

January 11, 2016

**To: Participating Employers  
3sHealth Core Dental, Enhanced Dental and Extended Health Plans**

**From: Bud Anderson  
Director, Employee Benefits**

**Re: Benefits Upon Return to Work from a 3sHealth Approved Disability Claim**

We are introducing a significant change to our benefit plan rules. This change will impact people who return to work from an approved 3sHealth disability or life waiver claim and are working a reduced number of hours or are working in a position that differs from their pre-leave position.

Discussions began some time ago with both Unions and Employers to find a way to provide coverage for people who return to work following a period of approved disability. Our new process will allow employees to regain their pre-leave level of health and dental coverage as soon as they return to work and a portion of their income is paid by their employer. The intent of this change is to do the right thing for employees who are trying to get back to work.

The new benefit plan rule is: *employees will now be considered active for benefit purposes as soon as they begin a Return to Work Program or return to their regular duties and begin to receive income from their employer.* This includes employees returning from either a short term or long term disability claim.

Essentially, this new process changes the definition of Return to Work for benefit purposes. Return to Work for benefit purposes will now be defined as any employee who returns to the work place and receives income (even a portion) from their employer. To accommodate this change in process, 3sHealth Employee Benefits requires assistance from employers to ensure that employees' benefit statuses are correctly set-up in iHRIS. ***The work standard that all employers will now follow is to set the Benefit Status in iHRIS to Active (1000) effective the date the employee returns to the work place and begins a return to work program.*** Please note that there is no requirement to change your current process with respect to the Payroll Status on iHRIS.

When the benefit status is changed to Active (1000), this will cause an E28 Workflow to generate. The E28 Workflow states that an employee has returned to work so the premium waiver flag should be removed. **This may no longer be the case.** If the employee is on integrated earnings, then the premium waiver should remain in place. It is only when the employee's claim is closed that the waiver should be removed. When you receive the E28 workflow, you will now have to review the employee record to determine if the waiver should be removed or not. If the employee is on integrated earnings you will

leave the waiver in place. You then must remember to remove the waiver when the disability claim is closed as the E28 workflow will not generate a second time. 3sHealth is currently working on a fix for the E28 workflow with respect to this new process and we anticipate it will be released in a patch release before the scheduled April version release.

We understand that employees sometimes attempt a return to work but are not successful. If an employee has been on a claim for less than 2 years and 119 days, returns to work, and then goes back on disability leave because their return to work was not successful, then the employee will retain their pre-leave level of coverage while on leave up to 2 years and 119 days from their original date of disability. If an employee has been on a claim for more than 2 years and 119 days, returns to work, and then goes back on disability leave, the employee's coverage will end as of their last day of being actively at work during their return to work. In both cases, if the employee tries to return to work again, their pre-leave level of coverage will be reinstated as of their return to work date.

In addition to employees having their benefits reinstated upon their return to work, employees who were on an approved disability leave that return to work will not receive an annual measure in the year they return to work. In the iHRIS V1.11 release, a change was made to annual processing to exclude these employees from the annual measurement in the year they return to work. Employees will retain their pre-leave level of coverage through the remainder of the calendar year in which they return to work and the following calendar year.

Once the annual measure is completed, 3sHealth Employee Benefits will run a query to identify other-than-full-time employees with an active status who had a disability claim in the previous year and should have increased coverage based on their hours worked. This query will also include employees who became permanent full-time effective the last half of the year and should have increased coverage based on their hours worked. 3sHealth will manually update these records and notify employers of the affected employees and the new coverage amount.

In order to capture all employees from January 1<sup>st</sup>, 2015 to present, 3sHealth Employee Benefits has changed the Benefit Status to Active on all employees on a return to work program since January 1<sup>st</sup>, 2015. These changes were completed over the last 2 weeks. We have made these changes based on the information available to us. If any of your employees were changed to Active by 3sHealth, you will receive an email with a list of all of the employees we have changed. Please review this list and ensure that we have correctly captured all of the employees currently on a return to work with your organization. If we have changed an employee in error, please let us know and we will correct it immediately. If we have reinstated benefits for one of your employees, who had previously lost coverage due to their claim extending beyond 2 years and 119 days, 3sHealth Employee Benefits will be sending them a letter to advise them that their coverage is now in place.

We will also be sending a second list to select employers where we have identified employees who may be on a return to work but we did not have enough information available to make a determination. Please review this second list. If there are employees on the list who should be changed to Active (1000), please go ahead and make those changes. If you require assistance with the changes, please let us know and we will be happy to assist you. If there are employees on the list and they should not be changed, please just disregard them. No change is necessary on iHRIS and you do not have to notify 3sHealth.

***Please note if an employee is unable to continue their Return to Work Program or they have recurrent Disability claims the employer must change their Active (1000) Benefit Status to Disability (4000) and notify 3sHealth Employee Benefits so we can update iHRIS and notify the employee that they have lost their coverage.***

***It is also important to note that 3sHealth Employee Benefits has changed all employees currently on a return to work to Active (1000) but going forward it will be the employer's responsibility to change the benefit status to Active for any employee returning to work. We have included a letter template that you can use to notify employees that their coverage is reinstated. If you have your own letter and prefer to us it you are welcome to do so.***

Following please find some example scenarios:

