

Long Term Disability Income (LTDI) Continuance Plan Appeals Process

The adjudication of LTDI applications for benefit eligibility is provided by The Great-West Life Assurance Company.

When The Great-West Life Assurance Company (adjudicator) determines that an employee is not eligible for LTDI benefits or that LTDI benefits are to cease:

- the deputy head of the employing ministry may request that the adjudicator review the claim; or
- the employee may request that the adjudicator review the claim.

This request for review is formalized when an employee files a Notice of Appeal which then commences the appeal process. The following is intended to assist in clarifying the process.

Appeal Process

The appeal process has two levels:

- First Level consists of submitting additional information and requesting an appointment (optional) with the adjudicator to discuss the discontinuation of benefits.
- Second Level consists of submitting additional information and a hearing where the employee or their advocate makes representation to the Second Level Appeal Board.

The purpose of the appeal is for the employee to provide additional (written and/or verbal) information they view as relevant to their claim.

Continuation of group benefits during an appeal

An employee is placed on a leave of absence without pay at the end of their LTDI notice period. The employee and employer will continue to pay their respective share of all other group benefit and pension plan contributions for those plans the employee is covered and enrolled in.

First Level

Notice of Appeal

An employee who wishes to appeal the adjudicator's decision must complete and submit a Notice of Appeal within 30 calendar days from the date of the letter sent by your Service Alberta LTDI Liaison Officer advising of the denial or discontinuation of LTDI benefits. (<http://psc.alberta.ca/benefits/forms/notice-of-appeal.pdf>)

The Notice of Appeal outlines the areas for appeal consideration, namely:

- medical reasons; and/or
- misinterpretation of evidence submitted; and/or
- requesting an appointment to meet once with the adjudicator to make a presentation.

The employee must indicate their reason(s) on the Notice of Appeal. The Notice of Appeal is sent directly to the adjudicator.

The employee may submit new or additional medical information and/or other written material within 90 calendar days from the date of the employer's letter, as indicated on the Notice of Appeal.

The employee is responsible for any costs incurred for obtaining and submitting the supporting information.

Discussion with the adjudicator

An employee may request on the Notice of Appeal form an appointment to meet once with the adjudicator, in Edmonton, to clarify the claim decision. Employees not residing in the greater Edmonton area can request a teleconference appointment.

Employees who are members of the Bargaining Unit may choose to attend their appointment with the Alberta Union of Provincial Employees (AUPE) LTDI Liaison Officer. No outside legal representation is permitted at this level in keeping with the Letter of Understanding signed between the employer and the AUPE. Costs incurred for travel and subsistence are the responsibility of the employee.

Employees in a Management, Opted Out & Excluded classification may attend their appointment accompanied by a representative of their own choosing. Costs incurred for travel, subsistence and representation are the responsibility of the employee.

When the employee has requested an appointment, the adjudicator will arrange the appointment date. It is beneficial to schedule this meeting at or around the 45th day within the 90 day timeline. Discussion with the adjudicator may clarify the decision made on the claim and/or identify areas or issues where additional information is required by the adjudicator. Examples of such information are updated medical reports, additional medical reporting or providing a clearer description of job duties. A decision is not made at this meeting by the adjudicator.

Following the meeting, the employee can then complete collection of all related and identified information for submission to the adjudicator within the 90 day timeline. If an extension to the 90 days is required, a written request for extension consideration can be made.

Request for consideration of extension to 90 day deadline

A request for an extension beyond 90 calendar days to submit additional information may be made by the employee as follows:

Bargaining Unit

All requests for consideration of the 90 days extension at the first level:

- must be in writing from the AUPE LTDI Liaison Officer;
- must be medical in nature as the reason for the extension being requested (i.e. awaiting report from specialist);
- must be received by the LTDI Manager, Alberta Public Service Commission, prior to the expiry of the 90 days.

Management, Opted Out & Excluded

All requests for consideration of the 90 days extension at the first level:

- must be in writing from the employee or their representative;
- must be medical in nature as the reason for the extension being requested (i.e. awaiting report from specialist);
- must be received by the LTDI Manager, Alberta Public Service Commission, prior to the expiry of the 90 days.

