



Benefit *brief*

THE EMPLOYEE SOLUTIONS NEWSLETTER FOR THE CLIENTS
AND FRIENDS OF DUPUIS LANGEN

Absence Management can help employees deal with Mental Health Issues

With mental illness costing the Canadian economy up to \$51 billion per year and a third of that amount attributed to productivity losses, it's more important than ever to provide a workplace environment that supports these employees.²

One way to do this is by integrating an absence management program with your benefits plan. Successful absence management programs are designed to address all aspects of employee absences - from prevention to return to work. Having an effective program in place can help those suffering from mental illness get the support they need when they need it.

A good absence management program provides guidance and support to both employees and managers throughout absences and during the return to work process. Communication between all parties is an essential factor in any program, especially when dealing with mental health cases.

Key elements for an effective absence management program include:

Prevention – Accessible, easy to understand educational materials and other resources for both employees and managers may assist those seeking help for mental health issues. Sometimes, a simple accommodation while the employee is still at work may be enough support to get that employee through a tough time.

Early intervention – Early involvement is the key to success. Evidence suggests that when an employee has been away from work for six months, the likelihood that they will return drops by 50%.³ The right support at the right time can minimize the impact of absences due to mental health.

Active case management – With a comprehensive initial assessment, each case is looked at on an individual basis. Regular communication between the employee, manager and case manager creates a supportive environment for the employee and helps ensure that all factors (medical and non-medical), are addressed prior to the employee's return to work.

Treatment facilitation – A quick scan of the mental health care model in Canada demonstrates how difficult it can be to find the most effective treatment for a particular diagnosis. The case manager and physician can work with the employee, to provide them with access to medical and rehabilitative resources that will help facilitate recovery, and possibly reduce the length of an absence from the workplace.

Return to work coordination – Employee engagement and participation in the employee's recovery and return to work are critical. The case manager can work with the employee, treatment providers and manager, to come up with a return to work plan that is customized based on the employee's individual needs. After coordinating a plan that may include modified duties or reduced hours, the case manager can monitor the return to work schedule to help ensure its success.

Program Management – A benefits provider such as Manulife can work with you to understand at a high level what is happening with your absence management program. You can then use that data to make improvements, and develop prevention strategies and materials.

Sources: Manulife 1 Building Mentally Healthy Workplaces: Perspectives of Canadian Workers and Front-Line Managers, June 2011

2 The Working Wounded, The Globe and Mail, June 22, 2008

3 Return to Work and Disability Management: The Business Case, WSIB CSPATT Ontario, May 2009

LTD and WCB: What Employees Need to Know

Did you know that a worker who applies for workers' compensation benefits should also apply for Long-term disability (LTD) and the Life waiver of premium benefits? There is a common misconception among employees and plan sponsors that employees should not apply for disability benefits until a workers' compensation claim ends or is denied; this is incorrect. In addition, people tend to forget about the Life waiver of premium benefit.

Unfortunately, this misconception can create some real issues for you and plan members; we encourage you to be proactive in making sure plan members understand this important issue.

All employees should apply for LTD and the Life waiver of premium at the same time they apply for workers' compensation. If the workers' compensation claim is accepted and the LTD claim is accepted, WCB is the first payer, meaning that WCB will pay the worker the appropriate benefits. In most cases, the LTD benefit will not be paid but the claim remains open.

Here's why workers should apply for LTD and the Life waiver of premium at the same time they apply for WCB:

- LTD and Life waiver of premium applications must be made within the time periods required by the disability contract
- If employees wait to apply for LTD/Life waiver until after a WCB claim is denied or terminated, the application will most likely be declined because it is outside the contractual time period
- If a WCB claim is denied or discontinued or if the claimant has a secondary disability, the LTD claim will not be compromised as long as the employee continues to satisfy the definition of disability.
- By filing for LTD and the Life waiver of premium and having the claim accepted, the LTD, Life and ASI premiums are waived.

If the employee doesn't have LTD coverage, it is still important to file for the Life waiver of premium benefit.

Benefits and the Younger Generation

The youngest group in your workforce could range from age 17-28 year olds, conveniently termed Generation Y. These employees make up 23% of the workforce today however Statistics Canada projects that this figure will be 40% by year 2020. As the need to attraction and retention of talent increases, employers need to find a way to satisfy the growing Generation Y workforce.

Generation Y employees can be ambitious and are anxious to move up the corporate ladder quickly. This is a generation that can be loyal and give a lot back to their employers, but it is perhaps also one that expects more from them than previous generations. It is clear that employers have to pay attention to Generation Y's unique needs if they are to attract, retain and motivate the best and brightest. As employers are beginning to notice, Generation Ys have far less hesitation over "job hopping" to find a better fit and better opportunities compared to other generations, even when they were the same age.

As the product of boomer parents, they have been protected and indulged – a factor that contributes to their "all about me" mentality. This is also the first generation to grow up with the Internet and the rapid changes to society, work and everyday life its proliferation has brought. So, while they are comfortable with frequent change and are very adaptable, they demand the convenience, personalization and instant gratification that technology has made possible.

To adapt the group benefit plans to appeal to Generation Y consider the following:

1. Providing flexibility and control—Employees expect benefits that reflect their diversity and individualism. Flexible benefit plans may be the right direction, but often times add-on solutions such as a health care spending account will meet demands for flexibility.
2. Claims Convenience—Manual claims via mail are viewed as an inconvenience. Many carriers offer online claims submission or even submission of claims via a smartphone app
3. Plain Language Communication—Simple, clear, and concise communication is key to get your message to the employees. New ways of communication include using text messages, visuals and social media.
4. Focus on Wellness, Health & Lifestyle—Generation Y has great aspirations to live a healthy, active lifestyle which response well to wellness-related benefits such as subsidized gym memberships, healthy food programs, reimbursement for self-development courses.

Take a look at the makeup of your workforce and determine if you need to evolve your plan to meet their needs, as they may make up most of your workforce in the future.