*Example 1: John began an approved disability claim in 2013 and lost his Health and Dental coverage at 2 years 119 days effective July 21<sup>st</sup>, 2015. He began a Graduated Return to Work (GRTW) Program on November 28<sup>th</sup>, 2015. John's employer set his Benefit Status on iHRIS to Active (1000) effective the first day he began his GRTW Program (November 28<sup>th</sup>, 2015). His Health and Dental coverage was reinstated on November 28<sup>th</sup>, 2015. John will not be measured during the Annual Measurement in January 2016. John was unable to continue his GRTW Program and went back on full Disability effective January 21<sup>st</sup>, 2016. John's employer set his Benefit Status to Disability (4000) effective January 21<sup>st</sup>, 2016 and advises 3sHealth Employee Benefits of the benefit status change. 3sHealth Employee Benefits expires John's Health and Dental coverage effective January 21<sup>st</sup>, 2016. John no longer has Health and Dental coverage.*

*Example 2: Sally began an approved disability claim on February 1<sup>st</sup>, 2014 and still has Health and Dental Coverage in force. Sally returned to work (full pre-leave duties) on January 22<sup>nd</sup>, 2015. Sally's employer set her Benefit Status on iHRIS to Active (1000) effective the day she returned to her regular duties (January 22<sup>nd</sup>, 2015). Sally will not be measured during the Annual Measurement in January 2016. However if Sally was measured, she would have received an increase to her coverage amount because of the hours she worked in 2015. Using the query developed, 3sHealth Benefits identifies that Sally should have an increase to her coverage and manually updates her Health and Dental and advises the employer.*

*The employer will send a letter to Sally advising her of the increased level of coverage effective January 1<sup>st</sup>, 2016.*

This new rule applies to employees who are returning to work from a 3sHealth approved disability or life waiver claim. It is imperative that employees who are receiving benefits from another source such as a non-3sHealth Disability Plan, SGI or WCB make application for a life waiver with 3sHealth. An employee with an approved life waiver claim is considered to be on an approved 3sHealth disability claim.

This information was presented to the Employee Benefits Sub-Committee in December. One of the questions raised was regarding employees who have been on claim for more than 2 years and 119 days and are not successful with their return to work. How will they understand that their benefits are ending when they are off work again? In response, 3sHealth Employee Benefits has drafted a letter that we will send to employees directly when we are notified by an employer that an employee's benefit status has returned to 4000. A copy of the letter is enclosed for your information.

Finally, we would like to add that there will always be exceptions that occur, especially because this is a new process for all of us. If you have a situation and you are not sure what to do, please contact us and we will work through the situation together. Please contact me directly at 306.347.5524 or Alana at 306.347.5599.

If you have additional questions about this directive, please call a Benefit Services Officer at 1.866.278.2301. You can also contact us by email at [ebp@3shealth.ca](mailto:ebp@3shealth.ca).

January 15, 2016

PERSONAL AND CONFIDENTIAL

<Click to Choose> [First Name] [Last Name]  
«AddressBlock»

Dear <Click to Choose> [Last Name]:

**RE: Health Shared Services Saskatchewan (3sHealth)  
Extended Health Care and Dental Plans**  
[First Name] [Last Name], Benefit ID# [BID]

Upon your return to work with [Employer] on [RTW Date], your extended health care and dental coverage under the 3sHealth Employee Benefit Plans was reinstated.

We understand that your return to work ended on [RTW End Date]. As you are no longer at work, your extended health care and dental benefits have ended effective [RTW End Date]. Any extended health care or dental expenses that you incurred between [RTW Start Date] and [RTW End Date] must be submitted to Great-West Life for consideration within 180 days of [RTW End Date].

Please note that the deadline for submitting any expenses incurred in 2015 is April 30<sup>th</sup>, 2016.

If you return to work again in the future, your extended health care and dental benefits will be reinstated again on the date that you return to work with [Employer].

If you have any questions, please contact a 3sHealth Benefit Services Officer toll free at 1.866.278.2301 or by email at [ebp@3sHealth.ca](mailto:ebp@3sHealth.ca). You may also find information on our website at [www.3sHealth.ca](http://www.3sHealth.ca).

Yours truly,

[Choose your name](#)  
Benefit Services Officer  
Employee Benefits

Enclosure(s)

January 15, 2016

PERSONAL AND CONFIDENTIAL

<Click to Choose> [First Name] [Last Name]  
«AddressBlock»

Dear <Click to Choose> [Last Name]:

**RE: Health Shared Services Saskatchewan (3sHealth)  
Extended Health Care and Dental Plans**  
[First Name] [Last Name], Benefit ID# [BID]

Upon your return to work with [Employer] on [RTW Date], your extended health care and dental coverage under the 3sHealth Employee Benefit Plans was reinstated.

Your extended health care and dental coverage will remain in place while you are actively at work.

If your return to work ends because you are unable to work, your extended health care and dental coverage may also end.

- If you have been on an approved disability claim for less than 2 years and 119 days, your coverage will remain in effect for 2 years and 119 days from your *original* date of disability.
- If you have been on an approved disability claim for 2 years and 119 days or longer, *your coverage will end if your return to work ends*. Your coverage will end on the last day that you are actively at work. Claims incurred after the date that your return to work ends will not be eligible from reimbursement. Any extended health care or dental expenses that you incurred during your return to work must be submitted to Great-West Life for consideration within 180 days of the last day of your return to work.

Please note that the deadline for submitting any expenses incurred in 2015 is April 30<sup>th</sup>, 2016.

If you return to work again in the future, your extended health care and dental benefits will be reinstated again on the date that you return to work with [Employer].

If you have any questions, please contact a 3sHealth Benefit Services Officer toll free at 1.866.278.2301 or by email at [ebp@3sHealth.ca](mailto:ebp@3sHealth.ca). You may also find information on our website at [www.3sHealth.ca](http://www.3sHealth.ca).

Yours truly,

[Choose your name](#)  
Benefit Services Officer  
Employee Benefits

Enclosure(s)