are there not other ins companies? I deal with my wife's big ins company for dental coverage as well. What a difference in ease and fairness of coverage. DO SOMETHING!</p> |
| <p>The support personnel were very supportive and kind.</p> |

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| <p>Getting coverage for medical equipment is complicated and time consuming. However, once you jump through all their hoops, they are quickly forthcoming with payment. I'm actually pleased with this coverage and the help I received after I finally got to speak with a knowledgeable representative.</p> |
| <p>The Greenshield reps have always been helpful and have explained the situation in plain terms for me to understand. I have been furious with Greenshield when we had to join into that provider. I found it totally confusing and not user friendly to get information. I have called several times and as I said, the reps have been very helpful - thank goodness.</p> |
| <p>It is extremely difficult to get through to someone on the phone. They don't know what can be handled all the time. Long wait and sit process very frustrating!</p> |
| <p>I am very pleased that they are involved in coverage of very expensive biologic medications.</p> |
| <p>Sometimes online claim inquiries take longer than expected.</p> |
| <p>Podiatric claims are challenging, and have not been clear in the past. It seems better now.</p> |
| <p>To date, I have been very pleased with the Greenshield.</p> |
| <p>Plan does not cover dna testing used to suggest possible alternative cancer treatment for my wife.</p> |
| <p>I would like to have my husband's dental on my plan.</p> |
| <p>I have trouble getting into the website. My password seldom works. I find I need to renew it every time I enter the site. This is tedious. When I talked to someone, they just helped me reset the password again. I think they just assume I am forgetful. I go into lots of other websites, without difficulty. I was with PAC before it changed to Green Shield and never had difficulty- I seldom go into Green Shield now, because of the difficulty with the site.</p> |
| <p>I believe that once you get used to the website, it becomes easier to use; however, they break supplies for diabetes management into about three different categories and it is quite confusing. Other Extended Health Plans cover them under prescriptions. It is frustrating to have to pay up front, then submit receipts online for insulin infusion pump supplies and wait weeks sometimes to get paid when these are hundreds of dollars. I have never had to do this before on any other EHC plans I have been covered by. However, I am happy that Greenshield is covering Freestyle Libre blood monitoring devices and Continuous Glucose Monitoring devices (some other plans do not). I now am familiar with submitting things online so find it easy to use now.</p> |
| <p>The need to go "up the hierarchy" to get to the supervisory level to address a concern is time consuming and very frustrating</p> |
| <p>We are happy that our dentist, COSTCO pharmacist and optometrists submit their bills to the plan directly, saving us time. Sometimes we have to still pay our dentist who charges more than the GSC rates.</p> |
| <p>I'm very happy with Green Shield so far.</p> |
| <p>I informed the Green Shield agent I would be looking into Johnson health care insurance and switching my coverage, and encouraging my Association to discontinue using Green Shield as a health care provider, which I am doing now.</p> |

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| <p>We will see if Green Shield is willing to be responsive to individual needs, or will rely on "group" needs. In addition, it will be interesting to see how people at the TPP respond and if they are willing to advocate for me. I am also curious if the BCRTA can take a stand?? I already sent a copy of the letter and documentation...and was sent a link to this survey.</p> |
| <p>Having trouble getting a dental predetermination at the moment.</p> |
| <p>I have Green Shield but wanted to see if also having a secondary plan would be beneficial for us as we had always had two plans, my husbands through his work and mine. So I joined Johnson, and paid for it privately. There were nothing but problems. The amount covered wasn't anywhere close to my monthly charge so we dropped it.</p> |
| <p>The support for eye glasses of \$200 every two years is very minimal when compared to the cost of updating glasses.</p> |
| <p>They're an insurance company - their purpose is to make money not to service the client.</p> |
| <p>It has worked very well for my wife and I.</p> |
| <p>I was hoping Shingrix (shingles) and the pneumonia shots would be covered, but they were not.</p> |
| <p>what can the person do who is answering your question when your plan doesn't have coverage or not enough coverage</p> |
| <p>Why did we switch from Blue Cross to GSC without any consultation whatsoever? This sudden change was never clearly explained by the TPP. It is very unfortunate. Many retirees are still wondering about this flawed process.</p> |
| <p>WORST extended health plan I have every had. Get the feeling they want to chisel you down for every claim and avoid payment at every turn by making things difficult. Never pay the full amount (80%) of even cheap, basic drugs at a mainstream pharmacy. Always require an extra few dollars over the 80% Blue Cross was never like that. Was offended by the offer to forego my payments to support folks needing higher cost drugs. No point in having insurance then, is there?</p> |
| <p>Slow to process especially dental claims. Stalling payment by requesting more evidence that the dentist had already sent. Payments made that made NO SENSE ..ie"claim 0"... refund \$200 !!!</p> |
| <p>It was far easier, and better coverage, with Blue Cross. That was a few years ago now.</p> |
| <p>Support by phone is "iffy", inconsistent. One time you can phone and get through, and another time you are on hold for a long time, perhaps 45 minutes.</p> |
| <p>Wish we could go back to BLUE CROSS. UNDERSTAND THAT IT WAS THE DECISION OF THE NDB GOVERNMENT TO MAKE THE CHANGE.</p> |
| <p>Green Shield website is not easy to use! For example, when trying to understand how to submit my ambulance receipts the options online were not clear.</p> |
| <p>"The support is still non-existent for the prosthesis and fabulous for the cancer medication. The amounts for vision examinations and prescriptions are not in line for the increases in costs nor the frequency of vision changes while undergoing chemotherapy."</p> |

