Form acquisition
~ ?? mins

Basic info
~ ?? mins

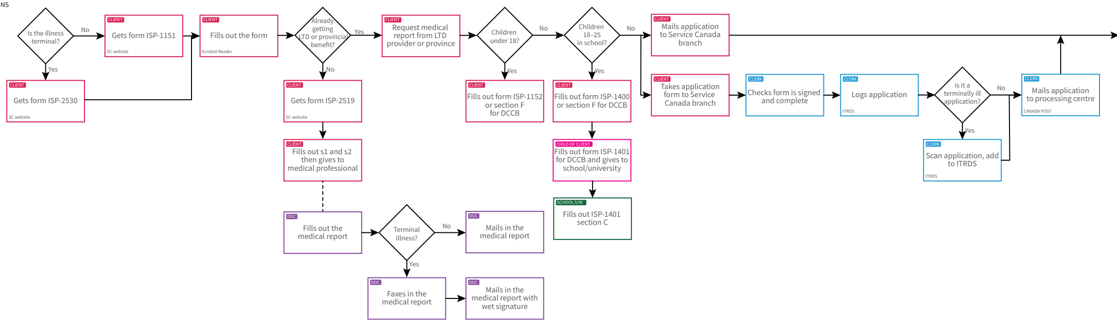
Medical report
~ ?? mins

Children’s benefit
~ ?? mins

Submit
~ ?? mins

Pre-processing
~ ?? mins

ACTIONS



Is the illness terminal?
No
CLIENT
Gets form ISP-1151
SC website
Yes
CLIENT
Gets form ISP-2530
SC website
CLIENT
Fills out the form
Acrobat Reader
Already getting LTD or provincial benefit?
Yes
CLIENT
Request medical report from LTD provider or province
No
CLIENT
Gets form ISP-2519
SC website
CLIENT
Fills out s1 and s2 then gives to medical professional
DOC
Fills out the medical report
Terminal illness?
No
DOC
Mails in the medical report
Yes
DOC
Faxes in the medical report
DOC
Mails in the medical report with wet signature
Children under 18?
Yes
CLIENT
Fills out form ISP-1152 or section F for DCCB
No
Children 18–25 in school?
Yes
CLIENT
Fills out form ISP-1400 or section F for DCCB
CHILD OF CLIENT
Fills out form ISP-1401 for DCCB and gives to school/university
SCHOOL/UNI
Fills out ISP-1401 section C
No
CLIENT
Mails application to Service Canada branch
CLIENT
Takes application form to Service Canada branch
CLERK
Checks form is signed and complete
CLERK
Logs application
ITRDS
Is it a terminally ill application?
Yes
CLERK
Scan application, add to ITRDS
ITRDS
No
CLERK
Mails application to processing centre
CANADA POST

THOUGHTS

> The questions that are asked on the form do not have any realistic understanding of what it’s like to live with a disability.

> I call and they just say ‘do the best you can’. I want to do it right the first time though. I don’t want to do it again.

> It would be nice to have some sort of feedback saying your application has been received and it’s now under review.

> When you’re not capable of working, you only have so much money in the bank to live off. It’s a worry.

PAIN POINTS

- Not clear where to access forms
- Complicated government websites
- Stigma of applying when not at an ‘old age’
- Unsure of why they are applying (could be encouraged/forced to by doctor, health organizations or insurance company)
- Not clear on eligibility requirements
- Difficult to access information without a computer

- Confusing application form
- Not the first time they’re encountering a complicated process
- Need the assistance of others (e.g. community centres, legal, friends/family, guide) to complete the form
- Unsure of the relevance of some questions

- Might not have access to a doctor
- Not sure whether they’re responsible for paying their doctor

- Doesn’t know what information medical adjudicators need for processing
- Medical report is confusing / not encouraging to fill out
- Don’t have time to fill out the medical report in a timely manner

- No mention of the need for ISP-1401 in section F of 1151
- Unaware that Service Canada will reimburse them for filling out the medical report or how

- Worried their application was never received
- Still not clear on eligibility requirements
- Costs money to mail in form and to travel to a Service Canada branch
- There is a lack of specialized assistance at Service Canada centres

