

Understanding Your Benefits

Disability & Rehabilitation



01-Jun-2024

Table of Contents

Welcome	3
Disability & Rehabilitation Coverage	4
Eligibility	4
Enrolment	4
Premiums	5
Paid Sick Leave of Absence	6
Unpaid Sick Leave of Absence	6
Other Types of Leave of Absence or Layoff	7
Work Stoppages/Strikes	9
Transferring Your D&R Coverage	9
Reinstating Your D&R Coverage	10
Termination of Coverage	12
Notice of Illness or Injury	13
Applying For D&R Benefits	14
Recurrence of Illness or Injury	14
Applying for D&R Benefits While Receiving MPI or WCB Benefits	15
Late Submission	15
How to Avoid Delays in the D&R Claim Application Process	16
Understanding The Elimination Period	16
Eligibility for D&R Benefits	17
Benefit Calculation	19
Disability & Rehabilitation Plan Offsets	19
Pre-existing Condition Limitation	20
Exclusions	20
Termination of D&R Benefits	21
Claim Review and Appeal Hearing Processes	21
Premium-Free Benefits Coverage and Pension Accrual While Receiving D&R Benefits	22
Rehabilitation	23
More Information	24

The information provided in this brochure is intended to be general. In the event of any discrepancy or conflict between this brochure and the *Disability and Rehabilitation Plan Text* (D&R Plan Text) the D&R Plan Text language applies.

The D&R Plan Text is the final authority concerning or related to the administration and/or interpretation of the D&R Plan.

If your Date of Disability is before April 1, 2009 some of the information presented in this brochure may not apply to your case. Please consult the *Disability and Rehabilitation Plan Text* for more information.

Disability and Rehabilitation Plan Text terms used in this brochure are capitalized.

Throughout this brochure, “member” and “you” refers to “Employee” as defined in the *Disability and Rehabilitation Plan Text*.

The Disability & Rehabilitation Plan is also referred to as the D&R Plan or the Plan.

We look forward to serving you!



Welcome!

The HEB Manitoba Disability & Rehabilitation (D&R) Plan is your long-term disability plan.

It replaces a portion of your income if you are unable to work because you are ill or injured, provided:

- You apply for a claim, and
- HEB Manitoba:
 - Assesses that you are covered by the Plan and that you are Totally Disabled as defined by the *Disability and Rehabilitation Plan Text* and
 - Approves your claim.

The D&R Plan coordinates claims assessments, D&R Benefit payments, and Rehabilitation Programs.

Disability & Rehabilitation Coverage

Eligibility

Eligible Employees

Full-time and part-time employees (permanent or temporary/term)

- Must be part of an employee group that participates in the D&R Plan.

Employees Not Eligible for Coverage

- Casual employees,
- Employees age 64 and eight months or older,
- Employees who are part of an employee group that does not participate in the D&R Plan,
- Employees who previously opted out of the D&R Plan, and
- Employees who were denied coverage due to Evidence of Insurability or who have not completed the required Evidence of Insurability.

Enrolment

You are automatically enrolled in the D&R Plan when you are hired in an eligible position, when your Employer notifies HEB Manitoba that you are in a full-time or part-time position with an employee group that participates in the D&R Plan and D&R premiums are paid.

Participation in the Plan is a condition of employment, and you may not opt out.

During the enrolment process, you will be asked to acknowledge enrolment in the D&R Plan. If you do not acknowledge enrolment, you will still be enrolled in the D&R Plan.

Why do I need to acknowledge enrolment if I am automatically enrolled in the Plan?

Acknowledging enrolment is your opportunity to confirm that your Employer has reported your eligibility to us. If you are eligible for coverage and your Employer mistakenly does not let us know they have hired you into an eligible position, and/or does not submit premiums on your behalf, you will not be covered under the D&R Plan and you may be required to provide Evidence of Insurability.

If your eligibility is denied due to the Evidence of Insurability Assessment, you will not be eligible for D&R coverage while employed with that Employer. If your employment terminates, and you are later hired at another Participating Employer, you may participate in the D&R Plan if you meet the eligibility criteria and premiums are paid on your behalf.