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| So much is not covered. Staff okay, they don't decide what is covered so can't provide help |
| The support person agreed that the process I had to do to get a certain medication covered was onerous . |
| Biggest complaint is complicated phone process listening to automated directions and questions. Finally learned to respond early in phone call "Speak to Agent". It mitigates much of the frustration. |
| Eye care coverage is weak. My senior eyes need more than bi-annual check-ups |
| I didn't even try to claim my husband's hand therapy with Greenshield and when we were covered with Blue Cross, my physical therapy was billed directly to them and I paid the difference. It seems that most places don't want to give us direct billing to Greenshield and want us pay up front and then claim for reimbursement. |
| Green Shield process is slow and cumbersome and I just pay certain costs rather than fighting for what I feel is fair |
| Greenshields can be frustrating if you have to contact someone with questions. Our healthcare providers doctors dentists have commented that they are more difficult to work with. I preferred Blue Cross. |
| When phoned about claiming two orthotics, I was told I was eligible for a higher amount than what I was eventually reimbursed. When I called to complain, I was told "no you were given the incorrect information on that first call. Very frustrating. |
| I used written notes to submit to GSC. I actually never had any response from them, just my presc. deductions were accepted. The only reason I keep extended health is that my husband and I are aging and we may need more meds. The dental is a whole other racket. I also never have massages and rarely physio. Yet I am paying for this. I do support an EH plan that lets me eliminate the services I never use. |
| Dental and vision coverage could be better. |
| It is difficult to access the details of my coverage. I need to contact them to ask about coverage of specific details. There is no booklet that gives this info only brief summary. It would also be beneficial to see online where you are at in your claims (as you can do on Blue cross) it shows how much more will be covered on specific services or equipment. I find Green Shield not as clear and concise as the Blue Cross site. As a result I feel I am often having to ask questions or am not sure how much coverage is left. |
| The most difficult was tracking information for tax purposes |
| N/A |
| my GP sent a letter in support of my need to use the brand name drug as opposed to the use of the generic drug that wasn't working well - I never heard back from Greenshield |
| The problem is that it covers almost nothing. Most of my prescriptions are no longer covered. By the time the deductible is reached for the one drug that is covered, the year is over. A small amount is given every 2 years for eye glasses. I am paying way more for the plan than I am getting back. |
| The prescription plan doesn't cover compounded medications via pharmacy claim. You have to claim through Green Shield. |

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| Some of these answers included processes with Green Shield while my husband was alive. |
| Since moving to Green Shield it seems that the company is not interested in providing help or information other than the internet based "health improvement program." Their reply was/is that information is available on your personal login page. That is not always helpful. |
| Quick to answer, tried to be helpful, but solution didn't work |
| Trying to sort out prescriptions outdated on many different dates isn't possible. |
| My issue is not with the support worker on the phone, as they did go above and beyond to call the pharmacist themselves when dealing with the issue of not covering my expensive but medically necessary prescription. The issue is that the compound medication is not being covered as one of the ingredients is not on their list of approved ingredients for coverage. |
| The site is difficult to navigate and not intuitive at all. |
| "Poor dental coverage. Also, we do not access any health support services(massage, chiropractor etc.) as they are expensive and Green Shield covers basically nothing! As we are with Green Shield we have no access to travel insurance. Other providers offer loyalty pricing on travel insurance through the EHC. Also, as seniors we would like support with Shingrix vaccines not possible with Green Shield! I am disappointed your questionnaire does not address our concerns." |
| See previous response |
| I find their website not all that user friendly - oddly enough, the font is quite a light green, not the easier for my senior's eyes. Also, 3 or 4 years ago, my RTA EHC coverage was changed from Blue Cross to Green Shield - I think by the RTA. Your question on coverage change does not include that option. |
| Try not to think about it because my experience just makes me mad. |
| coverage is a lot less than Pacific Blue Cross |
| "I believe the dental portion needs to be upgraded. I seems to not to cover a lot. " |
| Long delays between responses. Wording of plan ambiguous and conflicted with coverage. |
| I have been quite happy. |
| Service rep was courteous and helpful; the problem seems to be with policies or regulations. |

