

March 3, 2020

To: Benefit Administrators / Human Resource Personnel

From: Kyle Stroeder

**Claim Services Manager, Employee Benefits** 

Re: Treatment Funding Requests for Plan Members on an Approved Disability Claim

**Employee Benefit Plans** 

In keeping with our Path to Health - Claims Management Re-design project, 3sHealth Employee Benefits may approve treatment funding to support a plan member on an approved disability claim. As part of our case management plan, adjudicators will have proactive conversations with plan members about treatment funding during the assessment of their application for disability income plan benefits.

A request for treatment funding may come from the plan member or the employer. 3sHealth may also determine that the plan member would benefit from an assessment and/or additional treatment that exceeds their coverage under their extended health care plan. In order to make a request for treatment funding, simply send an email to the adjudicator at <a href="mailto:ebp@3shealth.ca">ebp@3shealth.ca</a> stating the employee name, type of treatment being requested, and the cost (if known).

The request for treatment funding form is no longer in use. If you have a supply of the request for treatment funding form in your office, please recycle.

To be eligible for treatment funding, the plan member must have an approved and open 3sHealth disability claim. Plan members are not eligible for treatment funding if their claim is denied or closed.

To consider approval of treatment funding there has to be reasonable expectation that the additional treatment will assist the plan member to return to work or to their normal course of life.

If the plan member returns to work or their claim closes (example: change of definition) during an already approved treatment program, 3sHealth will continue to monitor the program as approved. 3sHealth Employee Benefits may approve additional funding where appropriate.

Eligible treatment funding may include but is not limited to:

- Physiotherapy
- Chiropractic services
- Massage therapy
- Counselling services
- Functional Capacity Evaluations (FCEs)
- Functional Abilities Evaluations (FAEs)





- Rehabilitation Assessments
  Mental Health Assessments
- Cognitive Testing
- Vocational Services (ex: vocational assessment, skills analysis, re-employment services)
- Functional or tertiary level treatment programs (programs that require, daily, all-day attendance for an extended period).

Requests for funding must be made and approved by 3sHealth in advance of the date that the treatment or evaluation first occurs. If this is not possible, the request must be received within 30 days of the first treatment date subject to approval.

3sHealth will not fund treatments or evaluations that the plan member does not attend.

All forms of benefit coverage need to be exhausted prior to any payment or reimbursement through treatment funding (extended health care, co-ordination of benefits, Veteran Affairs, alternate employment).

If you have identified a plan member who may benefit from additional treatment funding or have questions about the treatment funding program, please email <a href="mailto:ebp@3sHealth.ca">ebp@3sHealth.ca</a>. You may also contact the adjudicator assigned to the claim or Cheryl Pockrandt, Claim Services Specialist by telephone at our toll free number 1-866-278- 2301.