Effective Date of Coverage

Your D&R coverage begins the day you begin active service in an eligible position and premiums have been paid on your behalf.

Active Service means in the performance of the Material and Substantial Duties of your Regular Occupation at the normal level of hours for which you were hired.

Premiums

The Healthcare Employees' Benefits Plan (HEBP) Board of Trustees sets premium rates for the D&R Plan.

For current premium rates, visit our website at hebmanitoba.ca.

The Link Between Premiums and Coverage

Your D&R Plan coverage depends on enrolment and premiums being paid.

Any time premiums are not paid, your D&R Plan coverage terminates, and you are no longer eligible to apply for D&R Benefits.

That is why it is important that you maintain your D&R coverage any time you are on a leave of absence or layoff.

Example:

Mary is diagnosed with cancer during her maternity leave.

- If she terminated her D&R coverage for her maternity leave, she would **not** be eligible to apply for D&R Benefits for her cancer-related sick leave.
- If she maintained her D&R coverage for her maternity leave, she would be eligible to apply for D&R Benefits for her cancer-related sick leave.

Paid Sick Leave of Absence

When you are receiving sick pay from your Employer, HEB Manitoba continues to receive D&R premiums through payroll deductions.

If you do not have enough banked paid time to cover the 119 calendar days after you become Totally Disabled (the Elimination Period), you must pay D&R premiums to maintain your coverage for the period not covered. We will contact you to arrange premium payments.

Unpaid Sick Leave of Absence

It is mandatory that you maintain your D&R coverage up to the date you are eligible to receive D&R Benefits (throughout the 119-day Elimination Period and beyond if a decision has not yet been made). This also applies if you are applying for, or have been accepted for, Workers Compensation Board (WCB) or Manitoba Public Insurance (MPI) benefits.

You must pay D&R premiums to maintain your coverage. We will contact you to arrange premium payments.

If a decision about your claim has not been made before the end of the 119-day Elimination Period, you must continue to pay your D&R premiums to maintain coverage. If you pay your D&R premiums beyond the 119-day Elimination Period and the claim is approved retroactively, we will refund any premium overpayment.

If you are on an approved sick leave of absence and receiving benefits from the Workers Compensation Board or Manitoba Public Insurance, you must continue to pay your premiums to continue D&R coverage.

If you are participating in an employer-paid Return to Work Program during the Elimination Period, premiums must be paid to HEB Manitoba while you participate in the Return to Work Program/Work Trial. The premiums are calculated based on your Monthly Earnings as of your last day worked.

If D&R premiums are not paid, your D&R coverage will terminate, and you will not be entitled to D&R Benefits.

Other Types of Leave of Absence or Layoff

How to Maintain Coverage During Your Unpaid Leave of Absence or Layoff

When you take an unpaid (non-sick leave) of absence or layoff, you must:

- Tell us if you are maintaining or terminating your coverage AND
- If you choose to maintain your coverage, arrange payment before the deadline provided in your Leave of Absence package.

If you have not arranged payment by the deadline, you will be deemed to have terminated your coverage for your entire leave.

We will send a package explaining your options once your employer notifies us about your leave.

You may maintain your coverage for up to 12 months. (Length of the approved unpaid leave for a maternity/parental leave or 24 months for an approved unpaid educational leave.)

The D&R premium payment is calculated based on your Monthly Earnings as of your last day worked.

Your coverage and premium payments through payroll will automatically be reinstated when you return to active employment (full duties/regular FTE).

If you are participating in a gradual return to work program you are still considered to be on leave.



Advantages of Maintaining D&R Coverage

If you arrange to pay D&R premiums to maintain your D&R coverage:

- You are eligible to apply for D&R Benefits if you become ill or injured during the leave/layoff, and
- You maintain your original Effective Date of Coverage.

