

I spend 1500 per month on diabetic supplies. Because of the Canada Life fiasco I had to go 3 months with out my medications. Canada Life should be ashamed and whoever is responsible should be fired.





If doctor says name brand who is Canada Life to disapprove this. Why should we have to pay to have a long form filled by the expert? Just a wasted expense especially when it is not approved and doctor has to provide more justification.





I am a type 2 diabetic struggling to get my glucose under control and finally was making progress on Ozempic with 80% coverage when suddenly this week my coverage was denied, leaving me in total limbo and unable to control my glucose numbers because the medicine is unaffordable without coverage, no warning, no explanation, just denial!!! I am in a bit of shock over this as i need this medication to live!





I submitted two drug claims. One for \$203.88 of which I was reimbursed \$26.46. The second claim for \$220.73 for which I was reimbursed \$88.89. I have had the same prescriptions for years and have always been covered the 80% by SunLife with no hassle. The coverage with Canada life is atrocious. I am very unhappy with this change.





I received a letter early November stating I was offered a claim. I sent off my information and only received empty emails back. No conversation at all. I did after several tries to get my email yo a person a reply saying I had been paid last December. I checked my bank statement and there was no claim deposited in my account. I have never been paid my authorized payment and it appears there are no qualified persons handling these approved claims.





They want me to go to my Dr and get a BP "note". It says no where in the policy to get a Dr note. They keep trying to throw SunLife under the bus. SunLife always was on time and valued me as an honest customer.





Generic medication change is crazy. This never happened with Sunlife didn't need to send a picture of a receipt they trusted us. I'm a widow of an employee. None of this is easy for anyone. This was supposed to be a wonderful insurance company its nothing but stress. They are not equipped to handle thousands of employees or widows or widowers.





The pharmacist handling fees aren't covered as much, higher cost to us. I was refused a prescription fee because I ordered it too early. That is a first in like forever, I had never heard of such a thing.





My newborn is unable to breastfeed. We got a medical note from our doctor stating that we needed "to purchase and utilize a breast pump due to ongoing breastfeeding issues." Our baby was starving and unable to feed directly from the breast. A breast pump saved us, but we were told that because it is not due to a specific medical condition, we are not covered.





## Canada life was no help at all





The cost of my prescription medications has increased dramatically! I used to get 2 months at a time (my preference since some dosages change regularly). But now am forced to get 3 months at a time. My cheaper ones in the \$4-\$5 range for 2 months are now \$10-\$11 for 3 months. Huge change for a change that wasn't going to change our coverage! Also having to get 3 months at a time on the more expensive medications makes it difficult for those of us on a fixed income!





I just started a claim for foot care (toe nails cut) and I am astounded by the amount of paperwork required.
They (Canada Life) require a 5 page Nursing Care
Health Application Form with complete medical
history IN ADDITION to a prescription. I was prepared and got the prescription but did not expect to be blindsided by a ridiculous invasive past history form requiring my doctor to fill out. By the way, Canada Life won't cover the cost of the form! This is a complete waste of time, resources, paper and says a lot about why Sun Life was by far the better choice.

They just asked for receipts. This is only the beginning I am afraid to say. I am already paying much more for my prescriptions than previous. The year isn't up yet but it's going to be a couple hundred dollars more. What a joke, unfortunately not one that makes me laugh!!



I retired Apr 27, 2022. I was told that all Vacation and Compensation still in Peoplesoft would be automatically paid out after my retirement date. It is now coming up on 2 years since retiring and I still have not been paid out my vacation time. I call every 2-3 months since retiring but I'm always told there is nothing that can be done, and I have to wait for a Compensation Advisor to sign off on my file. They say I have no recourse but just have to be patient. Really? Their system is a joke. anything left on the books should have been automatically paid out immediately on my retirement date. No accountability.





I have MS and require physiotherapy twice a week to keep me mobile and not dependent on a walker or wheelchair. With our previous insurance they covered 80% for \$500 of claims, then nothing for \$500 to \$1000, and then 80% coverage for everything more than the \$1000 in claims. It meant that my physio was covered all year. With Canada Life I will run out of coverage after just a few months leaving me with no coverage for most of the year. I am retired and only get a small pension so I can't afford my treatments. This will leave me less mobile and less independent.



