

Short Term Disability (weekly indemnity) provides financial protection when you are unable to work. This guide will help you through the claim submission process and answer any initial questions you have with respect to filing a claim for Short Term Disability. Because every situation is unique, we treat each absence individually and are here to help in any way we can.

If your employer also offers Long Term Disability (LTD) coverage through Alberta Blue Cross, please refer to the Alberta Blue Cross Long Term Disability benefits claim guide.





Your group plan will specify the maximum number of weeks or a termination age for which benefits can be paid. The policy also outlines specific requirements that need to be met for you to qualify for ongoing weekly payments. Some of these obligations include meeting our definition of a disability and following appropriate treatment plans. We urge you to read your employee booklet to familiarize yourself with the specific obligations outlined within your group plan.

THE CLAIM SUBMISSION PROCESS

The claim submission process includes the completion of a series of forms by you, your employer and your treating health care providers. To ensure timely claims processing, the following forms should be completed and forwarded to Alberta Blue Cross® within the time frame outlined in your employee benefits booklet:

- Attending Physician Statement

All forms can be obtained through your Short Term Disability provider or directly from Alberta Blue Cross at ab.bluecross.ca/forms.php.

If your application for Short Term Disability (weekly indemnity) benefits is approved, all payments will be deposited directly to your bank account. To ensure we have the correct banking information, visit the member site at members.ab.bluecross.ca and log in to your account to confirm or update your information. Learn how to update your information at ab.bluecross.ca/member/online-services/help/update-your-information.php.

THE EMPLOYEE STATEMENT

Completed by you, this form provides us with details about the circumstances that led to your work absence and includes a section you must sign to authorize us to communicate directly with your treating health care providers. Health care providers consist of any medical professional, such as your family doctor, medical specialists, physiotherapist, chiropractor or other counsellors.

THE EMPLOYER STATEMENT

This form must be signed and completed by an authorized representative from your employer.

ATTENDING PHYSICIAN STATEMENT

Your doctor needs to complete this form.

It is important that copies of all test results, consultation reports and any hospital discharge summaries associated with your conditions are also provided as this clinical evidence is crucial for us to establish your entitlement to Short Term Disability (weekly indemnity) benefits. Please note your doctor may charge a fee to complete this form; you are responsible for paying this fee.

JOB DESCRIPTION FORM

This form must be signed and completed by an authorized representative from your employer.

SUBMITTING YOUR CLAIMS

Short Term Disability (weekly indemnity) claim application forms can be obtained through your Short Term Disability provider or directly from our website at **ab.bluecross.ca/forms.php**. We accept submission of claim applications online through our **member site** and by mail or fax.

Online

members.ab.bluecross.ca

Mail

Alberta Blue Cross c/o Life and Disability Services 10009 108 Street NW Edmonton, AB T5J 3C5

Fax

780-441-2605

Toll-free fax 1-855-660-2605

YOUR ASSESSMENT

Once we receive your Short Term Disability (weekly indemnity) application, we will assign you a disability case manager who will consider various factors in the assessment of your claim, including the medical information provided, how your condition impacts your ability to do your job and your ability to carry out daily living activities.

Most of this information is gathered through a telephone intake assessment. The intake assessment allows us the flexibility to ask questions related to your individual set of circumstances and provides you the opportunity to ask questions about your claim or process. We may also need to contact your employer

and health care providers to gather additional information or discuss potential rehabilitation initiatives.

In some cases, we may ask you to undergo an independent medical exam or functional evaluation, which are covered financially by Alberta Blue Cross. We believe each individual has unique circumstances associated with their disability; therefore, our case management philosophy and approach are based on an active partnership with you, your employer and your health care providers. Please contact us if you have any questions throughout the process.

THE OUTCOME

Once all of your information is gathered, your claim will be adjudicated in accordance with the contractual provisions of your employer's Short Term Disability (weekly indemnity) plan. Although you may be away from work due to a medical condition or an injury, your entitlement to benefits is not automatic. Our decision to approve your claim is based on the contractual definition of "disability," which can be found in your employee benefits booklet.

The claims assessment process usually takes between three-to-five business days from the date we receive

all the necessary information. Both you and your employer will be notified by telephone and writing if your claim is approved and for how long.

In the event the claim is declined, you will be provided with the reason for the decision and offered the opportunity to appeal. In the event of any variations, the policy issued to your employer, underwritten by Blue Cross Life Insurance Company of Canada®, is the governing document and will prevail.

FREOUENTLY ASKED OUESTIONS

This section will help you understand the Short Term Disability (weekly indemnity) claim process. **Please note this** guide is not intended to replace or amend your employee benefits booklet, the terms of which shall prevail over this guide.

WHEN SHOULD I APPLY FOR SHORT TERM DISABILITY (WEEKLY INDEMNITY)?

Start the claim submission process as soon as possible. The best time to submit your application is when you start your leave from work. To avoid delays, it's important we receive all completed forms in a timely manner as we cannot begin our adjudication until we receive your completed application.