What it Means if You Do Not Maintain Coverage

If you choose to terminate your D&R coverage by not paying your D&R premiums:

- D&R coverage terminates and:
 - you will not be eligible for D&R Benefits should you become ill or injured during your leave/layoff,
 - you will not be eligible to apply to transfer D&R coverage should you accept employment at another Participating Employer while on your leave/layoff,
- Your D&R coverage will restart the day you resume Active Service, and
- When you return to work, you will have a new Effective Date of Coverage. Consequently, if you stop work due to illness or injury within one year of the Effective Date of Coverage, the Pre-existing Condition Limitation provision will apply, and you may not be eligible for D&R Benefits.

Find more information about leave of absence and your other HEB Manitoba benefits on our website.

Maximum Coverage Period During Leave of Absence or Layoff

Type of Approved Paid/Unpaid Leave	Maximum Length of Time You Can Pay Premiums to Maintain D&R Coverage
Maternity/Parental	Length of the approved leave
Education	2 years
Personal and other leaves	1 year
Layoff	1 year
Sick	1 year

Work Stoppages/Strikes

You will not be covered during a work stoppage or strike unless your union arranges to pay premiums for the group of affected employees before the beginning of the work stoppage/strike.

An individual member of an affected union cannot pay premiums to maintain individual coverage.

Transferring Your D&R Coverage

If you are an eligible Covered Employee, you may seamlessly bridge your D&R coverage when you transfer from one Participating Employer to another Participating Employer, as long as:

- The transfer occurs within 30 days of termination of employment/coverage or, where specifically provided for in a Collective Agreement applicable to you, within 42 days,
- You complete the *Disability & Rehabilitation Plan Transfer of Coverage* in the member portal,
- You provide all required D&R premiums for the period between the termination of employment/coverage at your first Participating Employer and the start of employment at your new Participating Employer, and
- You were covered under the D&R Plan at the time of termination of coverage with your first Participating Employer.

The Pre-existing Condition Limitation provision of the D&R Plan will not apply to the transfer as long as you have been covered by the D&R Plan for at least 12 consecutive months before your termination of coverage date with the first Participating Employer.

You must be enrolled as a newly hired employee and all provisions of the D&R Plan, including the Pre-existing Condition Limitation provision will apply if:

- The commencement of employment at your new Participating Employer occurs after 30 days (or, where specifically provided for in a Collective Agreement applicable to you, within 42 days), OR
- Required premiums are not submitted.

If you are eligible to transfer coverage we will notify you and provide instructions.



Advantages of Transferring D&R Coverage

If, by the 30-day transfer deadline, you complete a D&R Transfer of Coverage and pay required D&R premiums, you will:

- Maintain your original Effective Date of Coverage (date D&R coverage begins).
- Be considered to have been actively working at your first Participating Employer during the period between employment/coverage.
- Be eligible to apply for D&R Benefits if you become Totally Disabled during the period between employment/coverage.

If you were covered by the D&R Plan for less than 12 consecutive months before your transfer, the Pre-existing Condition Limitation will apply until you have completed the remainder of the 12 months, which will continue to accumulate from the date you start employment with your new Participating Employer.

Reinstating Your D&R Coverage

The D&R Plan will allow the reinstatement of your D&R coverage if your coverage terminates as a result of:

- A sick leave, unpaid leave or layoff where you did not maintain D&R coverage.
- A strike where D&R coverage is not maintained, and premiums are not paid.

- A paid or unpaid leave or layoff that exceeds the maximum period of coverage.
- Termination of employment.
- Transferring to an employee group (at the same employer) excluded under the D&R Plan.
- Not providing required D&R premiums.

D&R Coverage May be Reinstated if You:

- Become re-employed:
 - Within 180 calendar days of the termination of your D&R coverage,
 - With the same Participating Employer,
 - Within an employee group covered under the D&R Plan, and
 - In a position eligible for D&R coverage,
- Complete the reinstatement process within 30 days of recommencing service, AND
- Pay D&R premiums for the period between the end of your D&R coverage and your return to work. *(Unless you transferred to an employee group at the same employer that is excluded under the D&R Plan and then return to work in an employee group covered under the D&R Plan).*

Advantages of Reinstating D&R Coverage

If you reinstate your coverage, you will maintain your original Effective Date of Coverage.