The change to Canada life is not great at all as coverage is less as dispensing fees are only \$8 now per prescription. If you live in rural Canada and not close to a Walmart or Costco you pay more because of where you live discrimination in my opinion. I called the union on this and a féllow told me shop at Walmart or Costco I am 100 plus km oneway from either and then said by them online. That was a poor response I felt as this should have been caught earlier and rural members considered we all don't live or work in large centers. Major loss and extra unforeseen cost in my opinion for the members. The extra cost is \$8-\$12 per prescription now. I have found that many members do not know about the increase also when I mention it to them they say I thought it was higher. Also make sure your regular prescriptions get 3 months filled as they have only dispensing fees for every 3 months otherwise \$0 dispensing fees paid. Also a ice therapy machine was covered u nder sun life but for Canada life is not covered. When you email Canada life as you wait hours on the phone they never get back to you as its been 3 weeks? They may have gained on a few items but majority need prescriptions and all Canadians are not treated fairly due to where they live its a sad day for retires and employees with the failure of Canada life



I have been trying to get reimbursed for a cpap machine since June. I have submitted 2 paper claims, waited endless hours on the phone only to be cut off. In September I actually got through on The phone to a representative who assured me that she had located the info they needed and referred that to the appropriate department for reimbursement. She said it would take about a week and she would even phone back the next week to confirm. I never heard from them again- that was over 2 months ago. On November 1st I emailed Canada life thinking I may get a quicker response than waiting all that time on the phone. Today is the 17th and I have not yet gotten a response. It is ironic that there was an announcement increasing some of our benefits at a time when we don't seem able to secure any benefits. I know several other people who are experiencing the same issues as I am so I know this is widespread. I can understand there being a few issues with a transition to a new provider but this certainly seems to be an unreasonable response. I hope this does not become the debacle that was the Phoenix pay system and continue on endlessly. In decades of dealing with Sunlife I never once had any difficulty!





I went to pick up my two monthly medications and was told my coverage had been suspended. They wanted my provincial pharacare application. My yearly total of prescriptions costs to do not meet anywhere near what is needed to get any benefits from the provincial program, as I am not low income or have high amounts of drug costs annually. I was not notified by Canada life that they needed this. They have been covering my medications since the transition. And now I have to send them proof of a program enrollment to which I cannot use. Additionally I require one medication daily to help me function and live my life. Very frustrating and poorly run so far.





I sent in a claim for \$105 for a doctor in Cuba who treated me on October 29 for a sprained ankle. The claim was mailed on November 7th. I tried to do the original online but the MSH PSHCP website says I can't register because my email is not the one I use for Canada Life, it is the same one. I try every day to register to check on the claim status and still can't. Today, I sat on hold for an hour trying to speak to someone at MSH but gave up. Please help me find out about my claim that was sent with the original bill I paid and the Doctor report. I also have Medoc travel insurance but can't submit it to them until I receive a response from MSH, who I assume should cover the whole amount.



I was able to register with Canada Life in July with no problems. My medication prescriptions from my pharmacy are paid directly by Canada Life. There is no direct payment to my Optometrist, so I will need to send in the bill to Canada Life online, I have not seen the Optometrist since July so I dont know if there will be a problem getting reimbursed. My only problem is that I am unable to contact Canada Life for information re RSV vaccine. I sent 3 texts online using Canada Life website: no replies after one month. Calling by phone requires a minimum 30 minute wait which I refuse to do.





I am a single mother of 4 and have yet to be able to even enrol in the new health plan! I pay for it, yet I can't use it. There truly are no words for how atrocious this is.





I received a letter that I have to take to my doctor to prove why a generic brand medication doesn't work for me. My doctor has already signed off on a no substitute. I feel that should suffice and why is personal medical information. In addition to this doctors have no time in constantly having to provide more information. If this is the case, perhaps my monthly PSHCP deduction should be less as well.





I am finding there is no phone service anymore to get help with questions. And now they send a letter saying they will not cover brand names of my medications and that you will not be covered for the difference between brand name and generic brand. They will only pay for generic brands.





## I require a number of prescription medications each month! And the cost out of pocket to cover them has gone up over double.





I have been trying to get my son added to my plan since July and Canada Life has not replied to any of my emails or followed up with my request to date.





## Medication filled by generic brands only. Not full coverage.





I'm on vacation in Arizona and have been sick and spent multiple hours on hold for MSH international only to be cut off or Ive asked for a callback and it's been 7 days and still no call back This is total incompetence on Canada Life's part and needs to be rectified





The transition has been terrible!! I had 2 prescriptions that Sunlife filled no problem and no questions. They are now being denied by Canada life and they cost about 150 every 3 months. Also my inhaler can no longer be brand name and must be switched to generic which before sunlife had also approved the brand name. I feel like I have to jump through hoops for everything. Long wait times on the phone as well.





I'd like to share my experience dealing with Canada Life Insurance, which has been quite different from my positive interactions with Sun Life. While Sun Life has consistently approved my claims without any issues, I've encountered challenges with Canada Life. They've rejected reimbursement for several practitioner appointments and prescription medications. This has been confusing and frustrating, especially considering that Sun Life has never turned down any of my claims. The contrast in experiences has raised concerns for me, prompting questions about why Canada Life is rejecting certain claims that Sun Life readily accepts.





I have talk to Canada Life several times and sent actual forms for processing and have expltha we do not have any other insurance. My claims have went through but my wife's have not because they say we have other insurance. The pharmacy said they show no other insurance. How many time do I have to call? Why bother trying to file another claim?