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| <p>"Although, I have spoken to a few agents regarding issues that have been indicated previously, I usually get the feeling that I am wasting my time as they have given the impression that there is nothing they can do because things are written in policies that can't be changed.</p> <p>I actually have emails saved that I have received from them when they have denied a claim for a viscosupplementation shot that has was firstly denied because it was submitted too "early", one was six days before the six months was up (before I knew it had to be to the day) and another was one day too early. That one was because they go by the date on the pharmacy receipt, when I had purchased the product the day before the six months because my doctor's appt. was early in the day and I wouldn't have had time to get it on the day of the injection.</p> <p>Then there were "clarifications" as to which date I was to use for the next shot to be eligible. First I was told that it was six months from my "first" shot, then it changed to six months from my "last" shot, when in actual fact it seemed to be six months from the date of the "previous" shot. I learned to purchase the prescription at the six month date from the previous shot, regardless of whether I couldn't get in to see my specialist for another week or two, which would have changed the next eligible date. How confusing!!!!"</p> |
| <p>Just as we are getting older and need good coverage we are receiving less for professional services and less of my medical supplies are covered . When I was a teacher the coverage was way way better.</p> |
| <p>Do not cover enough especially dental</p> |
| <p>Having a deductible means that I hardly ever get coverage for prescriptions/services because I am a "light" user. Because it's coverage as a couple, both out deductibles are combined, before we get coverage. I've phoned about that too.</p> |
| <p>I wish that they were more cognizant of members who have few skills with a computer</p> |
| <p>curt comments, unsympathetic</p> |
| <p>I have had no issues with Green Shield.</p> |
| <p>Some times trying to follow the claim forms on the computer is difficult!</p> |
| <p>I have not had to claim unusual expenses and GHC has been OK. I am planning to transfer to Johnson because they waive the annual \$200 deductible, and Johnson at least has an office in BC! Your introductory summary further convinces me to do this asap, as my aging likely means increased medical claims and I do not want to experience the difficulties so many of my retired colleagues do with GSC. Thank you for the stats, which tell it so clearly, and for pushing me to move on this transfer!</p> |
| <p>I would like to see better coverage without increased premiums, similar to BC Hydro plan.</p> |
| <p>I have questioned from the beginning as to why we had to change from Blue Cross to Green Shield, especially when the rationale at the time seemed to be cost-saving. I haven't seen any of that, nor any better service. I also did not know about the Johnson option and would like to see BCRTA send out information on this like they did for the change to Green Shield.</p> |

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| <p>"1. When I phoned GSC I got different answers from different agents. 2. Requirements are unreasonable eg physiotherapist supplied orthotics, yet doctor's Rx was required to get a repair, although not involved in the process; required an extra doctor appointment.. 3. I quit the dental plan last year because it was costing me more than I was saving. 4. Was not aware that Johnson was an option supported by BCRTA; thought change from Blue Cross to Green Shield was only real option when it happened and anything else might be risky."</p> |
| <p>Non-coverage of compounding medication is my only problem so far.</p> |
| <p>Q9: Blue Cross to GS. Overall, seem very impersonal and basically uncaring!</p> |
| <p>I do not like the health surveys they are always wanting me to fill out. It seems intrusive and I am uncomfortable putting all of this information online. I do not feel comfortable giving too much information to an insurance company that could use this against me in the future.</p> |
| <p>Deductible is to high, and osteopath not covered</p> |
| <p>Only issue was GS wanted the invoice from Chiro to maker/supplier of orthotics which other company (PBC) have not asked for in past dealings.</p> |
| <p>making us go back to get a prescription for everything all over again, the doctor gets paid for a piece of paper and the physiotherapist is not valued</p> |
| <p>It covered more than Johnson's plan and the cost of travel had increased to the point that I would never use that option so it was easier for me to put extended and basic all under one carrier.</p> |
| <p>I was covered by Pacific Blue Cross when I retired. When that plan was no longer available I "automatically" switched to Gree Shield. I currently have few medical issues and have not had difficulties with claims.</p> |
| <p>On some issues the support was very helpful. The support for my Prolia coverage left me confused and not knowing what to do.</p> |
| <p>"I neglected to report that I had been given a prescirption for a special injection for an arthritic knee. I submitted the detailed prescription labels with distinct information regarding the fuffillment of the prescription as well as a copy of the prescription from the surgeon. This was not enough! I had to have a detailed letter from the surgeon about his diagnosis. Doesn't a prescription from a surgeon indicate an obvious diagnosis? This took some time to resolve.</p> <p>I also do not like the cap of \$1000 for paramedical (physio and massage therapy) I am a senior and as my mobility is often challenged I require these services more frequently than I did before. I am aware of the life-time limit of my plan."</p> |
| <p>We need to expand our coverage.</p> |
| <p>How to Re qualify for EHC</p> |
| <p>My deductible was charged twice in one year. It never was resolved.</p> |
| <p>I find EHC staff to be terse and condescending. The hoops and paperwork to go through when needing new anything is not okay.</p> |

