

HOW CAN I MAKE A DISABILITY CLAIM?

1. Determine which Plans or Programs you may qualify to claim through

Before making a disability claim, your first step is to review the disability benefits you are enrolled in.

Physicians' Disability Insurance & Voluntary Disability Income Insurance

You may have one or both of the two disability insurance plans offered by Doctors of BC. These plans are designed to work together to provide you with comprehensive disability protection.

Tax-free disability benefits are paid monthly to use at your discretion. You may use the money to pay your mortgage, household bills, children's education and other expenses. If you're expected to be disabled for a long period of time, it's recommended you set aside some of your benefits for retirement savings.

Professional Expense Insurance

There is also a Professional Expense Insurance plan that provides a monthly taxable benefit to cover office and professional expenses such as:

- Employee salaries
- Rent or Mortgage
- Utilities
- Professional dues
- Accounting fees
- College registration fees
- Liability insurance
- Depreciation of office equipment
- Taxes and mortgage interest payments
- Locum payments while you're on disability

You can see a summary of your Insurance coverage on the Doctors of BC website in the "Member Area" under "My Insurance".

2. Contact a Doctors of BC Insurance Administrator

Contact an Insurance Administrator at (604) 638-2904, toll free at 1-800-665-2262 ext. 2904 or by email to insurance@doctorsofbc.ca to let them know you want to make a disability claim.

An Administrator will review your current coverage with you and will provide the appropriate claims forms.

3. Fill out the claim forms and gather other supporting information

Fill out the forms and gather all the supporting information and documents. Disability claim forms will include a Member's Statement to be completed by you, and an Initial Attending Physician's Statement to be completed by your doctor.

To assess your claim, Manulife will advise if financial documents are needed. This information may be needed if any of the following situations apply to your claim.

1. You are claiming for a period of Partial Disability now or in the future.
2. You have more than one disability insurance policy with Manulife or any other insurer.

Your financial information will be used to measure your loss of income during periods of partial disability and to calculate the all source benefit cap in the event you have coverage with other insurance companies. Your pre-disability income is determined as the highest 12 consecutive months in the 24 month period prior to disability.

If the scenarios above apply to you, Manulife will require copies of the following financial documents.

- T1: Personal Income Tax return (inclusive of 'Statement of Business or Professional Activities' and schedule T1139, if applicable) and Notices of Assessment (past two years) and

If incorporated:

- T2: Corporate Tax returns and Schedule pages, along with Notices of Assessments (past two years)
- Financial Statements for the past two years (e.g. Balance Sheet, Income Statement and Statement of Retained Earnings).

Include a "VOID" personal cheque when you submit your claim forms so benefits will be deposited electronically to your bank account.

We suggest that you submit your claim as soon as possible after you stop working. Sometimes it is necessary for the insurer to obtain additional details from either you or your doctor before the claim can be adjudicated. The prompt submission of the claim documentation will help the

insurer in finalizing your entitlement before the first payment date. Initial payments are normally issued at the end of the month after the completion of the policy waiting period.



3. Wait for a decision on your claim

Once you have submitted your claim form and fulfilled any further requests for information, Manulife will review your file and make a decision. The claim will either be approved or declined. Normally it takes up to 5 business days for the claim representative to render his or her decision. It can take longer in some cases.

As always, if you have any questions or concerns we are here to help. Please contact an Insurance Administrator at (604) 638-2904 or toll free at 1-800-665-2262 ext. 2904. You can also send an email to insurance@doctorsofbc.ca.