## Premium Withdrawal Dates PAY CYCLE 3 — 2017

January 20 February 17 March 31

April 28

May 26 June 23

July 21

August 18 September 29

October 27

November 24

December 22



## 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