I haven't had a good experience with them. It was challenging trying to talk with someone during the enrollment. The coverage for my prescriptions seems to have decreased, but I have to do more research. Dental is atrocious. They my wife for Xrays previous dental history, basically "did you really need this" type of thing.





I am getting substantially less covered on my prescriptions since Canada Life took over on the claim that the dispensing fee is too high. They also shorting the dental plan. Bill submitted was \$315 and they deemed that only \$300.50 was eligible then reimbursed 90% of that. So it isn't a lot but it is enough to slowly affect members





When we were still part of a well ran, unbroke healthcare plan called Sun Life. My child chipped his tooth. Then 10 days later our coverage was switched to Canada Life Insurance. Today, 4 months later I have done nothing but send documentation in to Canada Life, the same information, over and over again. This is wasting everyone's time. Still waiting for the Reimbursement! NO MORE DELAYS NO MORE EXCUSES





I've had nothing but problems with a couple of claims for my husband. I ordered his glasses on Zenni.com under my account. I keep telling Canada Life that this is for my husband not for me. They used the rest of my eye glass allotment to pay for my husband's claim. I even sent his prescription and receipt showing that the prescription is my husband's and not mine. They don't seem to understand and they haven't paid me the difference. Also my husband had a stroke over a year ago, his doctor sent him to a cardiac physio therapy doctor, Canada Life refuses to pay for it because it's a group therapy. Calling Canada Life was useless, they told me to resubmit the claims, it didn't help.





I consistently have trouble trying to get info from Canada Life. Once i did get thru on the phone and talked to a nice lady for half an hour; most of time she was consulting someone else about my problem. I try online as well but there is no reply on the chat line. I was refused payment for my osteopath that i had seen before using Sunlife. Then when i tried to get an estimate from Canadalife to see if they would accept a different osteopath i was sent a payment! I sent a letter explaining the problem but no reply except online a refusal to pay. Frustrating!



I noticed that my bills for prescription refills got bigger. 5-6\$ each for both me and my husband. I had to investigate myself and found that they changed the cover. They only reimburse 80% of the dispensing fee up to 8\$! And not only that, it would be only 5 times per year. What? Have they seen the prices for dispensing your pills? It is 12-15\$ and it is not personal only place that has lower foo is Costoo. negotiable! The only place that has lower fee is Costco pharmacy. Not everyone has a chance or time to go to that pharmacy. I cannot just go to the pharmacy that is convenient for me, because I will be paying almost double for the pills comparing to what I had before. I also have to change my prescription to have 90 day supply instead of going monthly, because they would only cover 5 times per year.



I recently needed to refill my son's prescription for ADD medication, which is costly at over \$100.00 per month. When i went to pay, I was dismayed to find that, what used to be covered at 80%, was completely denied. As a single parent to 4 children, this was an extra amount I did not budget for. On November 2, 2023, I resubmitted the cost using the website submission function. I have yet to receive my reimbursement or an explanation as to why this medication is no longer eligible. When I recently called to enquire about the prescription, the automated system said it would take 20 days to be processed. I have used the app when submititng dental claims and they have always been processed, and the reimbursement received, within 2 days.



My psychologist has tried to put through my appointments so many times but it never works. I have to put it through on my side. I have two benefits (one through my dad as I have a disability and do not yet have indeterminant). She has tried to call Canada Life but they were not helpful. They gave her instructions but it did not work. I now receive the invoice for psychology, speech therapy and massage therapist but my dad has to put it through first then I put the remaining amount in. I don't see why my psychologist cannot submit it. I don't know if it's a Canada Life issue but it should be fixed. She should be able to submit. My pharmacy and dentist have been able to submit.





Canada life has decided to put their own caps on what they're willing to reimburse 80% of with no reason posted. For example, my therapy session went up in price by \$15, Canada life refuses to reimburse me 80% of the actual cost of my session which is \$225. They will only reimburse 80% of \$210 because that's what they think therapists should charge. This is not acceptable, I have no say in what they charge and should not be forced to find someone new to try and trust when I've been seeing the same person for over 2 years with a rapport. Canada life has no authority to cap what providers charge and should not make patients suffer. The mandatory generic drug substitution has also caused issue and stress as I have medication I cannot be on generic for and have gotten no response from Canada life as to whether they will accept my physicians filled out form or not. I have been requesting this information since July of 2023 with no response. I don't know if I will be able to afford this medication without insurance help, which is vital to my health.





Canada life has refused to explain why they are denying (or approving but only paying "\$0") several claims. On some they kept moving the goalposts, but now they won't respond to email or answer their phone. They also messed up the transfer, and my wife is still not properly set up for dental somehow, even though they were before. I'm several thousand dollars in the hole because they refuse to tell me what they need.