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| <p>I was trying to claim PRP . They only allowed a small portion. I didn't go for a second PRP as it wasn't helping and it wasn't covered much. A second thing is that we are still getting 2 dental cleanings per year, even though the person in the article said not. (Green Shield) . So we are happy with that. Only one dentist visit during your cleanings per year though, maybe that is what she was thinking. You have to alert your dentist to not schedule one every cleaning or you are paying for one dentist visit (only \$35 but not necessary usually). Otherwise we are very happy with Green Shield. I wish I would have chosen the higher dental package from the beginning, but it has likely worked out to be the same price as we have both had to pay in full for two crowns in 5 years of retirement.</p> |
| <p>the thoroughness of the answer to my problem depended on who was answering my call</p> |
| <p>No response.</p> |
| <p>Last year I put in for a claim for about \$50.00 and it took 20 plus weeks to get the claim resolved. I had phoned about once a week and had agents who offered to help but after about a month they would not take my calls. It was very frustrating</p> |
| <p>The call centre personnel are not sufficiently familiar with the coverage, an I have repeatedly received contradictory information from different people. There appear to be no supervisors to handle questions.</p> |
| <p>Lots of rules that I am unaware of and limits that as I age are unrealistic. 1000 per year for all extras is absurd.</p> |
| <p>I wanted to switch to the Johnson program but it wouldn't pay some of the drugs which are paid for by Green Shield. I gave them a list of all my partners' drugs and and that is what they came back with.</p> |
| <p>Green Shield Canada has added so much stress to my life living with Type 1 diabetes. I often wait a long time before I submit my claims because there have been problems so many times in the past and I don't have the energy to go through the hassle over and over.</p> |
| <p>In a nut shell, I don't think they provide a clear summary of coverage nor do they understand it themselves. I get so frustrated paying out fees to see very little in return. It's an exercise in futility. When first joining Greenshield, I felt so cheated that, after following up several times with the company, I contacted the BCTF and followed up with a written complaint. I have been on the verge of changing providers (too expensive) or opting out altogether very year. Ahhhhhh!</p> |
| <p>Only my wife had one set of claims for physio. That is all the paramedical claims we have had and submitted.. For a painful shoulder doctor recommended and surgeon injected Cingal. The cost for the medication has always been rejected and when requested no explanation sent. We chose not to take dental coverage as the cost was more than our twice yearly check ups cost. We signed on with Greenshields as the TPP seemed to indicate this was the plan to take. Perhaps "my bad" for not realizing the affiliation of BCRTTP with the Johnson plan. I have been retired for 26 years now</p> |
| <p>We were disappointed with GSC service compared to PBC. We have discussed alternatives to TPP plan over last 2 years as problems persist and reimbursements declined as % of claims. Will lobby TPP to change carriers when GSC contract is up for renewal.</p> |
| <p>I was very disappointed when the EHC plan was switched from Blue Cross to Green Shield. I have never understood why we would leave a plan that employs BC citizens and was doing a great job. I have heard from friends that have some medications not covered any longer. Also I did not realize that I could have chosen a different company on my own.</p> |

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| <p>I have not had any real problems with Greenshield. Their support, any time I have called has been helpful and supportive. Because I have Johnson Medoc and Home Insurance I have been curious about the Johnson EHC option. To that regard I am happy about this survey and look forward to your results. I will be happy to switch to Johnson EHC if that will be the recommendation by Retired Teachers. When we first switched to GreenShield from Blue Cross, I was rather frustrated, but once I had it all sorted out, after a number of calls to GreenShield, it was OK. Actually, it was easier than Blue Cross once I had it figured out. I trust the Johnson programs and was looking to do a comparison the EHC coverage. But, quite timely, you are now doing that. Again, I look forward to your findings and any recommendations.</p> |
| <p>Mail out our plan booklet and all the information of what is covered whenever changes are made or at least once a year and mail out forms and details of our account transactions every year for tax purposes and general information of all our transactions and reimbursements and explanations.</p> |
| <p>Seemed unwilling to help as I was not a new sales insurance prospect. Could not guide me to my plan coverage with tpp.</p> |
| <p>The website is difficult to follow and asks repeatedly for information they already have</p> |
| <p>One drug that my husband must take is covered by green shield but not blue cross. It is very expensive and the only reason I would stay with green shields as the claiming process is a real pain.</p> |
| <p>Can I save by switching to Johnson?</p> |
| <p>Very unhappy with the DENTAL PLAN. Coverage seems cut off at the level of cost of the plan.</p> |
| <p>We changed because you told to. Not sure why you thought that Blue Cross was not good for us anymore.</p> |
| <p>way easier to use than Green Shield than Pacific Blue Cross; website better, less checking up on claims</p> |
| <p>The brief explanation for limited or non-coverage is often unclear on the statements. Having dates of eligibility for benefits on the website are not provided on the website but would be a big help for planning services. Obtaining or verifying the information requires time consuming direct contact with a representative.</p> |
| <p>I was not impressed at all. They do not want to speak over the phone and their email explanations tell me next to nothing.</p> |
| <p>When i first retired, my Blue Cross Plan was covered in my retirement benefits, but over time my plan first became my payment responsibility, and then changed to Green Shield. I have found all of these very frustrating, and costly. I have found Green Shield very unresponsive and unhelpful, the website is frustrating to navigate even for something as simple as getting expenses for taxes, and the explanations given online are very limited. It is not a simple matter to get information regarding reimbursement of upcoming expenses. Our family also has a Blue Cross Plan in my husband's name, and that has been much simpler, clearer and more helpful. There were times years ago when i did not feel that about Blue Cross, but i feel they have definitely responded to customers needs and online services in a much more user friendly way. They have been helpful and informationg -- even if the only thing we were to discover was that an expense would not be reimbursed!!</p> |
| <p>WE find it difficult to compare dental coverage for EHC, Blue Cross vs. GSC. We trust that BCRTA did the necessary research. It is our feeling we are getting less dental coverage with GSC.</p> |