- ISP-2530A
  - Takes 5+ minutes to read
  - 79 fields
  - 20 pages

- ISP-1151
  - Takes 41+ minutes to read
  - 194 fields
  - 26 pages

- ISP-2519
  - Takes 15+ minutes to read
  - 13 fields
  - 14 pages

- ISP-1152
  - Takes 8+ minutes to read
  - 17 fields
  - 5 pages

- ISP-1400
  - Takes 6+ minutes to read
  - 18 fields
  - 3 pages

- ISP-1401
  - Takes 6+ minutes to read
  - 26 fields
  - 4 pages

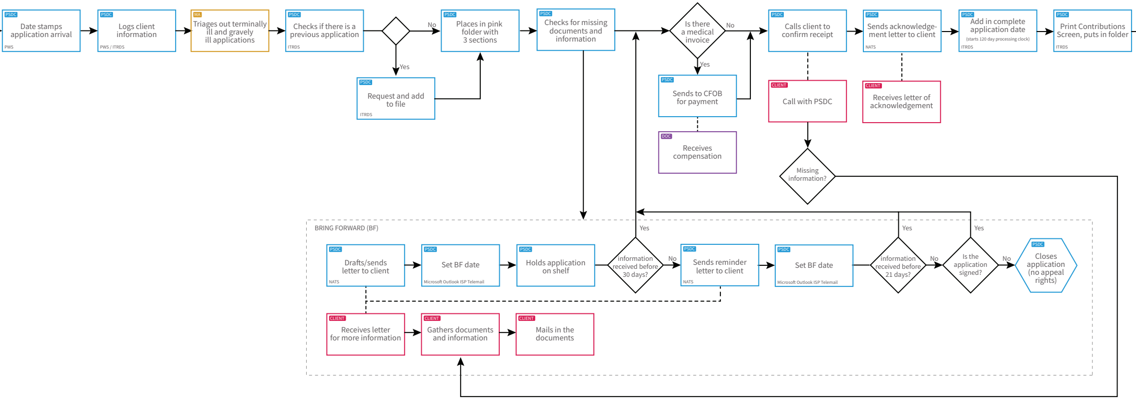
Application Intake

~ ONE HOUR

Earnings and Co

~ ONE DAY

ACTIONS



PSDC Date stamps application arrival PWS

PSDC Logs client information PWS / ITRDS

MA Triages out terminally ill and gravely ill applications

PSDC Checks if there is a previous application ITRDS

Yes: PSDC Request and add to file ITRDS

No: PSDC Places in pink folder with 3 sections

PSDC Checks for missing documents and information

Is there a medical invoice

Yes: PSDC Sends to CFOB for payment

DOC Receives compensation

No: PSDC Calls client to confirm receipt

CLIENT Call with PSDC

Missing information?

PSDC Sends acknowledgement letter to client NATS

CLIENT Receives letter of acknowledgement

PSDC Add in complete application date (starts 120 day processing clock) ITRDS

PSDC Print Contributions Screen, puts in folder ITRDS

BRING FORWARD (BF)

PSDC Drafts/sends letter to client NATS

PSDC Set BF date Microsoft Outlook ISP Telemail

PSDC Holds application on shelf

information received before 30 days?

Yes

No: PSDC Sends reminder letter to client NATS

PSDC Set BF date Microsoft Outlook ISP Telemail

information received before 21 days?

Yes

No: Is the application signed?

Yes

No: PSDC Closes application (no appeal rights)

CLIENT Receives letter for more information

CLIENT Gathers documents and information

CLIENT Mails in the documents

It seems as if the drawers with incoming files are always full.

- Receives calls from clients for status updates. Comes through the call centre to them.
- Can take a month and a half to get a complete application
- Tracking of the file goes on the back of the tri-folder: remarks, person's name, date
- ITRDS has notes but not enough detail (not a copy of the letter that was sent)

- NATS template requires modification

- Mail/paper does not alert clients of required fields before they mail in their application
- Missing information
- Client does not answer telephone
- Birthdate does not match in the form and the system
- Does not have an easy way to call back

- Having a need for a wet signature really slows down the processing
- No consent
- Does not understand why giving consent will help them.
- Calls/communication cannot be made to clients, unless absolutely necessary
- Lack of technology to send/receive information quickly and securely