I have had weird denied coverage for my dependants one time pay next time not and back and forth. As well as had to call Canada life about prescription drug coverage for my spouse and dependant not showing as covered from pharmacy end but showing as covered on the site. If I need to pay out of pocket it will be over \$1000 each time for the medications my husband and son needs. I do not have that kinda of money. My benefits worked great when first enrolled and the suddenly it changed.





I have been unable to sign in to Canada Life's website since day ONE. Each time I try, their page tells me "it's not your fault, it's ours". I have phoned them numerous times (the latest being two days ago) to advise them I still haven't been able to log on (for the FIRST time) and that I'm not happy with the serious lack of response to this problem. Each time I call, the person on the other end tells me that they're working on it. On the latest call, I told them I'm fed up and that I want to speak to their manager/supervisor. I was then told that they'd escalate the call to the team leader and that I'd hear an answer back within 24 hours. Well, that hasn't happened yet. I am totally unimpressed. After having to wait 3 1/2 years to have my Phoenix issues resolved, I sure as hell am not waiting the same amount of time for this problem to be resolved!





Canada Life stopped approving claims for my life supporting medication and prescriptions for diabetes and insulin therapy. I also wear a continuous glucose monitor which they do not cover. In previous years I never had any issues at the pharmacy with having my medications covered. I am a First Nations woman with treaty coverage as my secondary coverage. I have never required coverage under the provincial drug program. Sunlife never asked me for information if I had secondary coverage or mandated that I enroll in the provincial drug program. Suddenly at the end of September my claims stopped being approved at the pharmacy with Canada Life, they demanded I apply for coverage under the provincial drug program. I was told even if I'm treaty status, Canada Life would be asking for this form. It has taken over a month of weekly prescriptions being denied before the letter from the provincial drug program came in. My medications were still being denied even after my pharmacy submitted the letter for a program that I don't require enrolment within. I am concerned I am going to be paying deductible under a plan and losing a part of my tax return due to Canada Life.





My wife was taking medications that were designated as brand name and thus... not being generic will not be covered by the plan. If she develops a reaction to the generic replacement, only then will it be covered the 80%. Talk about sending the canaries down the mine shaft?





# Canada Life is making money off the backs of public service workers and public service retirees. The Treasury Board has gone too far this time





Canada Life doesn't cover as much as Sunlife did for retirees but when they cover the fees, paying is done promptly. It's very hard to get through the phone lines and they have alot of new employees that lacked training (they have a hard time answering questions). hope the service will get better.





Since the transition I have been paying more out of pocket for my multiple monthly prescriptions. I was also recently diagnosed with sleep apnea and purchased my CPAP machine in October. It took almost 3 weeks to be reimbursed and when I received my money, I was surprised to find out that I didn't réceive the full 80% as there was a price limit as to was reasonable and necessary for the machine and supplies. I'm a single income home and the transition to Canada Life has been financially difficult for me



Our medication costs have doubled.





...this change was not as advertised as as usual the government took the lowest bid and did not take into account the employees of the public service.





I have spent multiple times on hold well over an hour. My pharmacist as advised me that canada life only allows 5 refills a year and I have a monthly Rx that needs filling so I have to pay for 3 months at a time The out of pocket is higher





Canada Life wants documentation from them before processing my claim. I contacted Manitoba Health and they told me they are currently running 8 we eks plus behind in processing claims!!!! I am stuck. Who is going to pay the interest charged on my credit card for the eyeglasses?





Lost my coverage for Actemra injections causing out of pocket costs of 1700. a month. My specialist had to fight for me after I had spent 3 months just trying to get someone to answer my phone calls! I'm still waiting for reimbursement! My savings account is empty from just paying my medication costs!





Switching over to Canada Life has not been great for me! Claims for medications that i have had for years, suddenly being denied. Reimbursement amounts much lower than they used to be! Frustrating!





#### This is just Phoenix all over again.





### Still waiting for my reimbursement for my eye exam in early August.





## I have various prescription expenses that have been denied and have racked up over \$1000 in coverage I'm waiting for a payout on...





this so smacks of Phoenix again to me. As reference to Canada Life I have tried via email, phone and chat.. anyway I can get them but to no avail. I've never actually spoken to anyone from Canada Life, the phone gets disconnected or I'm told they'll respond to my emails which never happens. I have been waiting for months now to speak to someone in regards to a foot service I receive and have received monthly since I broke my leg at work in 2015. Since then I need monthly care on my feet as a result of the damage to the leg. And now with Canada life all of a sudden this service is no longer accepted. So does that mean when the website said no services will be changed that was a lie? Because clearly I'm not receiving the same service.





Super disappointed in the service (non service) of Canada Life. Creates a lot of anxiety on what is going to be covered and for what amt regarding my monthly medications for my chronic illness related to my heart. Also have been trying to get a written response or call back from Canada Life for the past 2 months regarding "out of country" travel insurance.
I've called 5 times to the call centre and each time,
the agent tells me they will have the operations
Manager (Anne) respond to my enquiry. No call backs
or returned messages. Pathetic customer service and
just creates me more worry/anxiety (that I dont need
for sure) - just so that I can confirm medical coverage
for my uncoming vacation with my wife. Ush for my upcoming vacation with my wife. Ugh... so so frustrating.





