



# DMRC Report: Time Accountability

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## Introduction

At the last General Meeting of VIUFA, a motion was put forward to grant the VIUFA DMRC Representative an additional section of release. This report gives an account of the approximate time spent on various tasks in this position, along with an account of what the work done during this time has accomplished. It is presented in order to explain why additional release for this position may be necessary.

The appendix attached to the end of the report provides a table of three weeks' work, divided into various tasks and rounded to the nearest quarter-hour.

It should be noted that these three weeks (September-October 2017) were during a particularly active time for the position, and that the workload at that time was unusually heavy. Tracking of hours occurred during that time period because I feared that I was exaggerating the amount of time the position took. As it turned out, I had actually underestimated the time spent.

Currently, I would estimate the time this position takes to be roughly  $\frac{2}{3}$  what is outlined in the tables. However, there are bursts of activity during which the time increases.

It should also be noted that during the summer months, including vacation time, this position can also be very active. The three weeks tabulated in the appendix were typical of the last part of August; earlier in the summer the average would have been closer to 6h/wk.

This report will begin by briefly outlining what this work has accomplished, and what lies ahead in terms of challenges. It will then give a narrative summary of the activities undertaken during the time tabulated in the appendix, within the bounds of confidentiality.

## Work Accomplished

This position has a very real and positive impact on the lives of our members when they are at perhaps their most vulnerable. Dealing with an insurance company with a massive bureaucracy and a group of investors to please can be daunting, since the insurer (in our case Manulife Financial) has a duty to ensure that benefits are disbursed only when members are entitled. At times, the insurer errs on the side of caution, and members

who are eligible do not receive benefits to which they are entitled. In these cases, it is the work of the DMRC Rep to advocate for members, ensure the process and procedures outlined in the Common Benefits Plan Manual are adhered to as much as possible, and help ensure (where appropriate) a safe and successful return to work.

By far the most complex cases have been those involving mental health issues or brain injuries. One of the key problems seems to be that Manulife has trouble distinguishing between these two at times, and has even more trouble understanding the nature, severity, and even at times the validity of mental health claims.

In the course of the past year, the DMRC Rep position has aided members in successfully appealing and overturning six decisions made by the insurer to withhold benefits. In two cases this meant that a person who was being denied Long Term Disability benefits was accepted, securing their income. In another case, a member who had been cut off from benefits because a Graduated Return to Work Plan was inappropriate and was causing the member further harm, had those benefits reinstated retroactively. In further case, HR and administration gave information to Manulife that incorrectly identified the actual disability that prevented a member from returning to work; this caused confusion and a denial of benefits until the DMRC Rep, together with the case worker, straightened the matter out and returned the member to eligible status.

One of the side benefits of the doggedness of the work this position has been doing is a change in the tone of the insurer's representatives. They are becoming more cordial and more careful, both in their mode of address and in their attention to procedure. However, without the continued push-back and pressure from this position, I have little doubt that this would change. For example, I recently questioned the credentials of one of Manulife's "Internal Medical Consultants." This consultant was called in to evaluate a complex, multi-faceted disability with physical, neurological, and psychological symptoms. The member had been seeing an array of specialists, and the decision made by Manulife seemed questionable. When asked, Manulife was compelled to admit that the "Internal Medical Consultant" was in fact a GP. This is not necessarily a problem, but it could call into question any decisions in which this consultant was involved, which contravene the recommendations of a specialist (which has in fact happened).

## Work Ongoing

The "wins" are dramatic, but they are not the only work of the DMRC Rep. In fact, a good deal of the time spent is in preventing the need to overturn poor decisions by making sure that the correct decision is made in the first place. This is why, moving forward, it will be important for the DMRC Rep to liaise with HR more strongly, in order to ensure that the procedures in the Faculty Common Disability Plan Manual are followed. Right now, they are not. If they were, our members would be better protected.

As one example, meetings between the DMRC Rep and HR currently occur once every six weeks. According to our Manual (which the employer co-authored with the insurer) they should be at intervals of no more than four weeks. This is because our members have 30

sick days before they become eligible for Short Term Disability (STD). If members run into trouble with the application process, in the current system the DMRC Rep may not have any idea that the member may need help until after the deadline for application has passed. This means, at the very least, an interruption in the member's income at an already stressful time.

This problem has been exacerbated in the past eight months by the change in personnel in the Benefits division of HR. Meetings have been cancelled repeatedly, and emails often go unanswered. Formerly, when a member needed to apply for STD, documents were forwarded to the DMRC Rep at the same time as they were sent to the member, but this no longer happens, and it can be weeks before the DMRC Rep has any idea that a member may need assistance. It is crucial for the protection of our members that, at the very least, the DMRC Rep and HR meet every four weeks.

This is one example of a process which does not match the Manual, and which it would be very much to the benefit of our members to correct. However, it is not the only one, and perhaps not even the most important.

It is my hope that as the DMRC Rep is able to prevent emergency situations, it may also work to prevent the denial of benefits our members are entitled to by helping to steer the process we follow at VIU closer to that which the Manual outlines, and which we are supposed to be following now.

## Narrative Summary of Activities Undertaken

The Appendix attached to this report gives a summary of activities in table form. This section of the report defines the terms on the table and explains how the duties they entail are performed.

