

CARPENTERS' AND MILLWRIGHTS' HEALTH & WELFARE BENEFIT TRUST FUND OF SASKATCHEWAN

GUIDE TO APPLYING FOR WEEKLY DISABILITY BENEFITS

WEEKLY DISABILITY BENEFIT

If you are disabled solely due to accidental bodily injury or sickness and are unable to do your regular work, you will be paid a disability benefit.

To start your claim, you must apply for both the Weekly Disability Benefit with Ellement Consulting Group and El Sickness with Service Canada as soon as you become disabled.

Weekly Disability benefit payments are payable from the first day of disability due to an accident, or from the 8th day of disability due to sickness; however, if you are hospitalized for at least 24 hours, benefits will commence on the first day of hospitalization. If you do not visit and are not treated by a registered Physician or Surgeon within the first three days of your disability, then the benefits will not start until the date you do visit the doctor. You must remain under the ongoing care of a registered Physician or Surgeon to be eligible for benefits. *Please note this means a 1 week waiting period may be applicable pending medical review.

The maximum benefit payable is 52 weeks including the benefit period covered by Employment Insurance. Please note Weekly Disability Benefits are not payable during the period of time you are in receipt of El Sickness benefits.

Weekly Disability claims must be submitted within 180 days of the commencement of disability.

Successive periods of total disability separated by less than one week of active work or availability for active work shall be considered as one 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) 5161 toll free (800-770-2998) or online www.ellement.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.





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HOW WEEKLY DISABILITY BENEFITS COORDINATE WITH ELSICKNESS BENEFITS:

Under the terms of this plan, members are required to apply for EI Sickness benefits. If your claim is accepted by EI, then during the 1-week EI 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 EI Sickness waiting period. Please note that the information from EI 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".

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:

| Home> My Current Claim My Current Claim | | Don't forget to Log out before leaving the site | My Payment Details | | Don't forget to Log out before leaving the sit |
|---|--|---|---|---|--|
| | | | | | |
| | Turning the page | | You have now re- | eived the maximum payments as allow | ved by Employment Insurance law for the |
| Start Date of Claim: | February 16, 2014 | | type of special bi | nefits you have applied for. | |
| Vaiting Period: | February 16, 2014 to March 01, 2014 | | If you are unable | to return to work, you may be entitle | d to other types of Employment Insurance |
| ype of Benefit: | Sickness – major attached benefits | | benefits. If you require further information, consult the Service Canada site at: http://www.servicecanada.gc.ca/eng/sc/ei/index.shtml | | |
| Recovery Date: | February 11, 2169 | | Or call 1 800 206 | 7218 during business hours and press | "0" to speak to a Call Center Agent. |
| Total Insurable Earnings: | \$20,562 | | These details are a | result of the original processing of th | s report period. |
| Benefit Rate: | \$514 | | | | |
| Federal Tax: | \$59 | | | | |
| Weeks of sickness benefits paid | 15 | | Appropriate the second continuous and according to the | orting period (June 08, 2014 | to June 14, 2014) |
| Total Weeks Paid: | 15 | | Benefit Rate: | \$514 | |
| nd Date of Claim: | February 14, 2015 | | Type of Benefit: | Sickness benefits | |
| ast Report Processed: | June 08, 2014 to June 21, 2014 | | Gross Amount: | \$333 | |
| ast Report Processed on: | June 22, 2014 | | Deductions: Earnings: | \$181 | |
| | | | Tax: | \$15 | |
| Return to My Service Canada Account home page | | | Net Amount Paid | 707 | |
| | Control of the State of the Sta | Date Modified: 2014-06-14 | | 15(666) | |
| | | | Week 2 of rep | orting period (June 15, 2014 | to June 21, 2014) |
| | | | Benefit Rate: | \$514 | |
| | | | Type of Benefit: | Sickness benefits | |
| | | | Gross Amount: | \$333 | |
| | | | | | |
| | | | Deductions: | | |
| | | | Deductions: Earnings: | \$181 | |
| | | | Earnings: Tax: | \$15 | |
| | | | Earnings: | \$15 | |
| | | | Earnings: Tax: | \$15 | |
| | | | Earnings: Tax: | \$15 | |



Phone: (780) 452-5161

Fax: (780) 452-5388



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ELIGIBILITY

To be eligible for Weekly Disability benefits you must be:

- 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 will be in receipt of benefits under any Workers Compensation Act (WCB) or Automobile Insurance Act
- Your application was submitted 180 days after the start of your disability

Weekly Disability benefits cannot be issued for:

- > The benefit period paid by EI Sickness benefits
- A disability caused by a purposely self-inflicted injury or illness
- A disability resulting from insurrection, rebellion, war, service in the armed forces of any country, or participation in a riot or civil commotion
- Any disability that results from you committing, or attempting to commit, an assault or criminal offence
- Periods of disability when you are on vacation and receiving full pay
- On any day you did any kind of work for pay or profit

Complications because of pregnancy are covered. However, if you are on a maternity leave of absence or could be placed on this type of leave (in accordance with relevant government legislation or the leave agreed upon by you and your employer), you will not be eligible for disability benefits during this time.

REQUIRED DOCUMENTATION

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.



Toll free: (800) 770-2998 Fax: (780) 452-5388



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WORKERS' COMPENSATION AND AUTOMOBILE INSURANCE

Weekly Disability benefits are not payable for a disability for which you are entitled to benefits under any Workers' Compensation Act or Automobile Insurance Act.

If you have submitted a claim to either Workers' Compensation or your Automobile Insurance Carrier 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 Ellement Consulting Group to access any information with respect to your Workers' Compensation Claim.

THIRD PARTY LIABILITY

Under the plan there is a Third Party Liability provision. Your plan booklet states:

If you receive benefit payments under this Plan for loss of income for which there may be cause of action against a third, you will be required to complete an Acknowledgement and Reimbursement Agreement. This will enable Manulife to be reimbursed for any amount(s) including interest, you recover from a third party for loss of income, or medical or dental expenses which, together with any amount(s) paid or payable under any of the benefits of this Plan, would exceed your actual loss. When Manulife is notified of payment by a third party or any judgment or settlement, further disability payments under this Plan will terminate until Manulife has been reimbursed the amount set out in the Acknowledgement and Reimbursement Agreement. If a lump sum payment is made under judgment or settlement for loss of future income, no further disability benefits will be paid from this Plan until such time as the sum of the benefit payments otherwise payable equals the amount of such lump sum.



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