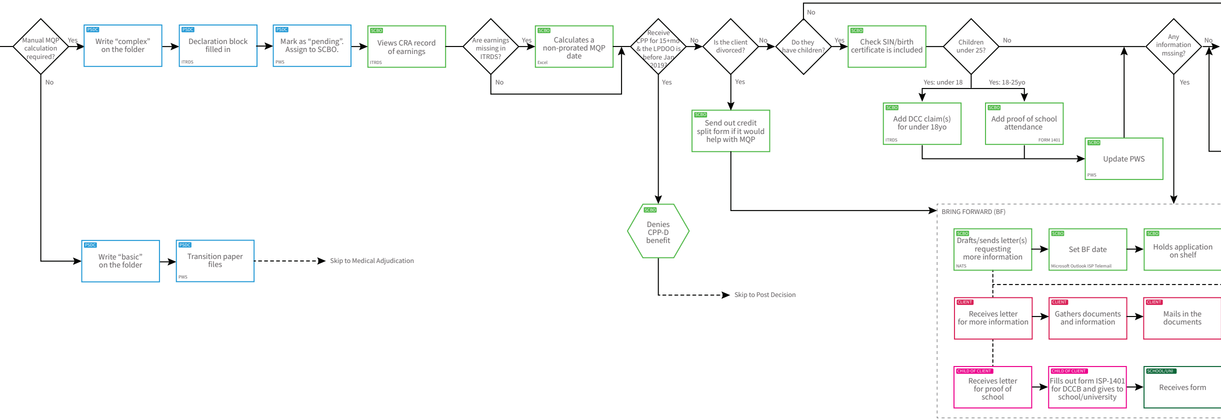
- Invoice could be missing a business number. Would need to call the doctor for that
- Clients do not provide information or give consent due to lack of trust in government

- Provides a verification form if client needs proof they applied.
- Might be able to get some information from the client over the phone (like date stop working)

ntributions

Earnings and Contributions - Provisions

~ ONE WEEK UPON STARTING (DEPENDING ON ANY NECESSARY DEVELOPMENTS)


Manual MQP calculation required?
Yes
No
PSDC
Write "complex" on the folder
PSDC
Declaration block filled in
ITRDS
PSDC
Mark as "pending". Assign to SCBO.
PWS
SCBO
Views CRA record of earnings
ITRDS
Are earnings missing in ITRDS?
Yes
No
SCBO
Calculates a non-prorated MQP date
Excel
Receive CPP for 15+mo & the LPDOO is before Jan 2019?
No
Yes
Is the client divorced?
No
Yes
Do they have children?
No
Yes
SCBO
Check SIN/birth certificate is included
Children under 25?
No
Yes: under 18
Yes: 18-25yo
Any information mssing?
No
Yes
SCBO
Send out credit split form if it would help with MQP
SCBO
Add DCC claim(s) for under 18yo
ITRDS
SCBO
Add proof of school attendance
FORM 1401
SCBO
Update PWS
PWS
SCBO
Denies CPP-D benefit
Skip to Post Decision
PSDC
Write "basic" on the folder
PSDC
Transition paper files
PWS
Skip to Medical Adjudication
BRING FORWARD (BF)
SCBO
Drafts/sends letter(s) requesting more information
NATS
SCBO
Set BF date
Microsoft Outlook ISP Telemail
SCBO
Holds application on shelf
CLIENT
Receives letter for more information
CLIENT
Gathers documents and information
CLIENT
Mails in the documents
CHILD OF CLIENT
Receives letter for proof of school
CHILD OF CLIENT
Fills out form ISP-1401 for DCCB and gives to school/university
SCHOOL/UNI
Receives form

My job is to get them an MQP.
If I have to drag them there, I will.

- May have to develop for undeclared earnings and direct client to CRA to sort out taxes they have not filed or pay CPP contributions

