

**YOUR GROUP DISABILITY BENEFIT PLAN  
PROGRAM – SHORT TERM AND LONG TERM  
DISABILITY CLAIM PROCESS**

**Sponsored by  
ATU Local 1624**



**Underwritten by**



**Administered by**



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**Short-Term Disability (STD) and Long-Term Disability (LTD) coverage provides protection should you become Totally Disabled as a result of illness or accident while insured under this policy.**

**Who is Eligible?**

You are eligible to participate in the Disability Benefit Plan Program if you are a regular, full-time Member and you completed your probation period of 3 months of continuous service.

**Amount of Protection**

55% of gross earnings at the onset of disability, subject to a maximum benefit of \$1,000 per week under the STD Plan; 55% subject to a maximum benefit of \$8,000 per month under the LTD Plan.

Because you pay LTD premiums, any benefits you receive are non-taxable.

**Coordination with Other Sources of Income**

Your STD and LTD benefits will be reduced by any income you receive, or are entitled to receive, for the same or a subsequent disability from the following sources:

- disability benefits from the Canada Pension Plan (CPP), excluding dependent benefits
- Workers' Compensation or similar coverage
- any government motor vehicle insurance plan or policy, unless prohibited by law
- a provincial crime victims compensation act.

If your total income from all sources exceeds 85% of your pre-disability net income, your STD and LTD payments will be reduced by the excess amount. Sources include all those stated above in addition to any income or benefit you are entitled to receive from:

- Earnings or payments from any employer;
- Any group, association or franchise plan;
- Any retirement or pension plan.

**When Payments Begin**

The STD benefit is payable following an uninterrupted period of disability of 6 days; and a period of 32 weeks for LTD benefits (referred to as the 'elimination period').

If disability occurs:

- during *leave without pay*, you are eligible if your disability coverage was maintained for the duration of the leave (making direct premium payments). The elimination period will begin on the termination date of your leave without pay (the date you are expected to return to work following your leave).

**Definition of Total Disability**

You will be considered totally disabled if illness or accident prevents you from performing:

- the main functions of your regular employment during the elimination period and the following 24 months;
- thereafter, any gainful occupation for which you are reasonably qualified by training, education or experience and earn at least 80% of your pre-disability gross monthly earnings.

**Recurrent Disability**

If you had been disabled and in receipt of disability benefits, return to work and again become disabled, such disability will be considered a continuation of the previous disability provided:

- it is due to the same cause or causes as the previous disability;

Short Term Disability:

- you have been back to work at full-time active work for less than 30 consecutive days

Long Term Disability:

- during the elimination period, you have been back to work at full-time active work for less than 15 consecutive days; and
- after the elimination period has been completed, you have been back at full-time active work for less than 6 months.

**Rehabilitation Services**

If your STD/LTD claim is approved, you may receive rehabilitation consulting services from an independent professional if Industrial Alliance believes that these services would assist you in your efforts to return to work.

If you participate in an approved program of rehabilitative employment, you may continue to receive STD/LTD benefits as well as income from other sources.

**When Disability Payments End**

Disability benefits will cease on one of the following dates, whichever occurs first:

- date you are no longer totally disabled; or
- date you hold a position or perform work for which you earn a salary or profit; or
- date you retire; or
- date you reach age 65; or
- date of your death, at which time a lump sum payment equal to three full months of LTD monthly benefits payable to your beneficiary.

This Plan will not cover any disability resulting from:

- civil unrest, insurrection or war, whether war be declared or not, or participation in a riot;
- attempted suicide or voluntarily self-inflicted injury, while sane or insane;
- care which is not medically required or which is given for cosmetic purposes, unless such care is for an accidental injury and commenced within 90 days of the accident;
- Committing, attempting to commit a criminal offence, or provoking an assault or criminal offence.

**Pre-Existing Conditions**

No LTD benefits are payable if you become insured after the commencement date of this plan for any disability beginning within twelve months of your effective date of insurance if the disability is caused by, partly attributable to or is a consequence of a sickness or injury for which you have received medical treatment or services or took prescribed drugs or medicine within three months prior to the date on which you became covered under this plan.

**How to Submit a Claim**

To submit a claim, please forward a completed Disability Claim Form Application to your Plan Administrator.

**Written notice of your claim must be received by Industrial Alliance within 30 days of the end of your elimination period.**

Should you have any questions, whatsoever, please do not hesitate to contact your Plan Administrator.

As soon as you are aware that you will be absent for an extended period of time due to a disability, you must contact your Plan Administrator.

**CLAIM ASSESSMENT**

Your Plan Administrator will mail/email you a Short Term Disability Claim Application along with Instructions on how to complete the forms.

- Member's Statement
  - To be completed by you
- Physician's Statement
  - To be completed by your Attending Physician
- All completed Statements should be returned to your Plan Administrator
- **Your STD Claim Application must be received by Industrial Alliance within 30 days from the date of disability**

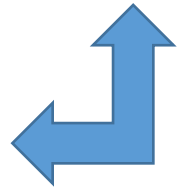


Your Plan Administrator will review your Short Term Disability Claim Form Application to ensure that all forms have been received and completed.

- If there is any missing information/forms, your Plan Administrator will contact you directly and discuss this with you

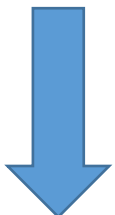
Your Plan Administrator will confirm your eligibility and forward your completed Short Term Disability Claim Form within 2 business days of receipt of your application to Industrial Alliance for processing

Industrial Alliance reviews the medical information within 5 working days (for STD) and 10 working days for LTD of the date of receipt of your application to determine if a decision can be made or if



**Additional Information is Required**

**Medical Information is Sufficient**



Industrial Alliance will inform you if further medical information is required



**CLAIM DECISION**

**Claim is approved**

**Claim is denied**

Industrial Alliance approves your claim. The period of time for which you receive benefits will depend on your medical condition. Your claim will be reassessed periodically

- Does not meet eligibility requirements
- Medical does not support Total Disability

**Benefits are paid**

**Appeal Process**

Industrial Alliance will send you an explanation of benefit payments. The benefit may be reduced by the amount of any other disability income you are receiving, or may receive, including CPP Disability benefits

**Continuous Management**

If you disagree with Industrial Alliance's decision, you may request an appeal within 60 days of the date of the declination letter. Your written request should include the reasons for disagreement, and any medical information not previously submitted that you like to be considered

In your letter outlining the reasons you disagree with the decision, you should describe your current medical condition in detail and how it prevents you from working. It would also be very helpful if you could outline all of the factors that contribute to your disability, including symptoms, frequency and severity

- Ongoing communication with you for follow-ups
- Continuous analysis of additional requested medical information
- Continuous review of an appropriate return-to-work action plan
- Ongoing assessment of rehabilitation potential

**Short Term Disability to Long Term Disability**

Should you continue to be disabled following the waiting period of 6 days and 17 weeks of STD disability benefits, you must apply for Employment Insurance (EI) Sick benefits. EI benefits are paid for a maximum period of 15 weeks. During your EI period, Industrial Alliance will contact you and if you continue to be disabled, Industrial Alliance will mail you the Long Term Disability Claim Application Forms. Your Long Term Disability Claim Application Forms must be received by Industrial Alliance within 90 days of the end of the elimination period of 32 weeks. The Claims Assessment and Claims Decision will be repeated as above.