If you do not reinstate your coverage, you will be enrolled as a newly hired employee with a new Effective Date of Coverage when you return to work.

If you stop work due to illness or injury within one year of your new Effective Date of Coverage, you may not be eligible for D&R Benefits as the Pre-existing Condition Limitation will apply.

If you are eligible for reinstatement, we will notify you and provide instructions.

Termination of Coverage

D&R coverage terminates when one of the following occurs:

1. Your employment terminates,
2. You transfer to an employer who does not participate in the D&R Plan,
3. You change jobs with a Participating Employer and start working in an employee group that does not participate in the D&R Plan,
4. You stop work due to an unpaid leave of absence or layoff and do not maintain D&R coverage,
5. Your leave of absence or layoff exceeds the maximum time period,
6. You reach age 64 and eight months,
7. You change to casual employment,
8. Required D&R premiums are not paid,
9. The D&R Plan terminates, or
10. Upon your death.

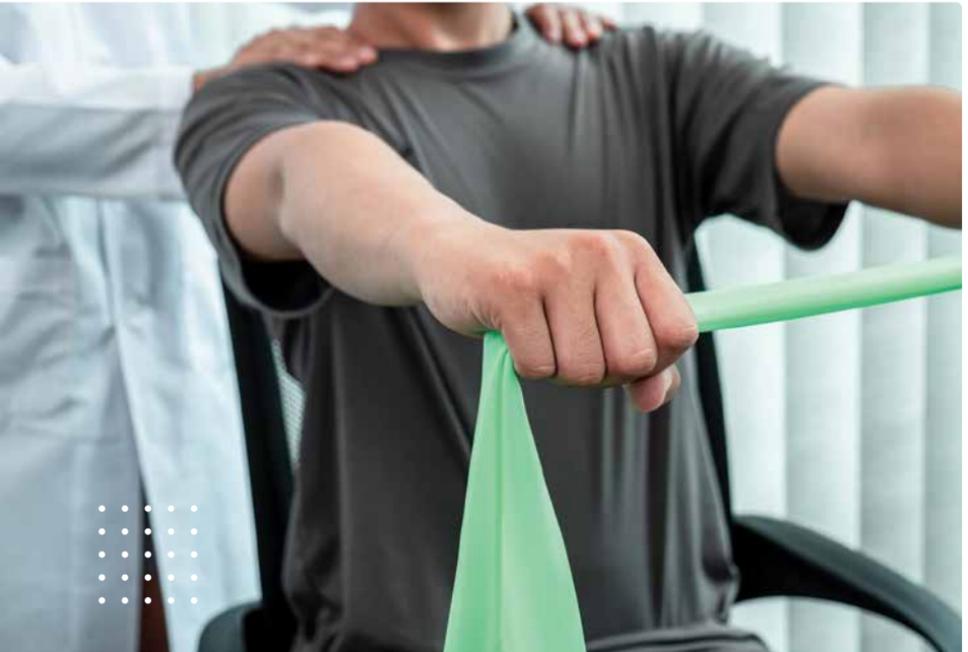
Notice of Illness or Injury

If you stop working due to illness or injury and you expect to be off work for an extended period of time, you or your Employer must notify HEB Manitoba. Your Employer is required to submit a *Notice of Absence* to HEB Manitoba within 60 days from the date your injury/illness began.

For a recurrent claim, HEB Manitoba must receive the *Notice of Absence* from your Employer within 30 days of the start of the injury or illness.

Once HEB Manitoba receives the *Notice of Absence*, we confirm that you are eligible to apply for D&R Benefits by verifying that you are a member of the D&R Plan and your premiums have been paid.

Then the application process begins.



Applying for D&R Benefits

The D&R application process is quite detailed, and it may take considerable time to complete necessary documentation. Therefore, it is important that you begin the application process as soon as possible to avoid delays and ensure that any D&R Benefits you may be eligible to receive start as soon as reasonably possible under the D&R Plan.

The D&R application consists of three parts:

1. *Member Statement,*
2. *Physician Statement,* and
3. *Employer Statement.*

All claim application documents constitute Proof of Claim as described in the D&R Plan Text.

