

Short Term Disability Benefits



Understanding Your Coverage

What are Short Term Disability (STD) benefits?

Short Term Disability insurance is part of your Employer's group benefits plan. If you become unable to work for a short period of time due to an illness or injury (while you are insured), STD benefits provide you with weekly income replacement. As your group insurance company, Manulife Financial provides you with STD benefits according to the terms of your group benefits contract.

When should I apply for STD benefits?

If your condition is expected to prevent you from returning to work beyond the STD Qualifying Period outlined in your group benefits booklet, you should submit an application for STD benefits as soon as possible. The Qualifying Period is the duration of time you must be off work due to a disabling condition before benefit payments will begin.

How do I qualify for STD benefits?

Manulife Financial will review your application along with your group benefits contract to determine if you are eligible

for STD benefits. If your claim meets the terms of your group disability plan and it is deemed to be medically supported, your claim will be approved. Some of the terms evaluated in the review of your claim include:

- **Eligibility** – your case manager will confirm that you are covered by your group benefits contract for STD benefits
- **Level of function** – your case manager will compare your level of function to the demands of your job to confirm whether you meet the definition of disability within your group benefits contract
- **Appropriate treatment** – your case manager will review your claim to confirm that you are under the care of a licensed medical doctor and that you are receiving regular, ongoing care and treatment that is appropriate for your disabling condition

Typically, "totally disabled" means that a person is unable to perform his or her own occupation – meaning type of work such as welding, computer repair or teaching – not the specific job they were hired to do. Your group benefits booklet or your plan administrator will explain how your contract defines "total disability".

Returning To Work

When is the right time for me to return to work?

In order to promote recovery, it is important to maintain as normal a routine as is medically possible. Given that work is part of a normal routine, it is important to return to work as soon as you are healthy enough to do so. Depending on the length of your absence, a gradual return to work may be feasible. Your case manager will work with you, your employer and your healthcare provider(s) to develop a return to work program if appropriate.



How To Apply

Step 1: Complete the application forms

The forms required to apply for Short Term Disability benefits are included in this kit. In order for your application to be processed without delay, Manulife Financial requires complete and detailed information. Please read the following instructions before completing the forms.

Short Term Disability Plan Sponsor Statement

Your employer will complete a *Plan Sponsor Statement* and send it directly to Manulife Financial. This form confirms the details of your STD coverage and provides information about your job.

Short Term Disability Plan Member Statement

Please complete all sections of the *Plan Member Statement*. This form provides Manulife Financial with details of your claim and includes a section that you must sign to authorize your doctor(s) to release information that will support your claim. Some employers ask you to send your Statement to your Human Resources or benefits department, while others prefer that you send it directly to Manulife Financial. Check with your plan administrator to find out where to send your completed application.

Short Term Disability Attending Physician's Statement

Give the Attending Physician's Statement to your doctor to complete as soon as possible. This form, when fully completed, will provide Manulife Financial with medical evidence, which is necessary to support your claim for disability benefits. Your doctor can send the completed form and medical reports directly to Manulife Financial, or return them to you to forward on to us. It is your responsibility to follow up with your doctor to ensure that all sections of the form have been completed and sent to Manulife Financial and that copies of all reports related to your disabling condition (e.g. x-rays, scans, blood work or other test results and specialist consultations) are sent as well.

Your doctor may charge you a fee to complete this form. This fee is not covered under your group benefits plan.

Step 2: A Manulife Financial case manager may contact you.

Once we receive the necessary forms, a case manager will review your application. If required, your case manager will call you to gather any missing information, discuss your claim, and answer any questions you may have about the process. If you are unable to communicate by phone for any reason (e.g. hospitalized, language barrier) Manulife Financial will make other arrangements to communicate with you.

Step 3: Manulife Financial will notify you of the decision on your claim.

After all the required information has been gathered, your assigned case manager will review your claim to determine your eligibility for benefits based on your group benefits contract.

