

April 30th, 2018

To: Benefit Administrators / Human Resource Personnel

From: Jade Lea-Wilson

**Manager, Employee Benefits** 

Re: CONTINUE EXTENDED HEALTH CARE AND DENTAL COVERAGE WHEN APPEALING A

**DISABILITY CLAIM** 

The Board of Trustees recently made an improvement to the benefit plans to automatically reinstate extended health care and dental coverage when a plan member is appealing the closure of their disability claim between 18 months (leave of absence extension period) and 2 years and 119 days (the maximum extension for health and dental). This change is effective May 1, 2018.

Currently, when a disability claim is closed after the maximum leave of absence provision but prior to 2 years and 119 days, extended health care and dental coverage ends on the date the disability claim closes. The plan member is no longer on an approved disability claim, therefore, the plan member is no longer eligible to be enrolled in the extended health and dental plan.

If the plan member successfully appealed the closure of their disability claim their extended health care and dental coverage was reinstated back to the date of the claim closure. The plan member was then able to submit any declined health and dental claims. This process added stress to the employee as they were out-of-pocket any money they had spent on health care and dental expenses until a decision was made on their appeal.

With this new benefit improvement, once a plan member appeals their declined disability claim, their extended health care and dental benefits will be automatically reinstated. They will be able to use their drug card and submit claims to Great-West Life for reimbursement. If the appeal is successful, they will continue with their benefits with no change. If the appeal is declined, the plan member will lose the extended health care and dental coverage on the date the decision is made on the appeal.

Employers are not required to submit anything to 3sHealth to facilitate this change. To administer this scenario, 3sHealth Employee Benefits will identify employees through a weekly query and manually reenrol the extended health care and dental plans.

This enhancement aligns the health and dental plan with the group life insurance plan, which already automatically continues during the appeal period. Changing this process will provide the employer a consistent way to administer these type of leaves, and, most importantly, makes the process easier for plan members and ensures they have access to the benefit plans during a challenging time.





## **KEY MESSAGES:**

- Plan member will be automatically reinstated in extended health care and dental benefits when appealing a declined disability claim between the leave of absence extension of 18 months and 2 years, 119 days.
- Employers do not need to action these changes. 3sHealth Employee Benefits processes are updated to re-enrol plan members in the extended health care and dental plans when they are appealing a closed DIP claim and have lost their health and dental coverage.
- The change is effective May 1, 2018.

If you have any questions about this benefit change, please contact me at <a href="mailto:jade.lea-wilson@3shealth.ca">jade.lea-wilson@3shealth.ca</a> or 306-347-1723.