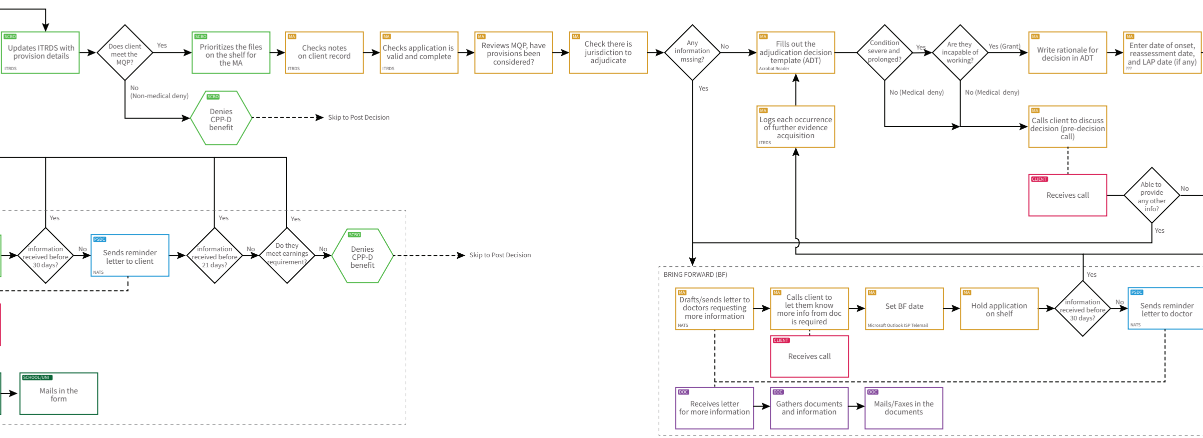
Why do you need to get in touch with my ex-spouse from years ago?

- Headache around care and custody and who gets the child benefit payments
- Unclear of who or what is defined as the "primary caregiver"
- Child rearing provision is more difficult for men
- Unsure if child rearing provising should be enacted and how to collect paperwork for it
- Educates the client on how child rearing provisioning might help them
- Calls the clients about kids and gets written documentation to get in touch with children or caregivers

- Does not understand how credit split provisioning might
them meet the MQP or raise their estimate
- Educates client on how credit split provisioning might hel

Medical Adjudication

~ ONE DAY UPON STARTING (DEPENDING ON SIZE OF FILE)


SCBO
Updates ITRDS with provision details
ITRDS
Does client meet the MQP?
Yes
No (Non-medical deny)
SCBO
Denies CPP-D benefit
Skip to Post Decision
SCBO
Prioritizes the files on the shelf for the MA
MA
Checks notes on client record
ITRDS
MA
Checks application is valid and complete
ITRDS
MA
Reviews MQP, have provisions been considered?
MA
Check there is jurisdiction to adjudicate
Any information missing?
No
Yes
MA
Fills out the adjudication decision template (ADT)
Acrobat Reader
MA
Logs each occurrence of further evidence acquisition
ITRDS
Condition severe and prolonged?
Yes
No (Medical deny)
Are they incapable of working?
Yes (Grant)
No (Medical deny)
MA
Write rationale for decision in ADT
MA
Enter date of onset, reassessment date, and LAP date (if any)
???
MA
Calls client to discuss decision (pre-decision call)
CLIENT
Receives call
Able to provide any other info?
No
Yes
Yes
information received before 30 days?
No
PSDC
Sends reminder letter to client
NATS
Yes
information received before 21 days?
No
Yes
Do they meet earnings requirement?
No
SCBO
Denies CPP-D benefit
Skip to Post Decision
SCHOOL/UNI
Mails in the form
BRING FORWARD (BF)
MA
Drafts/sends letter to doctors requesting more information
NATS
MA
Calls client to let them know more info from doc is required
CLIENT
Receives call
MA
Set BF date
Microsoft Outlook ISP Telemail
MA
Hold application on shelf
Yes
information received before 30 days?
No
PSDC
Sends reminder letter to doctor
NATS
DOC
Receives letter for more information
DOC
Gathers documents and information
DOC
Mails/Faxes in the documents

> If it's hard for us, I can't imagine what it's like for the client.