If HEB Manitoba determines that you are eligible to apply for D&R Benefits, we will send the *Member Statement*, *Physician Statement* and other forms to you for completion. The *Employer Statement* is sent to your Employer to complete.

To make a D&R claim, all application forms must be completed and submitted to HEB Manitoba within 180 days from the Date of Disability (within 60 days after the end of the Elimination Period – see more about the Elimination Period below).

Once all the completed application forms are submitted, HEB Manitoba will assess your claim.

Recurrence of Illness or Injury

After the termination of a period of Total Disability, if you were unable to work again due to the same or a related cause, you must reapply if you want to be considered for D&R Benefits (provided you are still covered by the D&R Plan and D&R premium has been paid).

If after the termination of a period of Total Disability:

- **You were unable to work again within six months,** it is considered a continuation of the first period of disability (a recurrent claim). If your claim is approved as a recurrent claim, your D&R Benefits will be effective the date of your Recurrent period of Total Disability. Your benefit amount will be calculated based on your Monthly Earnings as of your last day worked before your first period of Total Disability.
- **You were unable to work again more than six months after your initial period of Total Disability,** it is considered a new claim.

Applying for D&R Benefits While Receiving MPI or WCB Benefits

If you have applied for MPI or WCB benefits, it is important that you also apply for D&R Benefits.

You must submit your complete application within 180 days from the Date of Disability (within 60 days after the end of the Elimination Period – see more about the Elimination Period below).

Although your D&R Benefit amount will be offset by any amounts you receive from MPI or WCB, if your D&R application is approved:

- You may be eligible for premium-free coverage for the HEB Manitoba Benefit Plans that you were covered under as of your last day worked. This may include Life Insurance, Healthcare, Dental, and D&R.
- You will continue to accrue (build) credited service as if you were still at work if you contributed to the HEB Manitoba Pension Plan as of your last day worked.
- You may be eligible to receive a monthly D&R Benefit if your MPI or WCB benefit terminates. (If you wait until your MPI or WCB benefits terminate before applying for D&R Benefits, you could be faced with a period when you are without any benefits, or your D&R claim could be denied if it is a late submission.)

For more information, see *Premium-Free Benefits Coverage and Pension Accrual While Receiving D&R Benefits* later in this brochure.

Late Submission

Under the terms of the D&R Plan, a late application will be denied unless there is a written explanation satisfactory to HEB Manitoba as to why the application could not be submitted within 60 days after the end of the Elimination Period (within 180 days from the Date of Disability).

If it is not possible for you to submit your application within 60 days after the end of the Elimination Period, you should still submit your application and supporting documents; however, you must also provide a letter explaining why your application is late.

How to Avoid Delays

In the D&R Claim Application Process

- Apply early!
- Ensure that you complete the forms in full and sign and date each form.
- Include a copy of one of the following documents to prove your age: birth certificate, baptismal certificate, Canadian passport, or Certificate of Canadian Citizenship.
- Include any additional information that establishes your eligibility for D&R Benefits with your application.
- You do not need to wait for your Physician to complete the *Physician Statement* before submitting your portion of the D&R application. It is your responsibility to ensure your Physician submits the *Physician Statement* on time.
- Have your Physician submit copies of all clinical notes, consult reports and test results related to the medical condition for which you are claiming benefits.
- Complete the *Direct Deposit Request* form included with your *Member Statement*. Make sure to provide the financial institution number, branch transit number and account number. If you have a bank account on file with us, ensure that you provide the same account information.

Understanding the Elimination Period

The 119 calendar days after you become Totally Disabled are known as the Elimination Period.

If your claim is approved, you are eligible to receive D&R Benefits after the Elimination Period is satisfied.

During the Elimination Period, you may be eligible for sick pay, banked paid time or vacation pay from your Employer, or Employment Insurance Sickness Benefits.

If you have maintained your coverage during an approved leave, layoff or work stoppage, and become Totally Disabled during this time, the first day of your Elimination Period will be your Date of Disability.