I recently received a letter from Canada Life stating they will only reimburse for a generic brand medication, I don't understand how they can do this? I can apply to continue using the "name brand" but now have to make an appointment with the doctor to fill out the form plus pay a fee for the doctor to complete the form. I'm sure we don't get reimbursed for that and our time waiting to see a doctor. And if we do, would we ever see it? I put claims in beginning of October, it's been 6 weeks and still nothing. This has never happened before. It's actually really disgusting that this is what we are fighting for now, our health coverage that we are entitled to





My prescription are now changed to cheaper brands causing problems. Also have to pay more. Slow receiving money back. Phones never answered. I'm widow of a former employ of PSAC





I retired from the RCMP as an admin assistant on March 1, 2016. Yes, the first day of Phoenix. A nightmare for sure. Now, on to the Canada Life fiasco. My husband and I are now 77 years old, and while we were on Sun Life, our prescriptions cost the two of us, combined, \$17.00 per month, with our Seniors Health benefits and Sun Life benefits. I picked up our prescriptions this week, and paid \$107.00 for both of our month's prescriptions. How are we supposed to pay this, while living on pensions. I might as well cancel my medical plan, after retiring from my government job. Nice that my work is appreciated!



Our transition has been a nightmare from the beginning. Delays in repayment are ridiculous. I had dental surgery in September and still have no decision on repayment and its now November - like what the heck is going on? I have called Can Life 3 times and am told there is a 4 week delay... HELLO its been 8 weeks here and its \$1200. The lovely lady said she would try and mark the claim urgent but who knows if that will work. This is money I had to borrow from my LOC and am paying interest on with the thought that I would be reimbursed within days just as when we were aligned with Sun Life. But no chance. The game is called wait and see and I'm not enjoying it at all!



I tried to submit my son's prescription at the pharmacy for direct billing and the pharmacy said my son is not on my plan. The pharmacy called Canada Life and they said my children/dépendants were not transitioned onto the new plan and that I have to call them.





## Canada Life is a big Joke! My Meds cost \$16 and I paid \$6. I was paying \$2 out of \$80 with my former employer.





Filling prescriptions for myself and my husband cost \$130 MORE through Canada Life. As a retiree on a fixed income, this is a severe blow to our ability to exist comfortably.





I am a full time indeterminate employee with the federal government. Canadalife has told me that I no longer have dental coverage but I am covered and the Government confirms that I am. It has been over 1 month now and I still do not have any dental coverage.





I submitted a claim for 10 acupuncture treatment sessions but just got a small portion of the reimbursement. I called many time looking for an explaination, but can not get through.





My medication costs went from \$45 to \$260. I already take some generic medications. When my medication starts affecting me adversely? Who do i hold liable for my health? Trying to contact Canada life is an hours long process over the phone the last time i tried to contact them. Bring their reps in person to offices and explain processing. Am i suppose to pay \$260? I don't even know if i am signed up. I give up after waiting on the phone for a half an hour.





Most recent issue is rejecting the medication that had been billed directly by the pharmacy for more than two years and with no problém was covered by Sun Life. Due to some issues, I switched the pharmacy that doesn't do direct billing. The form filled out with all the documents and was rejected when submitted online. I have contested it but no response yet. We have enough on our plates and there was no need to add to the problems to solve by this irrational and hasty switch.





I sent a drug claim in (on line) along with pictures of the pharmacist receipts in Aug of 2023. I got a confirmation number and nothing was actioned. I then mailed a letter to the Winnipeg office and still nothing.





My husband and I are retired and on a fixed income. My husband takes a lot of medication and Canada Life doesn't pay the portion they say they will. Now we have to pay more out of pocket leaving us less money for other essentials.





Mine is not really transition but rather very upset about paying \$11.85 per prescription for dispensing fee. As a pensioner with many prescriptions to take per month I can't afford this extra fee. Sun Life was a way better company to deal with. I hate Canada Life.s.





I go to therapy regularly and submit my invoices immediately after my sessions. Since Canada Life became our new provider, my invoices were stuck in pending for months then all were declined without explanation. I have stopped going to therapy as I can not afford to attend without receiving my reimbursements sooner. Something needs to change!





States that we would receive \$500 in massage therapy, yet Canada life is only giving us \$400. Now having to pay out of pocket the money's that were supposed to be on our insurance.





## The drug I take will only be covered now if its generic, unless I get my doctor to fill out more paperwork. Ridiculous. I cannot take the generic drug





### I think that their offices just have some very unqualified, untrained individuals who don't know what they're doing.





I was on maternity leave from 2021 to august 2023. And in April 2023 I lost dental benefits with no explanation or way to fix the issue, any time I called either hr pay or the dental I wasn't given answers just run around or it's fixed (it wasnt) and would hr pay closed the file just for me to have to open a new ticket to start the process all over again a half hour later.





