

**Premium Withdrawal Dates**  
PAY CYCLE 1— 2017

January 18  
February 15  
March 29  
April 26  
May 24  
June 21  
July 19  
August 30  
September 27  
October 25  
November 22  
December 20

**Contact  
Information**

**Claim Inquiries:**

1.888.711.1119  
Mon—Fri  
8:30am—8:30pm

**Billing and Coverage  
Inquiries:**

1.866.768.1477  
Mon—Fri  
8:30am—4:30pm

**EFAP Inquiries:**

1.800.387.4765  
24 hours / 7 days

*Employer: Health Care Providers*

For all changes in your work  
hours, job/family status, address  
or contact details, please call  
1.866.768.1477 immediately



Visit our website: [healthcareproviders.ca](http://healthcareproviders.ca)