



# FYI

## WORKER'S COMPENSATION AND YOUR CINUP DISABILITY COVERAGE

If you have Worker's Compensation coverage and an employee is injured at work, you immediately file a claim with the Worker's Compensation Board (WCB/WSIB), right? But what about your disability plan? If the claim is submitted to WCB/WSIB, many employers mistakenly believe there is no need to file a claim through your group insurance plan too. This is not the case. You must file a claim with CINUP in conjunction with your WCB/WSIB claim submission.

### The reasons are as follows:

#### 1. To avoid jeopardizing coverage eligibility

To be eligible for coverage under the CINUP plan, an employee must be actively at work and meet the eligibility requirements of the plan. If they are not at work coverage must terminate. The exception to this is if the employee is disabled and a disability claim is filed.

#### 2. To confirm eligibility for waiver of premium benefit

Claims submitted to RBC Insurance are not only reviewed to determine the employee's eligibility for benefit payment but also for eligibility for the waiver of premium benefit. This means that although the insurer may not pay the employee a monthly income, if the claim is approved, the employee's premium may be waived while they remain totally disabled, with the exception of Extended Health, Dental Care & the Employee Family Assistance Plan coverage. If the employee wishes to continue those benefits while on disability, they are responsible for premium payment.

#### 3. To take advantage of additional disability benefits.

Employees may be eligible for additional disability benefits, which can only be confirmed if you submit a claim through CINUP.

This can include coverage for injured employees through CINUP should they no longer meet the WCB/WSIB eligibility definitions or should their WCB/WSIB claim not meet the benefit maximum.

Our office will be happy to answer any questions you may have on this topic.

## WHAT CAN YOU AS A PLAN ADMINISTRATOR DO TO PROMOTE QUICKER DISABILITY CLAIM PROCESSING TIMES?

Providing smart counsel to your employees can assist in a speedier adjudication of their disability claims. Here are a few tips to consider:

- Encourage employees to read and complete all questions on the Short Term or Long Term Disability claim forms. This will eliminate the need for RBC Insurance to verify and/or collect any additional employee information once a claim has been submitted, increasing the time it takes to adjudicate the claim.
- Promptly submit all completed claim forms. The longer the delay in submitting a claim, the more likely additional medical information may be needed to process it, further adding to the delay.
- Encourage each employee to consult with his/her physician when completing the initial claim forms, to ensure accuracy and that the information is submitted in a timely manner.
- For ongoing claim decisions requiring updated medical information, encourage employees to secure this information directly from their physician themselves. Leaving this responsibility to the Insurance company could result in further delays in the adjudication of claims.

## EXTENDED HEALTH & DENTAL CLAIM FORMS

CINUP provides four different forms for your employees to use, depending on the type of claim. Knowing the differences will help you and your employees speed up the time it takes to process claims for reimbursement.

### **Dental Care claim form**

This is exclusively for dental-related claims. A standard dental claim form provided by your dentist is an acceptable alternative.

### **Vision Care claim form**

This form should be used to claim eyewear and eye examination reimbursements.

### **Extended Health Care form**

This form is used for reimbursement of chiropractic, massage, and athletic therapy expenses. It can also be used for podiatrist and foot care nursing expenses, as well as special equipment such as splints, casts and braces.

The policy and certificate numbers for these claims can be found on the yellow and grey wallet card.

### **Nexus claim form**

This form is to be used for prescription drug claims only. The ID and policy numbers can be found on the blue and white Blue Cross prescription drug card.

All our forms feature the CINUP and Manitoba Blue Cross logos, and include an address where claims should be sent. Please be sure to attach paid receipts to the forms you submit in order for reimbursement to be processed promptly. These forms can be found on our website at [www.cinup.com](http://www.cinup.com)

Please discard any Canada Life claim forms that you may have been using previously, as they are out-of-date and will not be accepted.

## CLARITY AND COMPLETENESS COUNTS!

When you, or an employee of yours, first completes a group insurance application, it is very important for all the information to be completed, and clearly written. This will ensure that we establish accurate records at the outset. It also sets the stage for prompt claims processing in the future, a benefit you will no doubt be grateful for.

There is certain information we require before an employee of yours can become an active group insurance member, and we recommend you provide this information when they first become an employee.

Here is a brief list of information that, if not provided accurately or completely, can lead to delays in coverage:

- Name of Employer**
- Employment Start Date**
- Effective Date for Coverage**
- Salary**
- Status or Non-Status Information**
- Type of Coverage (Single or Family)**
- Listing of Dependents**
- Employee Signature**
- Date Signed**



**We're here to help!**

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If you have any questions or comments on any of the topics covered, please contact our office.