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| Request change to basic dental plan but was denied |
| Person I spoke to seemed impatient and frustrated when I did not "get it" right away! |
| Agent could only tell me that the dental code wasn't covered -- no reasons or options. She stated that she was not familiar with the codes. |
| Since my husband and I each have an EHC sometimes when I submit his claim GSC gets things confused and there have been times when I have had to return their cheque or write them a cheque to cover an over payment. |
| It's been a couple of years since I used support so difficult to answer at this time |
| I have had to pay for all my high blood pressure medications with no reimbursement. Same for chiropractic help. Very disappointing after the very good coverage I received from Blue Cross when I was working. I have had coverage for vision but no help with any thing else. |
| is there any chance of getting dental coverage? |
| We changed from Blue Cross to Greenshield as instructed several years ago. We were happier with Blue Cross--the complaint isn't about service or support--the coverage just doesn't seem to be as good. When we have questioned why a particular claim has been rejected we're simply told--"you're not covered for that". And, we think some of the coverage is rediculously small given the costs of the particular item--eg eye glasses and vision exam etc |
| I've seem to be paying more monthly but not getting as much coverage as when we had Blue Cross |
| Last year, it took Green Shield almost four months to approve a new crown on a broken tooth at the front of my mouth. |
| My questions were not answered as directly as I wished. |
| In my last interaction the person was condescending and rude. |
| Preventative health is not encouraged or supported. Osteopath services declined.Very little of naturopath services including treatments / natural medicines/ prescriptions ever covered. I wish I had never switched from Blue Cross to Greenshields. Retirement workshops seemed to recommend it but it is like living without any insurance because it rarely covers what is needed.I would not be recommending it to anyone considering retiring. Stick with Blue Cross. Far more helpful and informative. Even when a doctor prescribed statins it was not covered or when my husband had a heart attack and many new meds prescribed it was an extremely long process to get partial coverage. |
| I would appreciate it if BCRTA would go back to Blue Cross for all the reasons I have detailed in this survey. |
| Over 2 years ago I was tested for bone density and the test showed signs of osteoporosis. I was advised to take an expensive drug, Prolia, and applied for benefits from Greenshield Canada. I had a frustrating experience with claim forms returned to my health care provider for clarification of my needs. After a month or more of worrying my claim was finally approved. Needless to say my Heath care provider was extremely frustrated as well, as these document requirements took up much of his time! |

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| <p>When making on line claims, there isnt always a correct option. One has to contact GS to find out how to make the claim correctly.</p> |
| <p>I am most upset with having the feeling that I had change to Green Shield.</p> |
| <p>The agents seem to deal adequately in information about the process. My biggest complaint is that the plan does not offer adequate reimbursement for prescriptions.</p> |
| <p>The lady was very knowledgeable and verified that everything I was doing was correct regarding my payment submission regarding my new hearing aids.</p> |
| <p>I switched from Pacific Blue Cross to Greenshields and at the time it was not made clear that BCRTA backed Johnson and not Greenshields. I only learned about that with this article</p> |
| <p>Not exactly EHC but concerned our dental plan no longer allows us two cleanings a year when as we age it may be harder for many of us to clean our teeth with floss well because of arthritis and because of tendency for gums to recede, without twice yearly cleanings, we may be more susceptible to cavities</p> |
| <p>The machines they use don't react to my voice. When I finally get human they may refer me (more waiting) or give me advice or an explanation which is proven to be incorrect on a subsequent phone call.</p> |
| <p>Green Shield does not cover compounding prescriptions. Blue Cross did before the switch. Dental cleaning could be twice a year instead of once.</p> |
| <p>Green Shield plan is so minimal/basic for a large group plan. You would think the benefits would be and should be greater. Blue Cross and Sun Life were much better!!</p> |
| <p>I have fibromyalgia but visit paramedical less often because I don't want to run out. Added extra dental coverage which was right choice. Many things not covered by Green Shield.</p> |
| <p>Plan support is too much computer rather than personal support!</p> |
| <p>My card with Gr Shield info appears to have poor identification info.</p> |
| <p>Mainly they just put us off by saying things like it was unusual. We did not choose GS - we were switched by TPP from B Cross to GS. Were not made aware of other choices. They just said it was cheaper and offered nearly identical coverage. We did not choose this plan.</p> |
| <p>Does GSC have a partnership with Cosco which offers lower prescription costs to GSC members? Why just with Cosco? Why did TPP change plans from Blue Cross to GSC? I prefer a plan that is managed in BC not in Ontario.</p> |
| <p>"\$1,400 for hearing aids needs an increase - especially when you need a pair of aids - batteries add to the cost as well. \$300 for glasses and eye exams needs an increase, too. Would like coverage for annual flu vaccine that is best for seniors - currently about \$85 and not covered. Also shingles. Would like coverage of some items needed as a care giver for my husband - eg hospital bed and mattress chair to lift to sitting position - \$1000 for paramedical annually is not enough."</p> |