help

p them

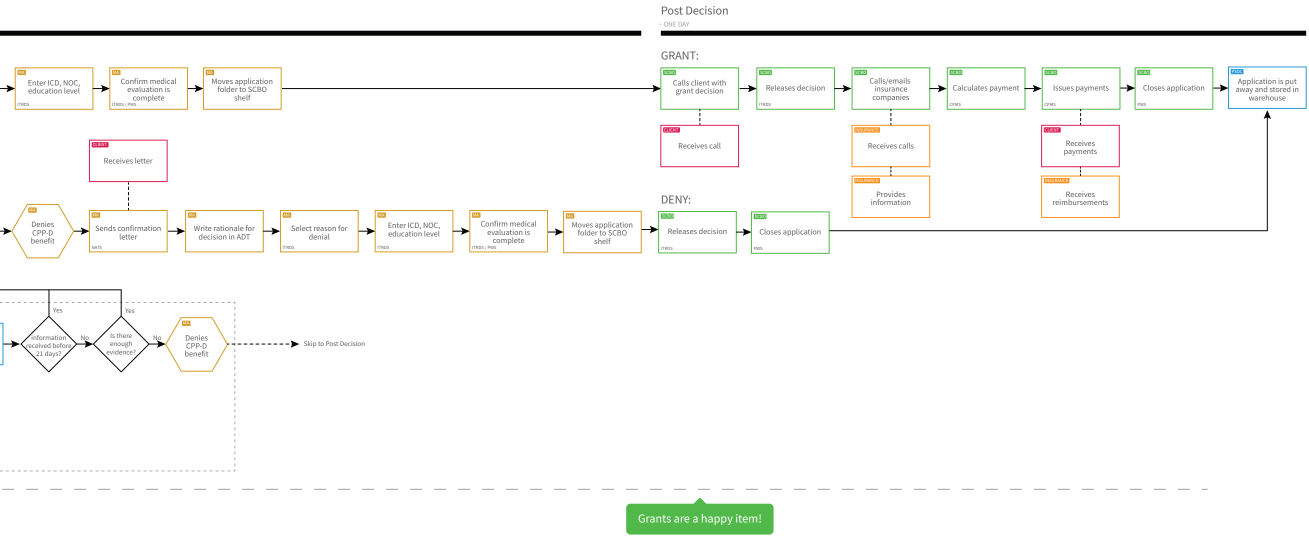
- May hold off on making a decision if the client is in contact with CRA
- May have to resend development letters if client says they did not receive anything
- Requires a lot of evidence from client and people related to them (children, ex-spouses)
- Needs to get children and ex-spouses involved

- New application requires a new way of analysis without client's personal characteristics (height and weight)
- Doctors have incentive to not provide information all at once
- Some doctors don't have a good overall picture of their patients
- Application form has unclear terminology
- Advice and guidance is needed from National Operations on ambiguous or complex cases
- Late applicants are difficult because they may meet severe and prolonged criteria now but they did not meet it the last time they qualified (MQP)

- Can be time consuming if a client file is 20+ years. Need to go as far back as possible to see the onset date
- Does not know what information is needed for medical adjudicators to process the application
- Does not know what information is needed for medical adjudicators to process the application
- Medical report is confusing / not encouraging to fill out
- Does not have time to fill out the medical report in a timely manner
- Unaware that Service Canada will reimburse them for providing more information or how

- Has to re-enter application information into ADT
- Needs client's consent to reach out to doctors
- May hold off on making a decision if the client has an upcoming medical appointment
- May have to resend development letters if doctors say they never received anything
- May need to develop for medical information on applications completed months ago to get medical information that has happened since that time (seen more doctors, gotten more treatment, etc.)
- May ask for an extension by calling the 1-800 Service Canada number
- May have to reach out to multiple clinics

- New application form and the ADT do not match up anymore



Post Decision

~ ONE DAY

MA Enter ICD, NOC, education level ITRDS
MA Confirm medical evaluation is complete ITRDS / PWS
MA Moves application folder to SCBO shelf

CLIENT Receives letter

MA Denies CPP-D benefit
MA Sends confirmation letter NATS
MA Write rationale for decision in ADT
MA Select reason for denial ITRDS
MA Enter ICD, NOC, education level ITRDS
MA Confirm medical evaluation is complete ITRDS / PWS
MA Moves application folder to SCBO shelf

information received before 21 days?
Yes
No
Is there enough evidence?
Yes
No
MA Denies CPP-D benefit
Skip to Post Decision

GRANT:

SCBO Calls client with grant decision
CLIENT Receives call
SCBO Releases decision ITRDS
SCBO Calls/emails insurance companies
INSURANCE Receives calls
INSURANCE Provides information
SCBO Calculates payment CPMS
SCBO Issues payments CPMS
CLIENT Receives payments
INSURANCE Receives reimbursements
SCBO Closes application PWS
PSDC Application is put away and stored in warehouse

DENY:

SCBO Releases decision ITRDS
SCBO Closes application PWS

Grants are a happy item!

- Not receiving information from doctors at all or past the second BF date
- Doctors are not on their side
- Might take medical knowledge to figure out how someone is impacted rather than go back to a doctor
- Has to be very specific in the development letters to doctors of what they need
- Can be difficult to contact doctors (clinic might have closed or doctor has moved clinics)

- Deny calls are difficult to make

- Getting information from the insurance companies. Payment cannot be released until that is sorted.