GMS Health Benefits Claim Form:
Help us process your claim quickly

We’ve created this guideline to provide helpful tips for completing the GMS Health Benefit Claim form when submitting your claim. Completing the form properly ensures your claims are processed and reimbursed quickly. Don’t forget, you can also submit your claim online. Our online claim submission form is quick, easy, and available 24/7.

1. If you’re submitting a claim under a GMS Individual Health Plan this section must be completed by the policyholder. If you’re submitting a claim under a Group Plan, the employee or group member’s personal details should be provided in this section. Please ensure you have entered the current address and GMS ID number.

2. Complete this section in full if you or any other member of your family is entitled to benefits under another insurance plan.

Note: “Name of Insured” refers to the family member insured by another insurance provider.

“Insurer” is the name of the insurance company.

3. Check off the appropriate boxes and itemize the expenses by claimant. Provide all the information requested and remember to attach all original receipts to the claim form.

4. Sign and date the reverse side of the claim form.

IMPORTANT: Remember to attach any required physician referrals and keep a copy of the receipts for your records. Completing this claim form accurately helps us process your claims and reimburse you quickly. Feel free to contact us if you need help filling out this form.

office 306.352.7638
toll-free 1.800.667.3699
e-mail info@gms.ca