



GUIDE TO APPLYING FOR WEEKLY DISABILITY BENEFITS

WEEKLY DISABILITY BENEFIT

You will be paid a benefit if, while insured for Weekly Disability coverage, you become disabled due to a non-occupational bodily injury or sickness that prevents you from performing work for a contributing employer for pay or profit.

To start your claim you must apply for both the Weekly Disability Benefit with Ellement Consulting Group and EI Sickness with Service Canada as soon as you become disabled. Weekly Disability benefit payments begin on the first day of disability caused by an accident, providing you did not work that day, and on the eighth day of disability caused by a sickness. ***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 EI benefits.**

Applications for the Weekly Disability Benefit must be made within 180 days after the start of your disability.

Successive periods of total disability that are separated by less than one week of employment or availability for employment will be considered as one period of disability. If any period of disability is classified as "recurrent" it will be treated as a continuation of the previous 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) 453-2303 toll free (800-661-7369) or online www.fasadmin.com
- Submit all required documentation from EI 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 in-patient 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 EI SICKNESS 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:

My Service Canada Account

[Home](#) > [My Current Claim](#)

My Current Claim

Don't forget to [Log out](#) before leaving the site

Start Date of Claim:	February 16, 2014
Waiting Period:	February 16, 2014 to March 01, 2014
Type of Benefit:	Sickness - major attached benefits
Recovery Date:	February 11, 2169
Total Insurable Earnings:	\$20,562
Benefit Rate:	\$514
Federal Tax:	\$59
Weeks of sickness benefits paid:	15
Total Weeks Paid:	15
End Date of Claim:	February 14, 2015
Last Report Processed:	June 08, 2014 to June 21, 2014
Last Report Processed on:	June 22, 2014

[Return to My Service Canada Account home page](#)

Date Modified: 2014-06-14

My Service Canada Account

[Home](#) > [My Payments](#) > [My Payment Details](#)

My Payment Details

Don't forget to [Log out](#) before leaving the site

You have now received the maximum payments as allowed by Employment Insurance law for the type of special benefits you have applied for.

If you are unable to return to work, you may be entitled to other types of Employment Insurance benefits. If you require further information, consult the Service Canada site at: <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.

These details are a result of the original processing of this report period.

Week 1 of reporting period (June 08, 2014 to June 14, 2014)

Benefit Rate:	\$514
Type of Benefit:	Sickness benefits
Gross Amount:	\$333
Deductions:	
Earnings:	\$181
Tax:	\$15
Net Amount Paid:	\$318

Week 2 of reporting period (June 15, 2014 to June 21, 2014)

Benefit Rate:	\$514
Type of Benefit:	Sickness benefits
Gross Amount:	\$333
Deductions:	
Earnings:	\$181
Tax:	\$15
Net Amount Paid:	\$318

[View my report](#)

[View previous payment details](#)



Phone: (780) 453-2303

Ellement Consulting Group
10154 108 St NW, Edmonton AB, T5J 1L3
E-mail: contact.us@ellement.ca | Website: www.ellement.ca

Toll free: 1 (800) 661-7369

Fax: (780) 452-5388



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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. No period of care shall be considered to have started until you have been seen or treated personally by 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 Employment Insurance 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
- Periods of disability when you are on vacation and receiving full pay
- Any period that you are undergoing cosmetic surgery or treatment, when so classified by the insurance company, unless such surgery or treatment is for accidental injury and began within 90 days of the accident causing the injury
- On any day you did any kind of work for pay or profit

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 **cannot** 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.**



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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

If you receive benefit payments under this Plan for loss of income for which there may be cause of action against a third party, you will be required to complete an Acknowledgement and Reimbursement Agreement. This will enable SSQ 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 the amount you would otherwise be entitled to as a result of your disability

When SSQ is notified of payment by a third party of any judgment or settlement, further disability payments under this Plan will be interrupted until the amount set out in the Acknowledgement and Reimbursement Agreement has been reimbursed.

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.