It should be noted that the duties outlined on the table and in this section are not the only ones outlined by this position's terms of reference, and that the remaining tasks dictated by those terms, which would be beneficial to our members, are awaiting a slowdown in urgent matters before they can be undertaken.

It should also be noted that the time accounted for does not include VIUFA executive meetings, or FPSE DMRC meetings and training.

## Email

This is the primary form of communication with members, HR, and Manulife. Its utility is in part due to its temporal flexibility (as opposed to a meeting or phone call, when both parties need to be free), and in part due to the e-paper trail it leaves. At times this trail has been useful in pointing out to Manulife case managers and their supervisors the inconsistency of their arguments or positions, for example. It also allows for the attaching of documents such as excerpts from the Manual, which it appears many Manulife employees have not read.

However, email does present some problems. One of the key issues that the FPSE DMRC is working on is the (lack of) professionalism in communications from Manulife case managers. The faults in grammar, syntax, usage, and even spelling, in addition to the frequent errors in date and even in the member's name, can create both stress for our members, and the need to follow up carefully and completely so that future problems can be avoided.

### Meeting with Members

Members sometimes find that face-to-face meetings allow them to process information more effectively. This is particularly true when neurological or psychological factors are involved. It also helps when paperwork is an issue. On two occasions in the three week period tabulated in the appendix, I traveled to a member's home to ensure that paperwork was filled out properly, as this had been a problem for the member in the past, resulting in suspension of income.

### Phone

This seems to be the most effective way to contact Zoe Towle, our FPSE liaison, whose expertise is often critical. It is also at times useful to speak directly to case managers or their supervisors, particularly when written communications are confusing (see "Email," above).

### Research

At times this simply means reading the Manual, either for a specific section that assists with the current case, or in general—since this position requires a good working knowledge of that document.

However, in complex cases, at times it is important to request a member's file from Manulife and read it, so that the DMRC Rep and the member better understand how Manulife has reached the decisions it has. This allows the Rep and the member to decide how best to challenge or appeal any decisions Manulife has made in error.

### Meeting with HR

As noted above, I would like to see this happen much more than it does. I would also like to see the protocol for Return to Work meetings outlined in the Manual followed more rigorously. Currently, what VIU calls "Return to Work" meetings should actually be called "Joint Disability and Rehabilitation Committee" meetings, since we do not discuss RTW protocols at all, but rather exchange information about members who are on leave and may need assistance from either HR or Reps. A "Return to Work" meeting, properly, is a meeting at which all the stakeholders in a member's return to work meet to ensure that the return protocol, along with any accommodations necessary, are clearly understood.

## Conclusion

The work of this position is often invigorating and always rewarding. However, it is rigorous and time-consuming as well. I hope that this report clarifies how the DMRC Rep's time is spent. I am happy to field any questions.

*Respectfully submitted.*

# Appendix: Time Use Data Tables

## Week 1

| Date               | Email       | Meeting with members | Phone      | Research    | Meeting with HR | Total hours  |
|--------------------|-------------|----------------------|------------|-------------|-----------------|--------------|
| Monday             | 1:15        | 2:00 <sup>1</sup>    |            | :30         |                 | 3:45         |
| Tuesday            | 1:30        | 1:30                 | :15        | :45         |                 | 4:00         |
| Wednesday          | 1:15        |                      | :15        |             |                 | 1:30         |
| Thursday           | 1:15        |                      |            |             |                 | 1:15         |
| Friday             |             |                      |            |             |                 |              |
| Weekend            | :45         |                      |            |             |                 | :45          |
| <b>Total hours</b> | <b>6:00</b> | <b>3:30</b>          | <b>:30</b> | <b>1:15</b> |                 | <b>11:30</b> |

## Week 2

| Date               | Email       | Meeting with members | Phone | Research    | Meeting with HR | Total hours |
|--------------------|-------------|----------------------|-------|-------------|-----------------|-------------|
| Monday             | :30         |                      |       | :30         |                 | 1:00        |
| Tuesday            | 1:00        | 2:30                 |       | 1:30        |                 | 5:00        |
| Wednesday          | :30         |                      |       | :30         |                 | 1:00        |
| Thursday           | :45         |                      |       |             |                 | :45         |
| Friday             | :15         |                      |       |             |                 | :15         |
| Weekend            |             |                      |       | 1:00        |                 | 1:00        |
| <b>Total hours</b> | <b>3:00</b> | <b>2:30</b>          |       | <b>3:30</b> |                 | <b>8:45</b> |

## Week 3

| Date               | Email | Meeting with members | Phone | Research | Meeting with HR  | Total hours  |
|--------------------|-------|----------------------|-------|----------|------------------|--------------|
| Monday             | 1:45  | 1:30                 |       | :30      |                  | 3:45         |
| Tuesday            | 1:30  | :15                  | :30   | :30      | 1:00             | 3:45         |
| Wednesday          |       | :60 <sup>1</sup>     |       |          | :30 <sup>2</sup> | 1:30         |
| Thursday           | 2:00  | 1:00                 |       | :45      |                  | 3:45         |
| Friday             |       |                      |       |          |                  |              |
| Weekend            | :45   |                      |       |          |                  | :45          |
| <b>Total hours</b> |       |                      |       |          |                  | <b>12:45</b> |

<sup>1</sup> Includes travel to the member's house.

<sup>2</sup> In this case, the meeting was with an administrator, in order to clarify some inaccurate messaging that was interfering with a member's ability to receive benefits.