We are trying to get braces for our oldest daughter. We had the consult last week and now we will have to wait four plus months because of Canada Life can't coordinate my benefits with my spouses to make it less time. It had to be done though him and them myself. No one should have to wait that long. Does Canada Life not have enough employees to cover the needs out there?





In May I sent to Sunlife claim for medication. The submitted claim was held by Sunlife and then transferred to Canada Life for payment. This medication is \$815.00. I called Sunlife before transfer and they said it would be paid. Called again as had not received reimbursement to be told Sunlife sent the claim to Canada Life as they are now the providers. Called Canada Life 6 times now and no response. Actually have been hung up 3 times. Have resubmitted the claim 4 times electronically and still have not ben paid. May to November is now going on 7 months. Almost December where it will be soon new year and are they going to say no longer entitled to reimbursement.





After recognizing that Canada Life would cover the cost of a knee injection my husband, who is on the list for a replacement, received an injection in July. He paid \$600 at the pharmacy then I filled in the paperwork including the physicians agreement with the process and mailed it. To date there has been no update on the website regarding reimbursement. Phone calls have advised it is up to an hour on hold which is not possible with only a land line. Emails have advised the reply will be in 3 to 5 business days and have not received one to the two I sent. As pensioners \$600 is a lot of money so it would be nice to receive the portion that was agreed to in the contract.





I have been waiting for weeks to hear if Canada life will make an exception to approve an allergy medication for myself. I have done many additional forms with my dermatologist and the allergy clinic consultants. When I followed up with Canada life after the form was submitted September 25, 2023 on November 15, 2023, they had no record or understanding of anything on this and said they'd have to get back to me. Prior to this, I spent DAYS over the summer trying to just get a hold of someone on the phone there about an ambulance bill if it would be covered. I was denied as 'treat and release 'is not eligible, no exceptions. It took an unnecessary amount of time just to be able to access this as the site wouldn't work to show my benefits summary. The app doesn't work, the site always crashes and the staff can never be connected with. The automated message as of yesterday November 15, 2023 says processing is 20 BUSINESS DAYS behind, minimum. I've been waiting 38 business days so far.





Between my spouse and myself we have several prescription's .Canada life has not even come close to paying what Sun Life did as well a couple of specialty
Drugs they do not cover as well It is impossible to get an
explanation They just do not reply to you all I get is an
automated message. My druggist has no explanation
except to tell me they have complaints about Canada Life. My case is not as bad as a lot of others. also Canada
Life has come up with another way to short change us by
only paying prescription fees for part of the year. Not that
it makes a big difference but I refuse to cheer for
Winnipeg Jets as long as they have the Canada Life Emblem on their Jersey. and will boycott anything to do with Canada Life.





The transition reminds me of the Phoenix mess which has caused me extreme anxiety. Their website advises you to call them for assistance but there is no way you can talk to anyone. I have spent hours trying to get through to someone or even to get on hold - only to be hung up on repeatedly. It feels like their system is purposely set up to thwart payment or assistance. Both my husband and myself have had major health issues and I feel that we have been abandoned when trying to get any answers or assistance. Email is no better (unresponsive) and when instructions are provided by email they are vague, confusing, or missing steps.





Canada Life is not covering my sons prescriptions even though he is listed as a beneficiary online. I have called Canada Life over 40 times and never reached a single person. I have sent multiple emails and attempted the chat function on the website. The only way I was able to leave a voicemail was via Canada Life's fraud tip line, which I also did. I have yet to hear back from anyone at Canada Life. This has been going on for over 4 months. It is extremely frustrating and I have lost all trust in the program. I was floored when I heard we will continue to use Canada Life for our dental plans as well. Where is all of the money we pay every cheque going? Its certainly not to any staff salaries at Canada Life.



The Canada life transition has been a nightmare. As a father of 3 children, one of which disabled, I've had to wait over 2 months for claims(still waiting for my son's orthotics claim. There are no responses from the service and getting through the phone is now impossible. This will inevitably lead me to financial hardship if this level of service keeps up. Enough is enough!

Sincerely, A disheartened parent





The increased cost of dispensing fees, under Sun Life they were fully covered now under Canada Life they are not and are only half covered which is added burden and totally unnecessary, also there seems to be a lack of information on what changes have taken place with the switch - which programs have been dropped? modified?...





There are plenty of folks within our agency who are the sole providers to their families, and they simply won't survive with these extra costs forced upon them by Canada life.





Many delays, inconveniences, hoops to jump through, no opportunity to contact anyone by phone (can't even get into the queue), no responses to letter of complaint, no responses to any of my numerous emails.





I have been trying to contact the customer care centre for Canada life. I have been put on hold for more than 2 to 3 hours many times. And till now I have not been able to contact anyone of them.