If your claim is approved, you will receive a cheque with an attached Explanation of Benefits (EOB) indicating payment is made on the current available medical evidence as well as the expected duration, after which you will be required to submit additional evidence if you are not returning to work.

If your claim is denied, you will receive a letter explaining why you did not qualify for benefits. Should you disagree with Manulife Financial's assessment of your claim for STD benefits, you can appeal the decision within 60 days of the date of the decision letter. Your appeal must be in writing and should include new information to support your request to reassess your claim. Any costs for obtaining new information, such as test results and medical reports would be at your expense.

Step 4: If your claim is approved, your eligibility for STD benefits will be reviewed on an ongoing basis.

It is your responsibility to provide us with an update on your medical condition whenever requested. When your claim is being reviewed, your case manager will:

- review your claim to see whether the updated information continues to support eligibility for benefits under your group benefits contract;
- look for opportunities to begin an active return-to-work program; and
- advise you of any changes in your benefits.

Working Together

You, your healthcare provider(s), your employer and Manulife Financial all have a role to play in ensuring the STD claim process is as smooth as possible for you. The following is an overview of our individual responsibilities.

You

- follow the appropriate treatment recommendations to promote your recovery or medical stability
- ensure your initial STD application is complete
- provide up to date medical evidence as requested
- participate in return-to-work planning
- keep in touch with your workplace and case manager
- inform Manulife Financial about all sources of income at the start of your claim and during your claim

Your Healthcare Provider(s)

- diagnoses and/or treats your medical condition
- provides Manulife Financial with medical information as requested to adjudicate your claim
- works with other healthcare providers and Manulife Financial to promote your recovery and when possible, to facilitate a safe and timely return to work

Your Employer

- keeps in touch with you about what's going on at your workplace
- creates and maintains a supportive, healthy work environment
- assists in return-to-work planning by accommodating modified work programs

Manulife Financial

- assesses your claim
- assigns a case manager to manage your claim
- provides payment of STD benefits for all eligible claims
- answers any questions you may have about your claim
- works with you, your employer and healthcare provider(s) to develop a timely return-to-work plan as soon as medically possible.



Benefit Payments

How much will my STD payments be?

Weekly STD payments are usually based on a percentage of your income at the time you first became disabled, although they can be a flat rate. Your group benefits booklet or your plan administrator will explain what percentage your plan covers.

The amount of STD benefit you receive from Manulife Financial may be reduced by other sources of income as defined by your group benefits contract. Therefore, we need to know about any other sources of income – not only when your claim is first approved, but on an ongoing basis. The income you must report to us includes, but is not limited to:

- disability payments from any government plan or program (e.g. Workers' Compensation, Employment Insurance);
- disability benefits payable under any other insurance plan;
- Canada or Quebec Pension Plan disability benefits;
- any payments or retirement benefits paid to you by your employer from any pension plan;
- employment income.

Your case manager can provide further explanation as required.

When will I receive my STD payments from Manulife Financial?

Payment frequency can vary depending on the terms of your group benefits contract, but most often they are issued on a weekly basis. Payments are made by cheque, or direct deposit if allowed by your employer. Your case manager will explain the payment details for your claim.

How long will my STD benefit payments last?

Most plans specify a maximum number of weeks for which benefits can be paid. Your payments will continue for the period during which you satisfy all the terms of your group benefits contract including the definition of "disability", or until you have satisfied the maximum benefit period as specified in your contract.

What is the tax status of STD payments?

The tax status of your STD payments depends upon who paid the disability insurance premiums – you or your employer. If you are not sure, your employer can provide the answer to this question.

If you paid 100% of the insurance premiums, then

- payments you receive are not taxable; and
- Manulife Financial will not issue tax slips.

If your employer/plan sponsor paid ANY portion of the insurance premiums, then

- payments you receive are subject to income tax; and
- Manulife Financial will issue a T4A slip on an annual basis.

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