



- Consulting
- Disability Management
- Claims / Administration
- Pension / Actuarial

November 2015

ATTENTION: DISTRICT CHAIRS, UNIFOR LOCAL 2002

**RE: UNIFOR LOCAL 2002 DISABILITY TRUST FUND
GROUP INSURANCE DISABILITY INCOME PLAN (GIDIP)
GIDIP APPLICATION PROCESS FOR MEMBERS EMPLOYED BY AIR CANADA
(CUSTOMER SALES & SERVICE; CREW SCHEDULING)**

The Board of Trustees for the above noted Plan has instructed Canadian Benefits Consulting Group as Plan Administrator for the Plan to bring to your attention a potential concern that may be queried by the Members applying for GIDIP benefits.

In the past, HR Connex was responsible for preparing the GIDIP Short Term Disability Claim Form Application and forwarding a package to each disabled Member (via mail) following the 6th day of the Member's absence.

It has been brought to our attention that Air Canada has brought this process back in-house and is now handled by the Disability Management Team. Consequently, Air Canada has changed the process whereas;

- **Following 14 consecutive days of the Member's absence**, the Attendance & Disability Specialist will complete the Plan Sponsor Statement of the GIDIP Short Term Disability Claim Form Application and forward the completed Plan Sponsor Statement directly to the Plan Administrator (Canadian Benefits Consulting Group) via email; and
- The Attendance & Disability Specialist will email the GIDIP Short Term Disability Claim Form Application package to the Member via their Air Canada email address (a package will be mailed if requested by the Member).

Attached please find a GIDIP Application overview that you may want to post for Members to review.

The Board of Trustees thought it would be beneficial to let you know in the event that Members approach you and question the delay to process and receive their GIDIP Short Term Disability Claim Form Application package.

Should you have any questions, please do not hesitate to contact me.

Yours truly,


Lynn Cross
Account Manager

Copy: GIDIP Board of Trustees
Executive Board

**Unifor Local 2002 Disability Trust Fund
Group Insurance Disability Income Plan (GIDIP)**

GIDIP Process for Making an Application for Short-Term Disability (STD) Benefits

Plan Members who are absent 14 consecutive days, because of Total Disability due to illness or injury, are eligible for Short Term Disability (STD) benefits.

1) When a member is aware that he/she will be absent from work for an extended period of time due to a disability, the Member must contact their Manager to advise that he/she is ill and will be absent from work.



• The Manager will advise the Attendance & Disability Specialist **following 14 consecutive days of the Member's absence**



• The Attendance & Disability Specialist will complete the Plan Sponsor Statement of the GIDIP Short Term Disability Claim Form Application and forward the completed Plan Sponsor Statement directly to the Plan Administrator (Canadian Benefits Consulting Group) via email

The Attendance & Disability Specialist will email the GIDIP Short Term Disability Claim Form Application to the Member via their Air Canada email address (a package will be mailed if requested by the Member).*



• The Member completes the Member Statement of the GIDIP Short Term Group Disability Claim Form Application



• The Member has his/her Physician complete the Attending Physician's Statement of the GIDIP Short Term Disability Claim Form Application



• A completed GIDIP Short Term Disability Claim Form Application (along with any other medical documents) is mailed to the Plan Administrator's Office**

*To expedite this process, Members have the option of obtaining a (blank) GIDIP Short Term Group Disability Claim Form Application from their District Chair or Members can access/download the Claim Form from the Unifor Local 2002 - GIDIP Web Site; or through the HR Connex portal (under Policies and Forms)

in order to complete their portion of the form as well as have the Physician's Statement completed in advance.

****Members also have the option of emailing or faxing their completed GIDIP Short Term Disability Claim Form Application to the Plan Administrator**

Email: GIDIP@canben.com

Fax: 416-488-7774

2) Adjudication Process of a Member's GIDIP Short Term Disability Phase I Claim by the Plan Administrator.