Eligibility for D&R Benefits

To be eligible for D&R Benefits, you must:

- Submit a completed D&R Claim application within the required time frame; and
- Be eligible for benefits based on the definition of Total Disability (see below) and other *Disability and Rehabilitation Plan Text* provisions.

Total Disability: Own Occupation Period

You are eligible to receive D&R Benefits if, during the 119-day Elimination Period and the subsequent 20 months, you are deemed Totally Disabled by reason of a medical condition certified by a Physician, and are:

- Under the Regular Care of a Physician,
- Unable to perform the Material and Substantial Duties of your Regular Occupation, and
- Not engaged in any occupation for wage or profit, except as permitted while participating in a HEB Manitoba Approved Rehabilitation Program.

The foregoing shall not prevent a Covered Employee from participating in a Return to Work Program as defined by the D&R Plan Text.

D&R premiums must be paid to HEB Manitoba up to the date HEB Manitoba confirms to you in writing that you are eligible to receive D&R Benefits. If premiums are not paid, your coverage will terminate and you will not be entitled to D&R Benefits.

Total Disability: Any Occupation Period

After the Elimination Period and the subsequent 20 months, the definition of Totally Disabled changes. At this time, your claim will be reassessed to determine if you are eligible to continue receiving D&R Benefits.

To be eligible for continued D&R Benefits after the Elimination Period and the subsequent 20 months, you must be Totally Disabled by reason of a medical condition certified by a Physician, and:

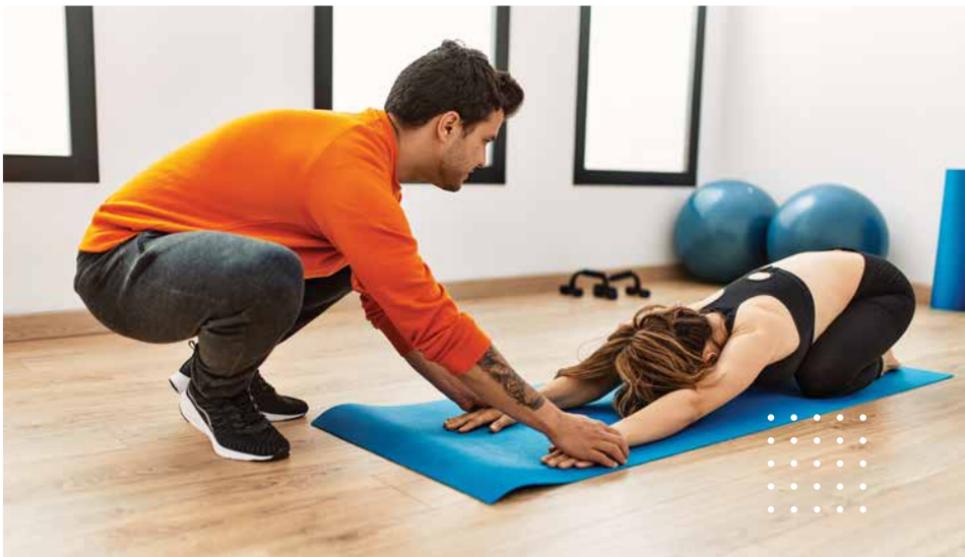
- Under the Regular Care of a Physician, and
- Unable to perform the Material and Substantial Duties of your Regular Occupation or the duties of some other occupation for which you are reasonably suited by education, training or experience, which would provide you with earnings equal to, or greater than, 66⅔% of the Monthly Earnings you were receiving at your Date of Disability,

OR

Able to perform the Material and Substantial Duties of your Regular Occupation or the duties of some other occupation for which you are reasonably suited, but you can provide medical certification that your disability is the result of a medical condition which is of such a character that common care and prudence require you to desist from doing any work for wage or profit,

AND

- Not engaged in any occupation for wage or profit, except as permitted while participating in a HEB Manitoba Approved Rehabilitation Program.



Benefit Calculation

If you are approved for D&R Benefits, you will receive 66⅔% of your Monthly Earnings as of your last day worked, rounded up to the next dollar.