Besides all the start up problems, last month I sent them an inquiry email to see if they could define if any the coverage for cardiac rehab. They sent an auto reply that they would reply in 48 hrs. Still waiting to hear 30 days later





Waited on line over two hours to try and figure out why the one line claim information had different breakdowns in what is covered than what actually was reimbursed. The woman answering the phone was snotty and not at all helpful. Total waste of time. She directed me to my pharmacy to figure it out





Canada Life on line platform wasn't prepared to take on this service and I'm surprised they didn't coordinate a smoother transition. There seemed to be a disconnect from their customer service and technical service lines. Like they are all working remotely on different systems. I could be wrong but printing my own paper certificate card does feel like a step backwards.





I had some trouble getting my positive enrolment to work and when I tried to contact Canada Life via e-mail, I got no response. So as we neared the deadline, I decided to call. I wait three hours on hold and got hung up on. Finally I contacted their ombudsperson via their website and suddenly everything was magically sorted out.





The transition has been tough and it's good that govt is recognizing the headache/heartache. So, what is to replace it? Go back to old system which worked for most of us in the past? If they are finding a new provider, what kind of stress do we have to endure? Some of us are too old to have more stress on us.





# I RECEIVED A LETTER SAYING THAT I'M NOT ELIGIBLE FOR MY BRAND NAME INSULIN WHY DO THEY HAVE THE RIGHT TO CHOOSE OVER WHAT A DOCTOR PRESCRIBES.





I have been trying to get some information about my plan and no one from Canada Life has gotten back to me. I have sent at least 3 email messages and called twice. Was told someone would get back to me. Still didn't get my response. I'm extremely frustrated.





my drug was refused out of no where and told i need to submit a pharmacare form after being on hold for 1.5 hours sent all that is and no response after a week. also the dispensing fee schedule is below just about every close pharmacy forcing me to eat the cost or drive 5 miles to a new pharmacy





What's written into our benefits plan is quite clear about our maximum amounts we're entitled too; we have a pot that defines how much were eligible for and it's quite clear we get reimbursed 80%. Canada life's policy of "determining what a reasonable and customary charge" for certain medical services and drugs has now changed this so we get reimbursed significantly less. My medications, physiotherapy, regular therapy all of these services I now have to budget so much more for and it's just completely unnecessary.

Canada life are the FACILITATORS of our benefits plan NOT the gate keepers of what we're entitled to. There are plenty of folks within our agency who are the sole providers to their families, and they simply won't survive with these extra costs forced upon them by Canada life.





As I very recently retired on October 25th, most of my claims pertain to the period up to that date: 1. The coverage for prescriptions appears to be less than what we received with Sunlife. 2. I submitted a claim for a Hearing aid in August and have yet to be paid. The first message indicated the receipt was not eligble, however there does not appear to be a way to attach documents to the claim after the initial submission so I mailed the copies to Winnipeg. The latest message is asking me to resubmit the claim! The claim is for over \$1,000. 3. The most aggravating, and disrespectful, aspect to this whole transition is that it is impossible to speak with anyone to discuss pending claims as the call is terminated after their messages are done. Emails receive no response. 4. My spouse has a dental claim pending approval, but I no longer can access the dental plan; I assume this is because Canada Life does not cover dental for retirees. Then where is this information? I received no notification of the transition away information? I received no notification of the transition away from CL for dental. It is in limbo somewhere and we have no idea if and when it will be covered.



My daughter with cerebral palsy needs a new wheelchair. it took months with the province of Saskatchewan to receive a letter covering the chair for \$2,500. The quote is over \$12,000. I sent a request by the insurance website to be told months after that they wanted more information. The web site didn't explain what needed to be done and I couldn't reach the call centre. Finally i received a letter requesting to fill out a questionnaire asking why a wheelchair when by daughter is an adult who will always be under our care and all of medical information is available. They only think that they needed it was to know how long ago we bought her wheelchair. The questionnaire requested that a doctor fill out some questions about her medical condition. Really! I sent all the information a month ago and I am still waiting for an answer. Soon it will be a year that we are in the process to request a new wheelchair between the delayed replied between the province and the insurance.





My spouse, who is also retired from Parks Canada, has been trying to reach Canada Life to add me to her medical insurance so a portion of my prescription drugs can be paid from her plan. But after calling numerous time, no one is getting back to her and it has been impossible to reach them. My pharmacist does not understand why we have to confirm our spouses involvement when it is all there on the previous insurance plan information. But they insist we have to talk to Canada Life to get back on the plan. My spouse has been retired for a year now and has not been able to talk to Canada Life. It has been very inconvenient. My plan does cover her prescriptions but I am not covered under her plan. I was before she retired. And we can't reach anyone at Canada Life to sort out the problems.





