

HOW TO FILE A WAGE INDEMNITY CLAIM

The Application for Wage Indemnity Plan Benefits, including the Claimant's Statement, and Physician's Statement, should be completed as soon as you know you will be off work for more than 14 days. Your 14-day qualifying period commences from the date of your first flight missed or reserve day, if on reserve.

YOUR COMPLETED APPLICATION MUST BE RECEIVED WITHIN 30 DAYS OF THE END OF YOUR QUALIFYING PERIOD.

Claimants Statement

Mail the completed claimant's statement directly to, **MANION, WILKINS & ASSOCIATES LTD.** Do not use crew boxes or leave at the Airport Office.

In case of an accident be sure to explain the circumstances on a separate sheet. (WCB, Motor vehicle, Home)

Ensure you sign and date the Authorization at the bottom of the page.

PHYSICIAN'S STATEMENT

You must see a Physician (M.D.) within the 14-day qualifying period in order to qualify for benefits commencing on the 15th day of your disability.

Have your treating Physician FULLY complete the Physician's Statement. Most claim delays are due to incomplete medical evidence. Please make sure that his/her name is legible and that the address and telephone number is complete.

Have your Physician clearly indicate the diagnosis, complications (if any), treatment, medication and all dates of visits.

If your Physician does not know when you can return to work, an approximate date should be given. To indicate "indefinite", will delay your claim.

If you are receiving treatment from any other medical practitioner who is not a licensed Physician (M.D.), you must **ALSO** be under the regular and ongoing care of a licensed Physician (M.D.).

Please sign the Authorization Request. If you do not to sign this authorization statement your claim will be returned to you, resulting in a delay.

DO NOT ALTER OR ADD ANY INFORMATION TO THE PHYSICIAN'S STATEMENT!

If you need additional information, please contact the HR Connex Centre toll-free at 1-855-855-0785, Monday to Friday, from 8 a.m. to 6 p.m. (ET).

Pour des renseignements supplémentaires, veuillez communiquer avec le Centre Connex RH au numéro sans frais 1 855 855-0785, du lundi au vendredi, entre 8 h et 18h (HE).

TO ENSURE CONFIDENTIALITY SEND PHYSICIAN'S STATEMENT DIRECTLY TO MANION, WILKINS & ASSOCIATES LTD.

THE EMPLOYER DOES NOT REQUIRE THE PHYSICIAN'S STATEMENT!

If your disability arose out of, or in the course of your employment, you **MUST** apply for Workers' Compensation (C.S.S.T. in Quebec). However, you must also apply for Weekly Indemnity benefits in the interim. All WI claims must be submitted within 30 days of the end of your qualifying period, regardless of whether you have also filed a Workers' Compensation claim. Failure to file a WI claim will jeopardize your entitlement to these benefits in the event that your Workers' Compensation claim is refused or terminated. Weekly Indemnity benefits will only be payable for a maximum of 120 days from the date of disability while a decision is pending from Workers' Compensation. Please contact your Regional Office for more information if you are applying for Workers' Compensation benefits.

When you have returned to work, Notify MANION WILKINS & ASSOCIATES immediately, so that your WIP claim can be finalized.

Your benefits will be deposited to your bank account, therefore please complete the Direct Deposit Application or submit a void cheque with your application.

While you are receiving WIP benefits, supplementary reports will be forwarded to you periodically. Upon receipt, have this report completed and returned to the Administrator, as soon as possible so payments will not be delayed. It is your responsibility to provide proof of disability. You must submit proof of disability **WITHIN 45 DAYS** of the commencement of disability. If you submit after 45 days, it will not be processed unless you can show sufficient reasons in writing for not applying earlier.

The claimant is responsible for having all forms completed and any charges incurred for completion of same. Although you may fax your documents in as notification of a claim, originals are required **before your claim will be processed**.

Please note. You must advise Manion, Wilkins & Associates before you travel at any time during your WIP claim. Out of country travel requires written medical clearance from your physician.

IF YOU HAVE ANY QUESTIONS OR PROBLEMS REGARDING YOUR CLAIM, OR CLAIM SUBMISSION, PLEASE DO NOT HESITATE TO CONTACT MANION, WILKINS & ASSOCIATES LTD.

ADMINISTRATOR:

MANION, WILKINS & ASSOCIATES LTD
626-21 FOUR SEASONS PLACE
ETOBICOKE, ON
M9B 0A6
Local: 416- 234-3513
Toll Free: 1-800-663-7849
Fax: 416-234-0127