- Claims are acknowledged within 2 to 3 business days from receipt of claim.



- Claim is Assessed: The Disability Case Manager will conduct a telephone interview with the Member to obtain a complete understanding of the Member's disability; restrictions & limitations, treatment, etc.



Claim is Pended



- Further clarification may be required, i.e.:
- missing information
 - i. incomplete form
 - ii. missing form
 - additional medical
 - clarification of other benefits, i.e.:
 - i. WCB
 - ii. MVA



Claim is Declined



- Does not meet eligibility requirements
- Medical does not support Total Disability



Claim is Approved



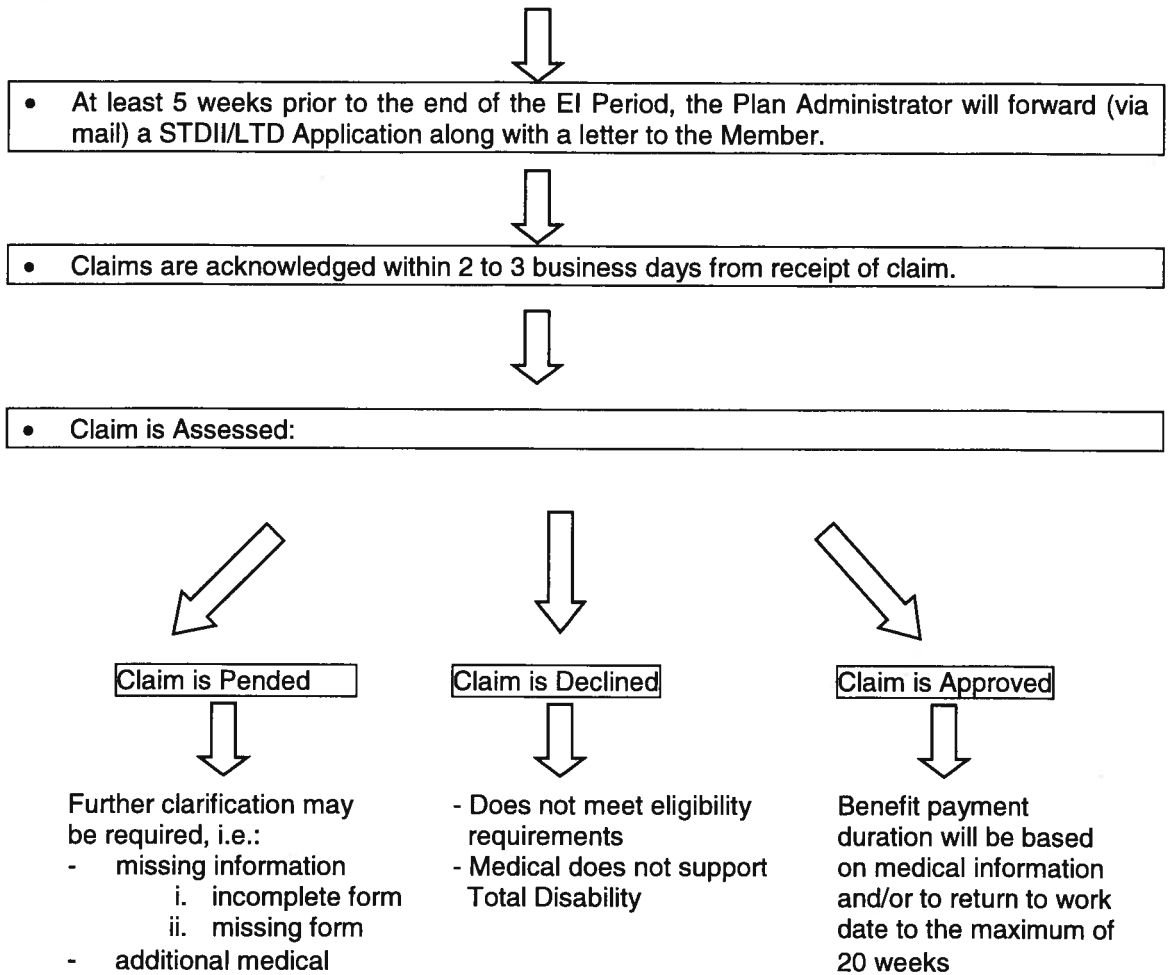
- Benefit payment duration will be based on medical information and/or to return to work date to the maximum of 15 weeks

