# **Long Term Disability Claim Checklist for Employers**

Use this checklist when an employee is on an approved Leave of Absence for reasons of disability (health or injury) and will be applying for Long Term Disability (LTD) benefits.

When employee has been on leave for 8-10 weeks, or as soon as it is known that employee will be on leave for more than four months:

<b>V</b>	Date	
1. 🗆		Contact employee to discuss the eventuality of applying for LTD benefits.
2. 🗆		Discuss LTD claim forms and procedures with employee; contact a Benefits Counselor at Pension & Employee Benefits (PEB) of OHR for questions on claim procedures.
3. 🗆		Provide the Employee Statement and Physician Statement forms to the employee (Claim forms can be obtained from PEB).
	** If 6	employee has 4 months of paid leave, skip to #11**
4. 🗆		If the <u>employee intends to submit a claim</u> and does not have four months of paid leave (i.e., pay cheques from which LTD contributions continue to be deducted) advise employee that he/she <u>must pay LTD monthly contributions</u> for the four-month qualifying period (the period before LTD benefits are payable for an approved claim).
		The employee need not pay LTD monthly contributions for more than the four-month qualifying period from the Date of Disability for the claim to be accepted by the Claims Administrator for adjudication. The Date of Disability is usually the last day employee worked before disability started.
5. 🗆		If a period of leave <u>without</u> pay has been approved, discuss with employee the option of continuing other benefits (e.g., Group Life, AD&D, Health & Dental Plans) while on leave without pay.
		To qualify for waiver of premium benefits, should the LTD claim be approved, payment of contributions/premiums for the other benefit plans must continue during the four-month qualifying period. With LTD approval, waiver of premium applies to only the benefits plans that employee continued to pay during the four-month qualifying period.

# Long Term Disability Claim Checklist for Employers

<b>/</b>	Date	
6.		Keep/file confirmation of employee's option to continue (or not to continue) other benefits for the period of leave of absence without pay. Use Continuation of Non-Pension Benefits form, signed by the employee.
		<b>IMPORTANT</b> : In either case, the form used to indicate employee's decision to continue or not to continue benefits while on leave without pay must be completed and signed by the employee.
<b>7.</b> □		Explain to employee how to remit payment of contributions/premiums to PEB when employee on leave without pay.
8. 🗆		Send to PEB, without delay, any cheques or money orders left with you by employee for payment of contributions/premiums while on leave without pay.
9. 🗆		Employer to continue cost sharing of benefits while employee on leave with pay; and, at least, for the four-month qualifying period if employee on leave without pay.
10.		Advise and assist employee in claiming EI Disability Benefits should employee exhaust paid leave credits before LTD approval.
11.		Discuss with employee their choice to use paid sick leave credits beyond the four-month qualifying period, in lieu of LTD benefits. The expected duration of disability, age and potential for return to work are key considerations. For example, if employee is expected to return to active employment, it is not advisable to use paid sick leave credits beyond the four-month qualifying period.
		IMPORTANT: employee does not have to exhaust all accumulated sick leave credits before collecting LTD benefits.
12.□		Complete the Employer Statement. Contact a Benefits Counselor for any questions on completing the form.
13.□		If information completed on the Employer Statement is submitted and subsequently changed, advise PEB by letter or email of the amended information without delay – most particularly:  • When employee requests further paid leave (sick/vacation credits) before LTD benefits are payable.
		If the employee worked days/hours in addition to the information already indicated on the Employer Statement.

# **Long Term Disability Claim Checklist for Employers**

1	Date	
14.□		Send the Employer Statement, the employee's job description and proof of date of birth to PEB, without delay.
		Note relative to the Protection of Personal Information Act (POPIA): employee may choose to send their Attending Physician's Statement (and other medical reports) directly to PEB or Medavie Blue Cross.
15.□		Advise employee of time limit for filing of claim.
		IMPORTANT: LTD claim forms must be received at PEB within 10 months following Date of Disability, at the latest.
		The Plan is not liable for benefit payments if a claim is not received within the required time.

**Note:** If the employee is entitled to receive benefits under the *Workers' Compensation Act*, a claim (for waiver of premium only) must be received at the PEB within 30 months following the Date of Disability.

### When employee is approved for LTD Benefits/ Waiver of Premium Benefits:

PEB will send to employer copy of employee's approval letter describing the benefits under waiver of premium. Contact PEB for updates on employee's claim status.

<b>V</b>	Date	
		Discontinue payroll deductions and refund overpaid monthly contributions/premiums based on the employee's letter from PEB outlining the Waiver of Premium benefits and the approval dates .  PEB will refund overpaid contributions/premiums that employee paid directly to PEB.  Maximum the LTD Plan will refund: overpaid contributions up to 12 months.

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#### When employee returns to work during rehabilitation:

When recommended by the Claims Administrator in consultation with the employee's Physician, the Rehabilitation Specialist at MBC, with the co-operation of the employee and the assistance of his/her physician, Union and the employer, will develop the rehabilitation plan.

**IMPORTANT**: Accommodation efforts from all parties, including employer, Union, employee and Physician, is important for a progressive and successful return to work.

<b>V</b>	Date	
		Report employee's earnings during the gradual return to work/rehabilitation program to the Claims Administrator on a regular basis, as soon as the information is available.  The amount of 'rehabilitation' earnings is used to calculate the employee's LTD monthly benefit. (The benefit is reduced by 50% of the earnings.)
		Do not put the employee back on regular payroll with deductions for benefits that are under waiver of premium. Waiver of premium continues while employee is approved on LTD, including gradual return to work programs recommended or approved by the Claims Administrator.
		Advise PEB immediately if employee becomes totally disabled again within six months of return to work and end of LTD payments (for same or directly-related cause) by sending a written confirmation (letter or email) of employee's last day of work before disability reoccurred and last day of paid earnings.
		Advise employee that he/she must send a letter (or email) to MBC, with copy to PEB, to request that the claim be reopened. MBC will advise employee of any required medical information.  If total disability reoccurs later than six months of return to work and end of LTD payments, the disability is considered a new claim. The fourmonth qualifying period applies and a new claim would be presented.

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# **▶** If employee terminates employment:

1	Date	
		Ensure employee on LTD is advised of the following before employment is terminated.
		Pension benefit options, including purchase of any eligible period of service.
		Transfer option (if applicable) – to Retiree Health, Dental and Travel Plans.
		If the employee terminated employment before termination of LTD and waiver of premium benefits, PEB will offer employee the option to convert Group Life Insurance and information on their other benefits.

See the LTD Coverage /pamphlet from the Employee Benefits Folder for a description of the coverage; or visit our web site at www.gnb.ca/pensions