WHY SHOULD MY DOCTOR FILL OUT ALL THE INFORMATION ON THE FORM?

Short Term Disability (weekly indemnity) benefits are based on our ability to establish if your condition prevents you from performing the regular duties of your job. It is important that your doctor provides us with all available clinical information to establish your level of function and expected recovery. Often, your doctor's clinical notes provide greater detail than what can be provided on the Attending Physician Statement; therefore, we strongly urge that your doctor include a copy of these records with the completed Attending Physician Statement. If you were seen by a specialist or have undergone any diagnostic testing for your condition, ask your doctor to include copies of these findings as well.

HOW ARE MY BENEFITS CALCULATED?

The payable Short Term Disability (weekly indemnity) is based on a portion of the earnings you were receiving before your disability began and will commence following an elimination period as outlined in your employee booklet. The method used to calculate your benefit amount is outlined in your employee benefits booklet.

IF MY CLAIM IS APPROVED, WHEN WILL I START RECEIVING BENEFITS?

Short Term Disability (weekly indemnity) benefits are paid weekly. The first payment will commence following the end of the elimination period as outlined in your employee benefits booklet and may include a retroactive amount. Any subsequent payments are issued weekly. Payments will be deposited directly to your bank account.

WHAT ARE MY RESPONSIBILITIES WHILE I RECEIVE SHORT TERM DISABILITY (WEEKLY INDEMNITY) BENEFITS?

As the claimant, you have an obligation to be part of the process and to follow any reasonable treatment program to promote your recovery or medical stability. Alberta Blue Cross may expect you to participate in a rehabilitation program and return-to-work planning. Throughout the time you are on claim, we also encourage you to maintain contact with your disability case manager and workplace.

You are also expected to inform Alberta Blue Cross of sources of income you are entitled to receive at the beginning of your claim and during your claim, as some of these earnings may be considered a reduction from your benefit.

ONCE I'VE BEEN APPROVED FOR BENEFITS, HOW OFTEN IS MEDICAL INFORMATION REQUESTED?

Your disability case manager will continue to have ongoing contact with you to gain a clear understanding of your progress and may periodically communicate with you by telephone or by home visit. We may also periodically request additional information from any of your health care providers to obtain an update on your medical condition. The frequency of such requests will be determined by your unique set of circumstances. In some cases, we may ask you to undergo an independent medical evaluation. When such a request is made, we will make all the arrangements and be responsible for any associated cost. A copy of the results will be provided to your treating physician.

HOW LONG WILL I RECEIVE WEEKLY INDEMNITY BENEFITS?

Your group plan will specify the maximum number of weeks or a termination age for which benefits can be paid. The policy also outlines specific requirements that need to be met in order for you to receive ongoing weekly payments. Some of these obligations include meeting our definition of a disability, following appropriate treatment and participating in return-to-work planning.

You will receive disability benefits for the maximum number of weeks outlined in your employer's Short Term Disability (weekly indemnity) policy as long as you meet the definition of total disability and other policy obligations. If we approve your claim, your disability case manager will notify you in writing about how long you are eligible to receive benefits and will outline any specific obligations.

We urge you to read your employee benefits booklet to familiarize yourself with the specific obligations outlined within your group plan.

WHAT IF I RECEIVE INCOME FROM OTHER SOURCES?

Your Short Term Disability (weekly indemnity) benefits may be reduced by other earnings such as CPP disability benefits or rehabilitation employment earnings. The amount of the reduction is described within your group policy. Please ensure you notify Alberta Blue Cross of any earnings you receive or are entitled to receive while receiving disability benefits.

DOES ALBERTA BLUE CROSS SHARE MEDICAL INFORMATION WITH MY EMPLOYER?

Your personal information will not be disclosed to other parties, such as your employer, without your written consent. The information we collect on your behalf will be used for the purpose of establishing your entitlement to benefits and for managing your claim.

If you have any questions or concerns about our privacy policy, visit **ab.bluecross.ca/about-us/privacy**. You can also contact our Privacy Matters hotline at 1-855-498-7302 (toll free), 780-498-7302 (Edmonton and area), or email **privacy@ab.bluecross.ca**.

WHAT IF I RETURN TO WORK WITH SOME RESTRICTIONS?

When the time is right, your disability case manager will develop a return-to-work plan based on your situation. Often, no intervention is needed; however, sometimes modified duties or a Gradual Return-to-Work (GRTW) program may be appropriate. Our approach is based on an active partnership with you, your employer and your health care providers. Our goal is to assist you to return to work in a safe and sustainable manner at the earliest possible time. Should your return require specific vocational expertise, we will assign a rehabilitation consultant to assist with the return-to-work coordination.

WILL I RECEIVE A TAX SLIP?

You will only receive a tax slip if your disability benefits are considered taxable. You can contact your plan administrator to find out if your weekly indemnity benefits are taxable. If your benefits are taxable, a tax slip will be mailed to you before the end of February for benefits paid during the previous tax year.