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| <p>"I have heard from friends about limited prescription coverage. I am wondering why # 43 to 46 are part of the survey if the focus is only our EHC coverage. Seems to be subtle advertising. [note - it isn't advertising it is an offer to review if EHC coverage is meeting your needs - which is the precise reason for the survey]"</p> |
| <p>our contributions to the plan far outstrip what we are able to recoup</p> |
| <p>Anguished phone calls and totally non useful. When we were switched to Green Shield from Blue Cross we were told the coverage would be equivalent but that is NOT the case.</p> |
| <p>People on the phone pleasant and helpful it is the process that needs improvement. Note: about 3 years ago BCRTA switched from Blue Cross to Green Shield [ed. note - incorrect - TPP made the switch - it is their plan] The arguement was that Green Shield gave better coverage. How do I know that Johnson's which is currently being promoted will be any better?</p> |
| <p>My husband and I both had Pacific Blue Cross extended health - we were FORCED to switch over the Green Shield.</p> |
| <p>Too impersonal - Blue Cross was better. Dental coverage is too low.</p> |
| <p>just not as good as Blue Cross was</p> |
| <p>SOOOO unimpressed! Pacific Blue Cross was a billion times better. Why on earth did BCRTA ever terminate that contract? [ed. note - BCRTA did NOT terminate the contract - we did not administrate the Blue Cross Plan nor the Green Shield plan]</p> |
| <p>As stated, GSC promises a "one call resolution" to its members. All the GSC staff are polite and knowledgeable. Three boards (College and Public Service pension boards) of trustees worked with TPP for a thorough joint review of EH and Dental insurance carriers. The results was "best possible value for premiums paid" saving members 13% overall. Why are we now reviewing the GSC plan? [ed. note - we are reviewing both major plans that provide service to retirees, not just GSC. The point is to compare the experience of members in plans. BCRTA was not consulted regarding set up of insurance plans by TPP or promises made. We do receive continual feedback from members about real world experience, hence this survey]</p> |
| <p>I started with Blue Cross then changed to Green Shield. I thought that was the only option. So far my health is good and I have not needed to use it much.</p> |
| <p>The automated telephone response is a great source of frustration. It is difficult to determine which "department" one needs to resolve a problem. What is wrong with a live person answering and directing a person's call to the right department? I wish medical supplies (Nightingale) could bill directly to GS. I have to pay the full amount and then make a claim directly to GS.</p> |
| <p>Experience has told me it is useless to complain about anything. They don't budge. I am thinking about dropping EHC and dental because most years I pay the high premiums but haven't enough claims to meet the deductible. I would be further ahead financially if I had no EHC.</p> |
| <p>Their response time and attitude got better. At first was not good at all.</p> |

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| <p>Long wait time to get through. To be honest I wasn't impressed with Blue Cross but Green Shield was way worse. When we were first switched to Green Shield, I contacted them for a run down of my claims for my medical expenses for my taxes. Green Shield refused and wanted to charge me \$57 to provide a read out. Not a good start for a plan. I'm glad to see this survey. Every retired teacher I've spoken to hates Green Shield's plan.</p> |
| <p>No problems with claims but deductible per person seems high. Currently my needs are minimal, however I am concerned about the restrictive nature of what medications qualify for support. Rising cost at Johnson was a factor on switching. Also BCRTA sounded like it recommended Green Shield. [ed. note - BCRTA does not run the GS plan nor recommend it. We partner with Johnson and encourage members to find the plan that fits for them.]</p> |
| <p>This is a terrible plan. It covers next to nothing and it is a constant struggle to get coverage of doctor recommended therapies.</p> |
| <p>At tax time, it is hard to calculate what dental costs we have paid.</p> |
| <p>4 pages attached. This has not been resolved to my satisfaction. I "gave up" after (1) my letter of Jan 16 2020 went unanswered (2) COVID (3) my husband's alzheimer deteriorated. I'm his primary caregiver.</p> |
| <p>Over the years I found Blue Cross to be better than Green Shield.</p> |
| <p>Poor communication skills and manner of agent.</p> |
| <p>When I think back to the move from Blue Cross to a new provider, perhaps we were given a choice, but I didn't have a clear sense of how the two plans differed, especially in their approach to us as subscribers.</p> |
| <p>I feel the deductible at the first of the year is a little silly. Why can't it be included in the cost?</p> |
| <p>When the Johnson Prestige plan was first proposed we compared that with our combination of Green Shield and MEDOC and also spoke to a Johnson advisor. At that time the combined plan was not as good for our needs. If there have been changes to the Johnson plan it would be nice to see information on this so we can decide whether to look into it again.</p> |
| <p>Green Shield says they mostly deal with claimants in Ontario not BC and so some care providers don't except them as an insurer.</p> |
| <p>I feel the rate of coverage for dental and drugs is very low.</p> |
| <p>Green shield not as responsive as Blue shield</p> |
| <p>I wish it would cover a greater percentage. I find the plan is bare bones coverage with limited coverage amount.</p> |
| <p>Forms are often complicated to complete, and the form has changed as well. Deduction calculations and summary documentations recorded by the provider are, on occasion, inaccurate and require a clarification phone call by me, on Ontario time, with the provider. Reports on the inadequacy of the process or the service system are not sympathetically responded to by the provider. There seems to be no mechanism for responding to requests to improve the system, or its health coverage. I'm left feeling that, overall, my health coverage by Green Shield is significantly worse than my coverage was under Blue Cross (which is what I was compelled to use while working)</p> |

