

## **GUIDE TO APPLYING FOR WEEKLY DISABILITY BENEFITS**

#### **WEEKLY DISABILITY BENEFIT**

In the event that you become totally disabled due to a non-occupational injury or sickness, you will receive a disability benefit, provided you are under the continual treatment of a registered Physician or Surgeon. Totally disabled shall mean the member is incapacitated to the extent that the member is not able to perform any and every duty of the member's occupation or employment.

To start your claim you must apply for both the Weekly Disability Benefit with Ellement and El Sickness with Service Canada as soon as you become disabled. Benefits for any one disability are payable from the 1<sup>st</sup> day of disability.

Your benefit will be payable for not more than 104 weeks during any one period of disability. Please note Weekly Disability Benefits are not payable during the period of time you are in receipt of El benefits.

Weekly Disability payments will be reduced by any income received from the Alberta Ironworkers Pension Trust Fund.

Weekly Disability claims must be submitted within 6 months of the commencement of disability.

If following a period of disability, you return to active work at least two weeks, a recurrence of this disability will be considered a new period of disability.

Disabilities are placed into two categories; "ACCIDENTAL INJURY" or "SICKNESS". ACCIDENTAL INJURY: By definition, "accidental injury" is the result of a specific unforeseen event which causes an injury sustained to the body resulting in a disability. An example includes breaking an arm. SICKNESS: A mental health disability, including Major Depression, is considered part of the definition of "Sickness". If a sickness disability results in hospitalization, it is treated the same as if it were an accidental injury. An example includes muscle strains or diseases.

### TO APPLY

- ➤ Have the entire Weekly Disability Benefits Package completed by yourself and your registered Physician. This can be obtained at your Local Union Office or through the Fund Office by phone (780) 452-5161 toll free (800-770-2998) or online www.abironworkers.ca
- Submit all required documentation from El Sickness, WCB or your Auto Insurance carrier (if applicable)

#### **TREATMENT CENTRES**

You may be eligible for the Weekly Disability Benefit during the period of time you are admitted into an inpatient treatment centre. You must be under the care of a registered Physician and must have a letter from the treatment centre submitted in addition to the Attending Physician's Statement. This letter must be completed on their letterhead to confirm the details of your stay including but not limited to: admission date, treatment plan, progress and the date you were discharged.



Ellement 1050-11150 Jasper Ave NW, Edmonton AB, T5K 0C7 Toll free: (800) 770-2998

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#### HOW WEEKLY DISABILITY BENEFITS COORDINATE WITH EI SICKNESS BENEFITS:

Under the terms of this plan, members are required to apply for El Sickness benefits. If your claim is accepted by El, then during the 1-week El Sickness waiting period, you may be eligible for benefits under this plan. A print out of your 'My Current Claim' webpage off your online My Service Canada Account can be used to confirm the dates of your El Sickness waiting period. Please note that the information from El must clearly state the dates of the waiting period and that it was served for Sickness benefits. If the information submitted is unclear, you will be requested to obtain clarification.

If you remain disabled after you have exhausted your 15 weeks of EI Sickness benefits, Weekly Disability benefits can continue. Updated medical information will be required along with additional EI Sickness information.

Once your EI Sickness claim is complete a copy of your final EI report processed off your online My Service Canada Account will be required and must be submitted with a copy of your 'My Current Claim' webpage showing that 15 weeks of Sickness benefits have been paid. This final report will state the dates of your last reporting period, the type of benefit it's for, and should state "You have now received the maximum benefits as allowed by EI law for the type of special benefits you have applied for".

My Service Canada Account

If your claim is not accepted by EI, then a copy of the declination letter would be required.

Here are some examples of what the EI Sickness information looks like:

My Service Canada Home> My Current Claim	a necount		My Paymen	t Details	Don't forget to Log out before leaving the sit-
My Current Claim		Don't forget to  Log out  before leaving the site	-		before leaving the six
	Terror se servi			ceived the maximum enefits you have ap	payments as allowed by Employment Insurance law for the plied for.
Start Date of Claim:	February 16, 2014		If you are unable to return to work, you may be entitled to other types of Employment Insurance		
Waiting Period:	February 16, 2014 to March 01, 2014		benefits. If you require further information, consult the Service Canada site at:		
Type of Benefit:	Sickness - major attached benefits		http://www.servicecanada.gc.ca/eng/sc/ei/index.shtml.  Or call 1 800 206-7218 during business hours and press "0" to speak to a Call Center Agent.		
Recovery Date:	February 11, 2169		OF Call 1 800 205	- 7216 during dusine	ss nours and press of to speak to a can center Agent.
Total Insurable Earnings:	\$20,562		These details are a result of the original processing of this report period.		
Benefit Rate:	\$514				
Federal Tax:	\$59				
Weeks of sickness benefits p	aid: 15		Week 1 of rep	orting period (	lune 08, 2014 to June 14, 2014)
Total Weeks Paid:	15		Benefit Rate:	\$514	
End Date of Claim:	February 14, 2015		Type of Benefit:	Sickness benefits	
ast Report Processed:	June 08, 2014 to June 21, 2014		Gross Amount:	\$333	
Last Report Processed on:	June 22, 2014		Deductions:		
			Earnings:	\$181	
Return to My Service Canada	Account home was		Tax:	\$15	
Return to My Service Canada	Account nome page		Net Amount Paid	: \$318	
		Date Modified: 2014-06-14	Week 2 of rep	orting period (	June 15, 2014 to June 21, 2014)
			Type of Benefit:	Sickness benefits	
			Gross Amount:	\$333	
			Deductions:	\$333	
			-	\$181	
			Earnings:	\$15	
			Tax:	477	
			Net Amount Paid	3310	
			View my report		



