

Being absent from work due to an illness/injury can be a difficult time. Your Health & Wellness plan is here to help you get through that. The process for Disability coverage is outlined in this document. Please reach out to the disability team at 780-483-9550 or disability@oe955.com to start the process.

The Short Term Disability (STD) program is integrated with the Employment Insurance (EI) Sickness benefits. STD will cover the first week of disability, El Sickness benefits will cover the next 26 weeks, and provided that you are still disabled, you will return to STD for the remaining 77 weeks.

Short Term Disability coverage is provided to all Health & Wellness Plan members (Core & Extended). Long Term Disability coverage is provided in the Extended Plan only.

The weekly benefits paid while on Short Term Disability are equal to the amount paid through the El Sickness program. The monthly benefits paid while on Long Term Disability are dependent on how many hours the plan has received for you over the last 2 years.

Week 1 You become disabled/ill and need to take short-term disability.

Was this a workplace incident?

Yes

Apply for benefits through WCB. <u>The claims process - WCB Alberta</u>. If you are approved for WCB and are expected to exceed 104 weeks, you should notify the Trust Office so you can apply for LTD when eligible. Your WCB would be a direct offset to the LTD benefit, but you may be entitled to a waiver of premium for LTD and Life Insurance.

No

Contact the Trust Office immediately. If you are eligible through the OE955 H&W Plan, the Trust Office will send you the following forms for Manulife: a. Attending Physician Statement – Sections 1a and b of the form are to be completed by yourself, and the rest of the form is filled out by the doctor. NOTE: Doctors typically charge a fee to fill out insurance forms, and this fee is not covered by the OE955 H&W Plan.

b. Plan Member Statement - This form must be completed to the best of your knowledge. Keep in mind this is a generic form for multiple policies. Please fill it out as best you can and remember to sign all of the signatures and dates (Sections 3, 9, 10). Please remember to include a direct deposit form or void cheque from your bank when submitting your documents to Manulife.



Week 1 Continued c. Plan Sponsor Statement - The Trust Office will complete and send to Manulife.

Once Manulife receives all three forms, they may contact you to discuss the information as part of the assessment. The case manager will make a decision within 5 business days. If approved, Manulife will retroactively pay you for the first week if you were in an accident or hospitalized for a sickness. If you are sick and were not hospitalized, you will not receive a payment from STD at this time.

If you do not apply to Manulife within 90 days from the date of disability, your STD claim will be denied.

Apply for El Sickness benefit immediately through <u>El Sickness Benefit -</u> <u>Apply - Canada.ca.</u> If you do not apply for El within 4 weeks of your last day of work you may lose benefits. El will retroactively pay you to the second week of disability. NOTE: This program is administered by Service Canada and you should contact them with any inquiries as to the El process.

Depending on the timeliness of your submission and El processing times, your payments may be delayed.

If you are not able to return to work prior to the end of El Sickness benefits and have not submitted a claim to Manulife for the first week, contact the Trust Office immediately to initiate the process (Refer to week 1 for steps).

If you have submitted a claim for the first week of your absence to Manulife and are not able to return to work prior to the end of your El period, please notify your Manulife case manager and the Trust Office. Your case manager will discuss the next steps with you; additional medical information may be required by Manulife to assess your ongoing eligibility for STD benefits.

Your payments from El Sickness will cease, and ongoing eligibility for benefits and payment will be administered by Manulife.

If you are part of the Extended Plan, you would have LTD coverage. Manulife will conduct a review to determine whether you qualify for LTD benefits. During this time, Manulife may reach out to you to obtain additional information to facilitate your transition to LTD. Your STD and LTD case managers will work closely together to keep you informed of the steps throughout.

Your payments from STD will cease, and providing you meet the eligibility requirements, LTD payments will commence.

Week 2 El payments commence

Week 11

Don't miss STD 90-day deadline

Week 24 Prepare to return to STD/Manulife

Week 28 Return to STD payments

> Week 97 Prepare to move to LTD

Week 105 LTD payments commence



FAQs

What happens if I am denied coverage through STD/EI Sickness?