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| <p>Green Shields covers a very expensive Parkinson's drug (teva rasagiline) \$700 every 3 months. Not sure that Johnsons would cover it.</p> |
| <p>I have not found the GS staff to be supportive or interested in my requests. (Please go back to Blue Cross; BC company, helpful, pleasant...)</p> |
| <p>They have been unable to be flexible with my perscription for warfarin even though by its nature this is a prescription that requires adjustment. They only accept a very particular way of having the doctor prescribe. I never over many years had this problem with Blue Cross.</p> |
| <p>Their explanations about what medicines they decide to pay and to what extent is extremely convoluted and I feel it is meant to obscure their practices. I never had this problem with Blue Cross. I would be interested about alternatives and I hope "PostScript" continues the discussion.</p> |
| <p>Blue Cross was a much better system than Green Shield.</p> |
| <p>Deduction is ridiculous</p> |
| <p>In this case, it was dental approval. I had chipped the side off a molar and needed repair. Dentist sent away for approval, but I got a letter back saying they needed more information, pictures etc. Luckily it wasn't hurting!</p> |
| <p>"I would have preferred staying with Blue Cross, but I was under the impression that we had NO choice. It was Green Shield or go private. There was no mention of this ""johnson"" plan or that it was sponsored by the BCRTA. I began requesting written responses with my claims and paper submissions. Mostly they ignore my requets. My mother at 80-90 could never get explanations from them even when she phone - I could never use their stupid website - nothing ever worked. I don't they have ever reimbursed me much of anything. Ridiculous! "</p> |
| <p>Never got a "real" person, just a voice that asked me questions; never answering any of mine.</p> |
| <p>We had Blue Cross before Green Shield. Under Blue Cross we had \$1400 every four years if needed. Blue Cross paid up to \$1400 per claim not required TWO hearing aid purchases to payout\$1400. Also Blue Cross had FIXED four year windows, not floating windows based on the date of the last claim. One could claim \$1400 in the last month of year four and claim \$1400 in the next month i.e. the first month of the next 4 years. Green Shield start the 4 year window at the 1st month of the year in which the claim was made. Green shield pays less than \$1400 if only one aid is purchased. Vision care works the same way. Blue Cross fixed windows. Green Shield window onlly opens after a claim is made which can reduce the # and amount of payouts.</p> |
| <p>phone EHC providers are Canadians who share our values, courtesy and protocol Other providers often out-source this kind of service to India Phillipines etc.</p> |
| <p>vision care limit is too low - as vision changes with age, more expensive eyeglass prescriptions and more frequent changes are needed. \$300 over 2 yrs doesn't help very much.</p> |
| <p>Unhelpful; misinformation, ill-informed; disrespectful, impatient. I never experience this attitude in any dealings with Blue Cross.</p> |

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| <p>excellent response from people talked to but not sure why foot care is not covered. dental attention (eg cleaning) was reduced during covid.</p> |
| <p>go back to a local co. blue cross. easy local access!</p> |
| <p>I would like broader coverage. We have medoc Johnson plan. Are there any combination plans. We would like more coverage for massage, physio, acupuncture. We would like more coverage for dental. Currently on the higher cost dental plan.</p> |
| <p>I think we had a better plan with Blue Cross</p> |
| <p>I've always used BCAA for travel medical, but may look in to Johnson now for their travel options for medical coverage and also now the Medoc/Johnson EH coverage too. Thanks for this survey, it helped to remind me to "update" things! and review my coverages.</p> |
| <p>I was told "well I don't get that coverage either and have to pay for it myself too"</p> |
| <p>challenging to get past the sales dept. After several attempts went through TPP and had success. After operation many forms for Dr. to fill in - subsequently items were not covered.</p> |
| <p>Too expensive! Pay about \$1000.00 per year and have a \$200 deduction for \$500 of drugs. I'm losing. That is not giving me any benefit.</p> |
| <p>not happy with cost for paramedical. We want a comparison between plans.</p> |
| <p>I hardly use the plan due to good health. The \$200 deductible is too high. I don't spend enough yearly to make it past the \$200. Better vision and dental benefits would be great. We were told it would be less expensive switching to GSC. Not so! There has to be a better plan than GSC and blue cross.</p> |
| <p>The people tried to help but I think Green Shield just doesn't cover as much as it should especially as we age.</p> |
| <p>I have had agents that offered little support or info and in one instance in particular, others who worked with me to figure out what had happened and to rectify the situation.</p> |
| <p>long waiting time. sometimes need to call again regarding the same issue</p> |
| <p>Like Blue Cross - had travel medical. Prestige adding days very expensive</p> |
| <p>1) Live person on the phone often not helpful. I've not had information I want. (2) Also, income tax receipts on website are often in error. I have had to find alternative ways to get medical expense receipts. (3) Plan costs increase so much every year - far exceed cost of living!</p> |
| <p>Claim form should be available online with place for more than 6 claims. I create my own form so I don't have to keep repeating the same info over and over. The form they send us back is really printed small so hard to read. Codes don't give reasons for denying many claims.</p> |
| <p>I like Blue Cross - better coverage for dental and my needs (massage therapy)</p> |