I was told that because I had been on non generic prescriptions for years (as many years as I have been a Public Servant), that I would be legacy protected into the new plan and not have to fill out forms with my doctor. I got form's yesterday to take to my doctor informing me that my non generic prescriptions will no longer be covered after December 2023. I cannot even get in to see my doctor to get these forms filled out in this timeframe my doctor to get these forms filled out in this timeframe.

And why am I having to provide personal medical details to an insurance company, when my doctor has been prescribing me these medications for years, they have always been covered in the past, and I was told that I would be legacied into the new plan. I was lied to and will now be stuck with a large medical bill if I want to continue taking the medication that I need. This is not acceptable!





In August, my wife bought the breast pump (CAD\$ 443.99) for our first baby. My wife got the full 100% reimbursement of 300 CAD from the Sunlife insurance very immediately within a week. Surprisingly until today I am waiting and waiting to reimburse the rest CAD 143.99 from Canadalife. Its a shame that Canadalife staff do not response to phone calls or emails. This is absolutely a disaster for the mental and physical health of public servants as a whole. Please force them to pay back those money than holding them for their growth.





The wording of the policy regarding the dispensary fee for prescription drugs is confusing. I have called to have it clarified & received two different responses -- when I can get through to ask the question. Recently, I called every day for two weeks + before reaching a person I could talk to. The second representative told me Canada Life only pays 80% on \$8 dispensary fees & wants drugstores to dispense me 2+ months of drugs at a time. I explained that it is rare our SK drugstores will dispense more than a month's worth (approximately) at a time.





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The transition to Canada life has increased significant stress in my life. I have a 5-year-old son who is fed through G-tube. He needs a special formula that needs to be fed through his G-tube. Canda Life is not reimbursing 80% of the actual cost. The carton cost is 124.24, they have reduced the price (based on the average price) to \$82.95 and they are reimbursing only \$66.36 (80% of the average price). For my son's formula, there is no substitution and with Sunlife Canada, i used to get 80% of the actual cost. I have tried calling Canada Life since the transition, no one ever received my call, (there was a message stating ""all agents are busy, please call back later"") no one is available on the chat option. After a few months, I got lucky that someone answered the phone (after being on hold for 3 hours), but there was no success in making my case. Also, I have to manually submit a claim online, with an extra form and scan the receipt, once I submit there is no confirmation number, and it is extremely hard to keep track. I am keeping track of everything in my notebook. So far I have claimed 6 claims of \$621 each and I have only been reimbursed \$700, where my claim is \$3672. Three claims have been rejected with no justification. I am under a lot of financial stress.



I have been negatively impacted by the transition to Canada Life. It is taking 4 weeks or more to process health claims, which is weeks longer than their own standard of 3-5 days. Quite often, my Visa bill has come due and I still have not received my reimbursement. Not only does this mean that I am out of pocket temporarily, it also means further delays if you are coordinating benefits with a spouse's plan. I was due for my eye exam, so I made an appointment with the provider I used 2 years ago, but when I arrived for my appointment, I was shocked to find out that my provider was not approved by Canada Life and that if I went ahead, I would not be reimbursed. I now have to call new providers to find out who has been approved as I was told that this was the case for several providers in my part of Edmonton. I will be traveling outside of Canada soon and require a 3 month extension on my medications. I contacted Canada Life via their Chat method over 2 weeks ago, and I have still yet to receive an answer. We leave in 10 days and certain of my medications have to be ordered in advance. This is very stressful having to worry about getting my medication on time.





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#### It's impossible to call and talk to a human at Canada Life





I have filled all relevant information as requested but to date have not had any response from Canada Life. We are expecting new health care cards but nothing to date!





For over a month, I've been trying to talk to a person at Canada Life, I haven't been able to connect. It's so frustrating for the whole family as my husband works for the federal government as well and has opted for the same coverage. The previous provider wasn't much better, but at least you could reach a live person plus they calculated the coverage correctly. For example, with the previuos carrier, generic medicine and massage will be fully covered. Now, there's always out-of-pocket. This is so frustrating! Is this how you want us to serve the Canadian public?





Both myself and my spouse are part of the pshcp, however Canada Life has not been coordinating my unpaid residuals for the 20% not covered under my plan for recent physio, chiropractic and eye exam claims. This despite me saw a CL rep in July who confirmed I had my account info correctly entered. I have subsequently tried calling the CL "customer service" line multiple times, as well as emailing CL. They replied to my email indicating they would contact me, but nothing months later. RE the calls, I mostly either got a message indicating the line was not taking more calls that day, or a message saying the hold time was over an hour. About 4 weeks ago I decided I'd wait on hold. I waited exactly 2 hours at which time a recording came on and said I would have to leave my contact info and CL would call me back in 2 business days. Still no call back! I have another back in 2 business days. Still no call back! I have another chiropractic claim to put in, and in desperation I have printed a word DOC that I plan to include with the copy of the invoice outlining the issue with the coordination of benefits and my efforts to sw CL, and requesting someone get in touch with me





## I went without my medications.