Monthly Earnings means your basic hourly rate of pay, including academic allowance or qualification pay, as of your last day worked; multiplied by the average number of bi-weekly hours worked over the immediately preceding 26 pay periods exclusive of overtime, bonuses, premiums, and allowances, including northern allowances, whether paid periodically or by way of a lump sum payment; and divided by 12. If you have been employed for fewer than 26 pay periods as of your last day worked, Monthly Earnings will be calculated based on the period actually worked.

If you experience an employment status change within the 26 pay periods before your last day worked, your D&R Benefit will be calculated based on the average number of bi-weekly hours worked in your new employment status.

Other important information:

- The monthly D&R Benefit amount may be reduced by Plan offsets (see *Offsets* section),
- The maximum D&R Benefit amount is \$10,000 per month,
- D&R Benefits are taxable, and
- Monthly D&R Benefits are directly deposited into your account on the last day of the month.

Disability & Rehabilitation Plan Offsets

You must apply for any other disability benefits or income replacement benefits you may be eligible to receive.

If you are eligible to receive disability benefits from other sources, such as but not limited to, the Canada Pension Plan, Quebec Pension Plan, Workers Compensation Board, or Manitoba Public Insurance, your monthly D&R Benefit payment will be reduced by these amounts. **This reduction is called an offset.**

If you do not apply for benefits from other sources for which you may be eligible, an offset may be made, regardless of whether the benefit is actually applied for.

Other earnings, benefits, payments and income or certain other payments received as a result of certain Third-Party Claims will also be applied as an offset based on the D&R Plan provisions.

While entitled to D&R Benefits, your total monthly income from the D&R Benefit and other sources of income (based on the Plan provisions) cannot exceed 85% of your Monthly Earnings as of your last day worked.

You must notify your Claims Specialist if you receive any insurance benefits or payments that may qualify as offsets. Your failure to do so may result in the termination of your D&R Benefits.

Earnings from Termination of Employment

You must notify the D&R department if you retire or your employment is terminated while receiving or applying for D&R Benefits.

While you receive D&R Benefits, you are required to report any employment or termination earnings, including but not limited to severance pay received as a lump sum or salary continuation, to the D&R department. These amounts will be applied as offsets.

Pre-existing Condition Limitation

There is a Pre-existing Condition Limitation provision that will be considered if you become Totally Disabled and have been covered under the D&R Plan for less than 12 consecutive months:

- If, in the 90 days before your Effective Date of Coverage, you incurred medical expenses or received care or treatment by a Physician for a disability resulting from the same or a related cause that is being claimed for, you will not be entitled to D&R Benefits UNLESS
- In the 90 days after your Effective Date of Coverage, you have not incurred medical expenses or received care or treatment by a Physician for a disability resulting from the same or a related cause that is being claimed for.

Exclusions

You are not eligible for D&R Benefits if your disability is caused by any of the following:

- A disabling illness for which you are not under continuing Regular Care and treatment consistent with the nature of the disability, and satisfactory to HEB Manitoba,
- An illness or disability caused (directly or indirectly) from participation in an insurrection or war, declared or undeclared,
- A disability caused (directly or indirectly) by committing, attempting to commit, or provoking a criminal offence under the *Criminal Code of Canada*,

- A disability caused by operating a motorized vehicle while impaired by drugs or with an alcohol level that exceeds the legal limit under the Criminal Code of Canada,
- An intentional, self-inflicted injury or illness where there is no corresponding mental illness,
- A disability or illness caused by employment with a non-participating employer, including self-employment, or
- Medical or surgical care that is not normally covered by Manitoba Health, regardless of where the medical or surgical care is provided.