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| <p>I was in certified rehab section of a fraser health care facility. When I applied to have the cost reimbursed, it was initially denied. The ground for which my claim was denied by green shield was their assertion that this venue was not delivering rehab. Despite written documentation that I was a patient in the rehab section. Green Shield maintained that I was in convalescent care rather than rehab. I had to apply THREE separate times before my claim was finally granted.</p> |
| <p>I would have like to stay with Blue Cross!</p> |
| <p>I was not happy my plan did not cover 2 shingles vaccines (shingrix) and one 1 dental cleaning per year.</p> |
| <p>My grandchildren lived with me for several years. The EH cost more than the service. It was very expensive. I was shocked, quite frankly.</p> |
| <p>Coverage for orthotics is minimal as is coverage for physio</p> |
| <p>I got tired of making explanations to someone who didn't have a clue only to have to deal with callbacks. Terrible decision by TPP!</p> |
| <p>What benefit would I get from changing and why Johnson over Blue Cross.</p> |
| <p>we have been quite well so may not be a good example. But as we age it may become more important for us.</p> |
| <p>I pay for both plans but I find Green Shield provides much better coverage than Johnson. Johnson pays less towards hearing aids etc. and they have a longer time allowed between purchases. There are a lot of prescriptions not covered by Johnson. I keep Johnson because of the great travel insurance.</p> |
| <p>Trying to obtain medication for "unlisted" medication is honourous</p> |
| <p>Some representatives have been helpful professional yet friendly. Others have refused to tell me the level of coverage, refused to let me speak to a manager, been curt, told me my KFO was too expensive and been very curt and rude. It has happened on two occasions. I have been told I will find out the coverage level when I submit a claim and not before. On one occasion I phoned back the next day and the person without hesitation answered my question.</p> |
| <p>If I could have separated the above comments to phone and email, my responses would have been different. Automated phone answering system is FRUSTRATING. Difficult to reach a real person... until I connected with Tiffany and she 'heard' me. The restrictions of our plan limits what can be done to help. However, Tiffany deserves a 5 on your above scale. She has allowed me to email her directly with questions and sends me an answer as soon as she's able. I'm able to take my time reading the response & if I need further, I can email her and request a followup phone call. AMAZING! That is true support.</p> |
| <p>"I was extremely unhappy with Green Shield's promotion of phoning a doctor and paying a ""speical"" rate. I'm glad BCRTA's asked for this practice to be stopped. "</p> |
| <p>Having been with Blue Cross for decades, GREENSHIELDS GETS a D grade.</p> |
| <p>Being diabetic and knowing that foot care I very important, I asked if GS provided support for monthly foot care done by a registered nurse. The answer was no.</p> |

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| I was not aware there were issues with GSC Coverage. What percentage of BCRTA members are unhappy with GSC? |
| They only provided assistance after struggle |
| "for years my husband and i both on blue cross coverage and were very satisfied. Now both employers have switched, me to GSC and my husband to Manulife. We are not satisfied with either plans. " |
| When searching at the last minute my claim the results weren't showing through right way - the person couldn't explain, the delay. I found out later that it can take up to a month for all items to be recorded on the statement of all claims. I know now to not leave it to the last minute. complete claims at least a month before the deadline. |
| GSS is so bad I wonder if I even get benefits to equal premium costs. Terrible. I want, no, NEED a change |
| I have had several interactions. Generally they have been OK. Have run into EHC provider who didnt seem to interested or care about my circumstances. |
| As a BCRTA member I appreciate the work that goes into these arrangements. Fortunately, about my only needs are prescriptions. |
| when i was with BLue Cross I never had to fil in forms get paper work done by my family doctor or make any calls to Blue Cross, or Pharmacare. |
| in most cases claim eventually passed through but only after many attempts and several people and departments and paper claims not handled well did not see what was sent |
| still feel that we should have been consulted before the switch from PBC to GSC |
| When i call for help the rep is helpful but not very friendly |
| "I spend alot of money between the monthly premiums and meeting the deductible. First 250 is out of my pocket before I can start getting at most 80% per cent back. This month I will spend 600 at a private skin cancer clinic and I can only expet to get back what I claim in income tax. i dont expect to have free medicate but I worry for thos diabetics who have higher private costs. " |
| It seems you have to spend time phoning or writing to issue resolved. When I had breast cancer with Blue Cross there was no problem filling my claims. |
| dental plan is virtually useless |
| not happy with dental |
| refusal to provide a reasonable explanation and clarification |
| satisfied with the EHC but not the dental |
| premiums are high and have increased yearly change to worse from PBC |
| Blue cross so much better than GSC |

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| slow to get coverage with GSC |
| ultimately GSC does provide the coverage but figuring out their processed and finding information is frustrating especially if not good on computer. Need help in making claim. |
| just dissappointed when asking if coverage for cataracts, not available |
| I am happy with GSC its better than PBC |
| Was happy with BLue Cross so didnt know change to GSC. so much easier to stay where you have placed us not sure of difference between Johnson and GSC |
| Their monthly emails about how to keep healthy are a waste of time and money. I never use them. If a drug is available over the counter, the prescription will not be paid. If a new prescription, only 30 days will be supplied in spite of the prescription being made out for 90 days. Mixtures of two different medications will not be covered. |
| The timezone difference is a problem. You must make your calls in the am. You often get young people who don't understand my issues and refuse to go into my file. It would be so much easier to deal with someone like Blue Cross that is in our own province and understands what we need. |
| Prestige told me on the phone that we could switch from Green shield and Medoc to Prestige at the last minute if my husband had something come up to do with change in his health status within two weeks of our trip.. It turned out that it was impossible to change quickly . . . we would have to wait for a new month to become a Prestige member and that was no help so we travelled without proper insurance. It would be very helpful if these changes could be made quickly. |
| Initially, many e-mailed claims were rejected. After an extensive telephone conversation the claims were approved. Green Shield refused some claims based on questionable receipts. My wife resubmitted Visa bill receipts as proof of claims. Then the claims were approved !?!?!? |
| I hate Green Shield! |