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#### **ELIGIBILITY**

To be eligible for Weekly Disability benefits you must be:

- > Totally Disabled
- > Eligible for benefits under this plan
- Under the continual treatment of a registered Physician or Surgeon

You will not qualify for Weekly Disability benefits if:

- You are making Self-Payments
- You have reached age 65 or older
- Your application was submitted after 6 months from the date of disability

## Weekly Disability benefits cannot be issued for:

- The benefit period paid by EI Sickness benefits
- > Any day on which you are not under the care of a registered Physician or Surgeon
- A disability caused by self-inflicted injury or illness
- A disability resulting from insurrection, war, service in the armed forces of any country, or participation in a riot
- The portion of a period of disability during which you are imprisoned in a penal institution or confined in a hospital, or similar institution, as a result of criminal proceedings
- Any period of disability, or portion thereof, during any Leave of Absence (including maternity leave) as defined in the General Provisions section of the benefit booklet, except where benefits are provided during the postnatal recovery period of maternity leave (Leave of Absence shall mean a period of time away from work mutually agreed to by you and your employer. In the case of maternity leave of absence, the leave shall begin and finish on dates agreed to by you and your employer or as required by Provincial or Federal law.)
- A disability which commences on or after the date a strike begins, except as outlined in the Master Policy; however, a member can fulfill his/her Qualifying Disability Period during a strike
- After 17 weeks (once the 15-week period of Employment Insurance Act benefits ends), for a disability resulting from any automobile accident whether the member is riding as a passenger or is a driver of a vehicle involved in the accident, or is a pedestrian, if the claimant can recover from a third party, the loss of income resulting from the accident. Vehicle shall mean any motorized vehicle or bicycle. If the circumstances of the automobile accident are such that the claimant is precluded from any recovery from a third party for the loss of income resulting to the claimant from the accident, then the claimant is eligible to receive this benefit provided that any Section B benefits paid or payable from an Automobile Insurance Policy (irrespective of whether the claimant has in place an Automobile Insurance Policy) shall be deducted from the amount of the benefit otherwise payable to the claimant
- On any day you did any kind of work for pay or profit



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#### **REQUIRED DOCUMENTATION**

#### THE WEEKLY DISABILITY BENEFITS PACKAGE

Below is a list of the documents within the Weekly Disability Benefits Package that must be completed in full – Without this information, your claim will be delayed until all of the information is received:

- ➤ The Weekly Disability Benefits Statement 3 pages
- ➤ The Attending Physician's Statement 3 pages
- Acknowledgement & Reimbursement Agreement
- Consent to Release
- Direct Deposit Form

In order for a claim to be established, the Attending Physician's Statement needs to be fully completed by your registered Physician or Surgeon. The Attending Physician's Statement <u>cannot</u> be substituted with a simple medical note. Psychologists, Chiropractors, or Social Workers are not considered to be Medical Doctors (M.D.) therefore they do not meet the qualifications required for completion of the Attending Physician's Statement.

### **WORKERS' COMPENSATION**

Weekly Disability benefits are not payable for a disability due to occupational injury or sickness.

If you have submitted a claim to Workers' Compensation and you have been declined, we will require a copy of your declination letter.

With regard to Workers' Compensation, you will also be required to complete a Consent to Release Information form for Funds Administrative Service Inc. to access any information with respect to your Workers' Compensation Claim.

### **SUBROGATION**

If you are entitled to recover compensation for loss of income, medical or dental expenses from a third party as a result of the incident which caused or contributed to the disability, for which benefits are paid or payable, the Insurer will be subrogated to all your rights of recovery for loss of income, to the extent of the sum of benefits paid or payable by the Insurer. You shall execute such documents as required by the Insurer. \*See benefit booklet for more information.



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