Termination of D&R Benefits

Your monthly D&R Benefits terminate on the day one of the following occurs:

- You no longer meet the definition of Total Disability,
- You are employed in any occupation for wage or profit (except if participating in a HEB Manitoba Approved Rehabilitation Program),
- You reach age 65,
- You die,
- You fail to provide accurate information deemed by HEB Manitoba as necessary to evaluate continued eligibility for D&R Benefits,
- You refuse HEB Manitoba's request to be examined by an independent Physician or Alternative Care Provider,
- You refuse to participate in or do not co-operate with an Approved Rehabilitation Program,
- You refuse to follow or do not follow care or treatment prescribed by your Physician,
- You refuse an offer of alternate employment with a Participating Employer,
- You fail to comply with Third Party Claim requirements or breach any term of a Reimbursement Agreement, or
- You receive a disability pension from the Healthcare Employees' Pension Plan, or any other registered pension plan sponsored by your employer.

Claim Review and Appeal Hearing Processes

If you disagree with a decision we make to decline or end your D&R claim, you have the right to ask us to review it.

You can find information on our website at hebmanitoba.ca.

Premium-Free Benefits Coverage and Pension Accrual While Receiving D&R Benefits

If your application for D&R Benefits is approved, you may receive premium-free coverage for the HEB Manitoba Benefit Plans that you were covered under as of your last day worked. This may include Life Insurance, Healthcare, Dental, and D&R.

If you contributed to the HEB Manitoba Pension Plan as of your last day worked, you will continue to accrue (build) credited service as if you were still at work. This pension accrual is provided at no cost to you or your employer while you are receiving D&R Benefits. (Pension accrual does not apply to you if you are already receiving your HEB Manitoba pension.)

Pension contributions must be deducted from earnings that you receive from your Employer during your sick leave.

What happens to my HEB Manitoba Life Insurance coverage if my D&R claim terminates?

If your D&R claim terminates and you have not returned to work, your premium-free HEB Manitoba Life Insurance coverage will also terminate.

There is a 31-day period following the termination of your coverage in which you may convert your Life Insurance and your spouse/common-law partner's Life Insurance coverage to an individual Life Insurance Policy with Canada Life without Evidence of Insurability (subject to maximum age and conversion limits).

Life Insurance coverage is maintained for you and your spouse/common-law partner during this 31-day period.

For Life Insurance conversion inquiries, please call a Canada Life individual insurance client service associate at 1-888-252-1847.

To convert your coverage, Canada Life must receive your completed application and the first premium payment within 31 days of the date your claim terminates.



Rehabilitation

The D&R Plan supports rehabilitation programs for eligible claimants. A Rehabilitation Specialist or external rehabilitation provider may be assigned to help you establish a suitable rehabilitation goal. The Rehabilitation Specialist or external rehabilitation provider will develop your personalized rehabilitation goal in consultation with you and your treating Physician(s). They may also consult your union and Employer as members of your rehabilitation team. Your Rehabilitation Specialist will monitor your rehabilitation program; however, your D&R claim will continue to be directed by your Claims Specialist.

The HEB Manitoba Rehabilitation Program is mandatory. Refusal to participate in an Approved Rehabilitation Program will affect your entitlement to D&R Benefits. (See the *Termination of Benefits* section).

More Information

You can get more information in the following ways:

hebmanitoba.ca

Visit hebmanitoba.ca for information about your benefits and to access the member portal.

Member Portal

Log in to the member portal at hebmanitoba.ca. You can use the tools on the member portal to:

- See coverage and premium details for your HEB Manitoba benefits
- Update your personal information
- Report life events to keep your coverage up to date
- View your Annual Statements and other HEB Manitoba documents
- Communicate with us on a secure platform
- And more...

Email

DRinfo@hebmanitoba.ca

Please do not include personal information in your email.

Fax

204-975-1165

Mailing Address

HEB Manitoba
900-200 Graham Avenue
Winnipeg, Manitoba R3C 4L5

Accessibility

This publication is available in alternate formats on request. To request an alternate format, please email us at accessibility@hebmanitoba.ca.

Telephone

Phone: 204-942-6591

Toll-free: 1-888-842-4233

Privacy

Direct privacy-related questions, comments, or requests to:

HEB Manitoba Privacy & Policy Office

Phone: 204-975-3197

Toll-free: 1-855-975-3197

Email: privacy@hebmanitoba.ca

You can read our Privacy Notice on our website at hebmanitoba.ca.

