Johnstone's BENEFITS

THE JOURNAL

solid group plans made simple

WCB AND DISABILITY COVERAGE

Remember to Notify the Group Insurer

When an employee experiences a work-related injury or illness, it's important to notify both the Workers' Compensation Board (WCB) and the group insurance provider. Filing with both ensures continuous eligibility for disability benefits and life insurance premium waivers.

Workers' Compensation Board (WCB)

Workers' Compensation Boards (WCB), also known as WorkSafe or Workplace Safety, protects employees from financial hardship due to work-related injuries or occupational diseases. WCB provides coverage for wage loss, medical expenses, and rehabilitation or retraining programs to help employees return to work.

At the same time, WCB protects employers from lawsuits filed by injured workers. Most employers are legally required to register with WCB and pay premiums. For more information, visit www.awcbc.org.

Filing with Both WCB and the Group Insurer

When WCB approves a claim, employees and employers often assume that no further action is needed. However, to maintain eligibility for benefits under the group disability plan, a claim must also be filed with the group insurer.

Filing with both organizations ensures the employee remains covered under the group plan and prevents issues with life waiver of premium or long-term disability (LTD) benefits. To avoid future complications, it's best to file the group insurance claim at the same time as the WCB claim.

How Benefits Integrate with WCB

While WCB is the primary payer for work-related disabilities, group insurance benefits may supplement WCB benefits in certain circumstances.

For example, WCB may initially pay full wage-loss benefits, but later transition the employee to a smaller WCB disability pension. At that point, the employee may qualify for disability benefits through the group insurer to top up income and make up the difference.

This coordination ensures the employee continues to receive financial support while unable to work.

THE JOHNSTONE'S ADVANTAGE

Our mission is simple: **Treat each client as if they were our only client**.

Our value is clear: **We are completely independent**. We work for you and offer total flexibility on insurers and plans.

We offer all your group insurance services including administration, brokerage, consulting, and communications.

We provide dedicated client support, customization and flexibility to meet all of your company's benefits needs. And we make **solid group plans simple**.

Waiver of Premium

Group life insurance, accidental death and disablement (AD&D), short-term disability, and long-term disability plans often include a waiver of premium provision.

This means that if an employee becomes disabled and meets the insurer's criteria, their coverage can continue without payment of premiums. To qualify, the claim must be submitted to the insurer in a timely manner, regardless of whether WCB is already paying benefits.

Late Filing Protocol

If the group disability claim was established with the insurer at the start of the disability, the employee only needs to provide:

- Copies of WCB correspondence, and
- Updated medical information to support the disability claim.

However, if the claim was not filed with the insurer at the onset of the disability, it can be very difficult to establish later.

Insurance contracts contain a "Notice of Claim" provision requiring the insurer to be notified within 90 days of disability and for the claim to be fully submitted within one year. Late notification may result in declined benefits.

Start the Claims Process Early

The approval process for long-term disability (LTD) claims can be lengthy and requires detailed information from several sources.

If an employee anticipates being unable to return to work before the elimination period ends (typically after four months), they should begin gathering the necessary information as soon as possible.

Employees should inform their employer that they intend to file an LTD claim so the proper forms can be provided. Our team will assist both the employee and employer throughout the submission process.

Each claim must include information from:

- The employee
- The attending physician
- The employer

While employee and employer information is generally straightforward to complete, medical documentation can take time. Physicians may charge a fee to complete the required forms, and their report is a key component of the insurer's decision.

Allowing sufficient time for the physician to prepare a complete and accurate report can help prevent delays in claim approval.

We're Here to Help

If you have any questions about WCB integration or the disability claim process, please don't hesitate to contact our office. We are happy to assist!

CONTACT US

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JOHNSTONE'S JOURNAL is published monthly and designed to provide topical information of interest not only to plan administrators, but to all employees who enjoy coverage under the benefit plan. Feel free to make copies and share with your employees.