Review by adjudicator

Upon the expiry of the 90 days (or extension), the adjudicator conducts the appeal review based on their file which includes all information provided by the employee in support of the appeal. The adjudicator will provide, in writing, the decision. The outcome of this review may be:

- that the original decision is overturned, LTDI benefits are approved or continued for as long as the employee remains eligible under the Public Service LTDI Plan Regulation; or
- the initial decision remains the same. When this occurs, the employee has the right to file a second appeal, reviewed by an independent Appeal Board.

Second Level

Where the first level appeal decision remains the same as the initial decision, the employer will mail a Notice of Appeal to the employee.

Notice of Appeal

An employee who wishes to appeal the adjudicator's first level decision must complete and submit their Notice of Appeal request within 30 calendar days from the date of the letter sent by your Service Alberta LTDI Liaison Officer advising of the denial of the first level appeal. (<http://psc.alberta.ca/benefits/forms/notice-of-appeal.pdf>)

The Notice of Appeal must again outline the areas for appeal consideration namely:

- medical reasons; and/or
- misinterpretation of evidence submitted; and/or
- requesting an appointment to meet and make a presentation.

The employee must indicate the reason(s) on the Notice of Appeal that is submitted directly to the adjudicator.

Within 90 calendar days from the date of the employer's letter, the employee at their own cost provides to the adjudicator new or additional medical information and/or other written material as indicated on their Notice of Appeal. If the information is not received within this timeline and no request for extension was granted, the review will be based on the information on the adjudicator's file.

Request for consideration of extension to 90 day deadline

A request for an extension beyond 90 calendar days to submit additional information may be made by the employee as follows:

Bargaining Unit

All requests for consideration of the 90 days extension at the second level:

- must be in writing from the AUPE LTDI Liaison Officer;
- must be medical in nature as the reason for the extension being requested (i.e. awaiting report from specialist);
- must be received by the LTDI Manager, Alberta Public Service Commission, prior to the expiry of the 90 days.

Management, Opted Out & Excluded

All requests for consideration of the 90 days extension at the second level:

- must be in writing from the employee or their representative;
- must be medical in nature as the reason for the extension being requested (i.e. awaiting report from specialist);
- must be received by the LTDI Manager, Alberta Public Service Commission, prior to the expiry of the 90 days.

Review by adjudicator

Upon the expiry of the deadline, the adjudicator will conduct a further review of all of the information submitted in support of the second level appeal. The review prior to the second level appeal hearing can either:

- overturn the first level appeal decision resulting in LTD benefits being approved or continue with these benefits being paid for as long as the employee remains eligible under the Public Service LTDI Plan Regulation; or
- refer the appeal to the independent LTDI Second Level Appeal Board.

Second Level Appeal Board

The independent Bargaining Unit LTDI Second Level Appeal Board is comprised of one representative nominated by the AUPE, one representative nominated by the employer, and one public representative agreed to by the employer and the AUPE. The Appeal Board holds its hearings in Edmonton.

The independent Management, Opted Out & Excluded Long Term Disability Plan Second Level Appeal Board is comprised of four (4) persons appointed by the Public Service Commissioner. Three (3) Appeal Board members will sit at each appeal hearing. The Appeal Board holds its hearings in Edmonton.

The Appeal Board meets once with the employee, who may be in attendance. The issues of appeal to be dealt with by the Appeal Board are those put forward by the employee on their Notice of Appeal. The Board reviews these with the employee to ensure clarification.

The employee is responsible for any costs incurred for travel, subsistence and representation (where the AUPE LTDI Liaison Officer is not used by the Bargaining Unit employee) at the Appeal Board.

The Appeal Board will not accept and cannot deal with any new medical information introduced at the hearing.

The Appeal Board must be advised if an observer (non-speaking participant) will be attending with the employee.

At the Second Level appeal:

- The adjudicator presents a review of the claim, clarifies the decision made and answers questions, put through the Board, from the employee or the employee's representative and directly from the Board members.
- The employee may represent him/herself or may use a representative of their own choosing. For Bargaining Unit employees, the services of the AUPE LTDI Liaison Officer are available at no cost for representation.

The Appeal Board will review the employee's claim, taking into account the presentation by the adjudicator, employee or the employee's representative, medical information on file and other written information. The Board's decision is based on objective evidence, the LTDI Plan Regulation and its governance mandate. The decision is normally made within 7 calendar days of the appeal. It is verbally relayed to the employee or their representative (where there is one) initially, with a written decision being mailed within a week.

The Second Level Appeal Board's decision is final and binding on all parties (employee, employer, adjudicator, union, or employee representative).