If you are denied coverage through the OE 955 Health & Wellness STD provider, Manulife, you can appeal their decision through the Manulife appeal process. NOTE: You can also still apply for El Sickness benefits and if qualified, they would cover you for weeks 2-27 of your disability.

If you are denied coverage for El Sickness benefits based on medical evidence, you can appeal their decision through the El appeal process. NOTE: You can also still apply to OE 955 STD and if qualified, they would cover you for week 1 and weeks 28-104 of your disability.

If you are denied coverage for El Sickness benefits because you do not meet their hours tests, you can request that Manulife review your file for coverage during weeks 2 through 27. NOTE: You must provide the El letter to Manulife showing why your file was declined as they will not have access to your El files.

Are there any deadlines I need to be aware of?

You must submit the application to Manulife for STD benefits within 90 days from the date of disability. You must apply for El Sickness benefits within 4 weeks of your last day of work or you may lose benefits.

I am self-paying for benefits, can I apply for STD?

If you are on self-pay, you are not eligible to apply for STD. NOTE: You can still apply for El Sickness benefits if you meet their eligibility criteria.

I am considering taking my money out of the OE 955 Pension Plan, does that impact my benefits? If you have previously taken your pension out of the OE 955 Pension Plan (lump sum or monthly payment), you will not be eligible for STD. NOTE: You can still apply for El Sickness benefits if you meet their eligibility criteria.

I am on disability and do not want to continue paying my Union dues, how does that impact my benefits?

If you do not maintain Good Standing status with the Union, your Health & Wellness benefits coverage will be terminated.

I am sick and there is a one-week waiting period for sickness benefits under STD, why should I apply?

If you do not apply for STD upon sickness, by the time your El benefits expire after 27 weeks of disability, the 90-day STD application deadline will have passed and you will not be eligible to apply for STD if you are still sick and unable to work.

What happens to my Health & Wellness benefits while I'm on STD/EI Sickness?

If you were approved for STD and remain a member in Good Standing, you will continue to receive Health & Wellness benefits coverage while you are in receipt of STD/El Sickness benefits.



FAQ continued...

What happens if this is a WCB claim?

If this was a workplace related incident then you should apply through WCB. If you are declined for WCB benefits, you would apply through the STD/EI Sickness process.

If you are approved for WCB and are expected to exceed 104 weeks, you are eligible to apply for LTD, and a waiver of premium for LTD and Life Insurance. Please reach out to the Trust Office by the 97th week to commence your LTD application.

If you continue to be approved through WCB, your WCB payment is a direct offset to the LTD benefit payment. If WCB discontinues your claim, and you are still unable to return to work, Manulife will continue to assess your eligibility for benefits.

If I had a previous claim through El Sickness or El Unemployment, how does this affect my coverage?

If you have multiple claims, you may not receive the maximum El or qualify for El Sickness benefits the next time you apply depending on your work hours in between El claims. Please refer to the El website for more information.

If you do not qualify for El Sickness benefits as you do not meet the hours worked requirement, but you would have qualified for STD benefits, you should provide the El letter to Manulife showing why you were denied by El and you will be paid through the STD plan for the entire duration if you qualify.

Manulife is asking for additional documentation. I previously provided documents, why do I need to provide this?

Depending on the medical case, Manulife may need to follow up on particular details or ask for documentation to review whether the incident is still impacting your ability to return to work. If Manulife does not receive the required information in a timely manner this could result in late or non-payment of benefits. Manulife will generally try to work with any difficulties you may encounter, but as the claims adjudicator and provider, you will need to comply with any occasional follow ups they may request.

Why is Manulife reducing the amount I should be receiving?

If you receive other benefits, e.g. CPP income, employment income, etc., your disability benefits will be reduced to account for those. NOTE: Please refer to the Benefits Booklet (available on the OE 955 website) for a complete list of offsetting benefits.

How do I know if I have LTD coverage?

LTD coverage is applicable to members in the Extended Plan. If you are working under an agreement that contributes at 2.05 or greater per hour to the Health & Wellness Plan, then you are in the Extended Plan. If your contribution rate is under 2.05 you are in the Core Plan. 2.05 is the qualifying rate in 2024 but it is expected to increase over time.

