

If you believe that your claim for benefits to the IBEW Local 353 Trust Funds has been improperly denied or administered, you as a member of the IBEW Local 353 Plans may have the right to appeal that decision. You may submit an appeal if you believe that your claim was not administered in accordance with the rules, regulations, and policies of the IBEW Local 353 Trust Funds.

Here are the 5 steps to submitting an appeal:

Step 1:

Be sure to check your benefit booklet to make sure that item that you believe should be covered is actually covered under the benefit plan. While the plan is very comprehensive, it doesn't cover everything medical related and there are maximum allowable expenses under some areas of the plan.

Canada Life issues an "explanation of benefits" for each claim they review. Reading your explanation of benefits may shed some light on why the claim was not paid (or not paid in full). You should act on any requests for further information Canada Life may have made.

If after reviewing your explanation of benefits and verifying coverage you still believe the claim should have been paid, contact Canada Life to appeal their decision directly. Canada Life does make administrative errors from time to time, and if they have made an error, they will correct it when brought to their attention. They also may decline a claim if not enough information has been provided. If you appeal and provide more information, they may reverse their decision without the need for a lengthier appeal process.

TEIBAS can also assist with straight forward claim processing errors, or assistance in understanding why your claim may have been denied. You can contact TEIBAS for assistance at 416-637-6789 or toll-free 1-800-267-0602 or emailing us at members@teibas.com. We are happy to assist you.

If after contacting TEIBAS and/or Canada Life and checking your coverage in the applicable benefit booklet, you are still not satisfied, then you can submit an appeal to the Board of Trustees of the IBEW Local 353 Trust Funds. For appeals that concern the interpretation of Trust Fund Plan document provisions or rules you can submit an appeal directly to the Board of Trustees without going through Canada Life. We encourage you to appeal as soon as possible.

Step 2:

If you have completed Step 1 and would still like to submit an appeal, you'll have to submit your appeal in writing and include a signed Consent to Disclose Personal Information Form (see attached) addressed to the Board of Trustees. You can mail or drop off your appeal in person to TEIBAS' offices at the following address:

TEIBAS

C/O Chief Executive Officer

110 Sheppard Avenue East, Suite 705, Toronto ON M2N 6Y8

Step 2 continued:

You can also email your appeal to members@teibas.com but as a reminder, email isn't considered a secure form of communication. Any IBEW Local 353 union office would also be happy to assist you in forwarding your appeal in confidence to TEIBAS.

Your written appeal needs to include:

- Your name, date of birth, and mailing address,
- Copies of any letters or explanation of benefits from the insurer (if applicable),
- Your explanation of the facts, and
- Why you think the declined claim should be approved based on the facts or what parts of the relevant Trust Fund documents that you feel have been misinterpreted or ignored.

Include all information and relevant medical documents (if applicable) that you feel will help your case when the Trustees are considering your appeal. Remember to complete and sign the Consent to Disclose Personal Information Form attached to this guide with your appeal.

A reminder that the Trustees must apply the terms of all relevant Trust Fund documents and can't approve benefits that are outside of them. If your appeal is seeking benefits that are not provided for in the relevant Trust Fund documents your appeal will be denied by the Trustees.

Step 3:

We'll reach out to you if we have any questions regarding your appeal or if you need to provide additional information. Once the review is completed, your appeal will be forwarded to the IBEW Local 353 Board of Trustees' Benefits Committee (the Benefits Committee), outlining TEIBAS' review and analysis of the appeal. The Benefits Committee will review the interpretation and might discuss it with Canada Life, their Benefits' Consultant, or ask for a legal review. After this review, they will forward the appeal, along with any further information and a recommendation to the Board of Trustees for consideration.

Step 4:

The Board of Trustees will review your appeal, including any recommendations made by TEIBAS and/or the Benefits Committee. Once the Board of Trustees reaches a decision, they will notify TEIBAS to communicate the decision of your appeal including their reasons for the decision.

Step 5:

You will be notified in writing of the Board's decision, and the Board's decision is final.

NOTE: The Board of Trustees can't overrule adjudication decisions in respect of insured benefits. Insured benefits are life insurance, accidental death and dismemberment, out of province medical insurance, critical illness, Teladoc, the member assistance plan and certain long-term disability claims.

Questions about submitting an appeal?

You can email us at members@teibas.com or call us at 416-637-6789, toll-free: 1-800-267-0602.

We're here to help!

Disclaimer: This factsheet was prepared on behalf of the Trustees of the Local 353 IBEW Trust Funds. It provides summary information about the Local 353 Health and Welfare, Supplementary Unemployment Benefit and Pension Plans (the Plans) in plain language. This publication isn't intended to provide legal advice. If there is any discrepancy between this document and the legal documents that govern the plans, the legal documents will apply. The Trustees expect to maintain these benefit plans indefinitely. However, they reserve the right to change or cancel any or all benefits under the Plans for active and retired members, and their survivors and dependents.