3) Adjudication Process of a Member's GIDIP Short Term Disability Claim in the EI Period

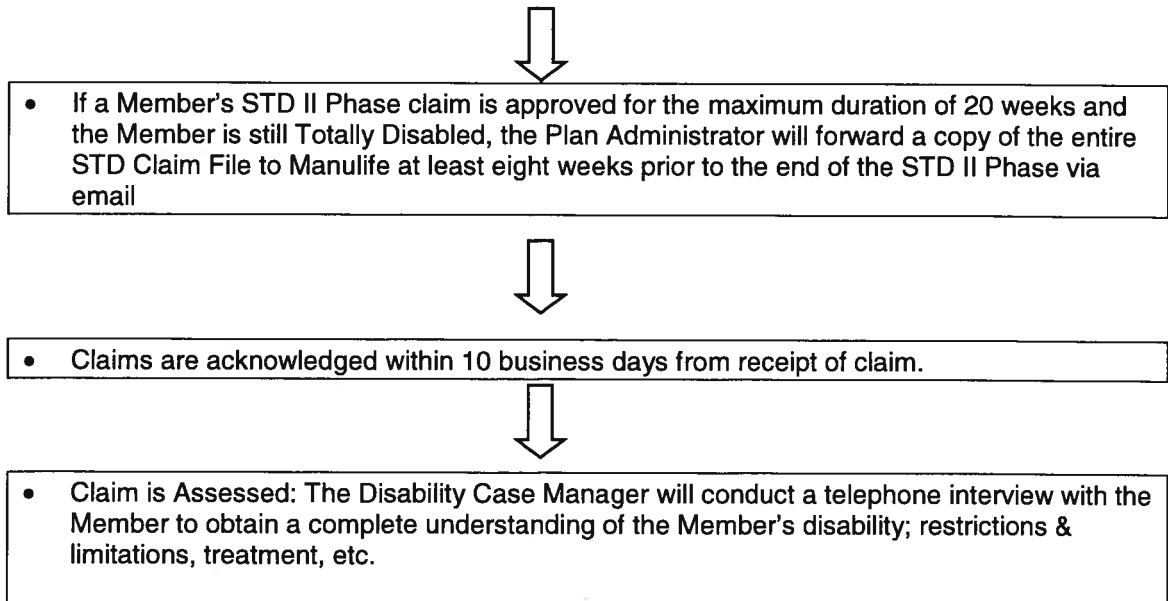


- If a Member's STD I claim is approved for the maximum duration of 15 weeks and the Member is still Totally Disabled, the Plan Administrator will advise the Member to apply for EI and an EI Invite Letter is mailed to the Member at least four weeks prior to the end of the STD I Phase
- During the EI Period, the Disability Case Manager will continue ongoing communication with the Member via telephone to obtain a verbal update on the Member's disability

4) Adjudication Process of a Member's GIDIP Short Term Disability Phase II Claim by the Plan Administrator



5) Adjudication Process of a Member's GIDIP Long Term Disability Claim by Manulife





Claim is Pended



- Further clarification may be required, i.e.:
- missing information
 - i. incomplete form
 - ii. missing form
 - additional medical
 - claim may be referred to internal medical consultant



Claim is Declined



- Does not meet eligibility requirements
- Medical does not support Total Disability



Claim is Approved



Benefit payment duration will be based on medical information and/or to return to work date to the maximum of age 65