



# CARDIAC REHABILITATION FINANCIAL RESOURCES AND RETURNING TO WORK

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#### A. REPLACING LOST INCOME

#### 1. TAKING LEAVE FROM YOUR PLACE OF EMPLOYMENT

Talk to Human Resources personnel at your place of employment about your coverage for sick leave, vacation leave, and short or long-term disability. Once discharged, you can also ask to be referred to the Vocational Counsellor through the Cardiac Rehabilitation Program at the University of Ottawa Heart Institute.

# 2. EMPLOYMENT INSURANCE SICKNESS BENEFIT (EI-SICK)

This is a federal program accessed through Service Canada. Sickness benefits are paid up to 15 weeks.

**Eligibility:** 600 hours of insurable employment in the last 52 weeks, or since the start of the last Employment Insurance (EI) claim. Some exceptions are allowed. You can collect EI sickness benefits and Canada Pension Plan disability at the same time without being penalized.

**How Much:** Most claimants receive the basic rate of 55% of their earnings, up to a weekly maximum. If you are a low-income family with children, you could receive a higher rate.

When Benefits Start: There is a two-week waiting period. However, if you get paid sick leave from your employer or group insurance benefits, you may not have to wait the two weeks. Earnings such as vacation and severance pay made during the 2 week waiting period will be deducted in the first 3 weeks in which you receive the EI benefit. The claim takes four to six weeks to process. Ontario Works (Social Services) may assist in the interim, however an agreement to reimburse is signed by the applicant and the money is clawed back from the EI claim.

**To Apply:** You should apply as soon as possible upon stopping work. You will lose some benefits if you do not apply within 4 weeks of your last day of work. Applications are to be submitted on-line at www.servicecanada.gc.ca. Click on Benefits at the top of the web page.

Only in exceptional circumstances, will they accept hard copies of applications.

For more information on the Employment Insurance Sickness Benefit, contact your local office or call **1-800-622-6232** or check out the website to find the office close to you. www.servicecanada.gc.ca





# 3. CANADA PENSION PLAN (CPP) OR QUEBEC PENSION PLAN (QPP) DISABILITY BENEFIT

**CPP DISABILITY BENEFIT:** The CPP Disability Benefit is a federal program run by Service Canada, Income Security Programs. Qualification for this program is based on medical need, not financial need.

Eligibility: The applicant must be:

- Between the ages of 18 and 65
- Have a disability that is "severe and prolonged" and have enough CPP contributions

Contact your local CPP office or speak with your social worker regarding this matter (see below).

**Contributions:** To qualify for a disability benefit, you must have made CPP contributions in four of the last six years, or in three of the last six years provided you have made CPP contributions for at least 25 years.

**How Much:** This is dependent on contributions to the plan. Call 1-800-277-9914 to determine the amount for which you might be eligible. CPP Disability Benefits are deducted from the Ontario Disability Support Program, or from your private insurer. Benefits are taxable. Please ensure that you disclose to your long term disability provider that you are also in receipt of Canada Pension Plan.

**Canada Pension Plan Child's benefit:** Dependent children may be eligible for benefits if they are less than age 18, or are between 18 and 25 and attending school full time.

**When Benefits Start:** Benefits start in the fourth month after you are deemed to have become disabled. You can receive up to twelve months of retroactive payments.

For more information on the Canada Pension Plan, call 1-800-277-9914, or see their web page: www.servicecanada.gc.ca.

**Return to work program:** CPP has provisions for those who are able to return to work, either on a part time or full time basis. Please contact CPP representative for more information regarding this program.

**QPP DISABILITY BENEFIT:** The QPP Disability Benefit is similar to CPP Disability Benefits. Visit their website at: www.rrq.gouv.qc.ca/en/invalidite/Pages/invalidite.aspx

# 4. ONTARIO OR QUEBEC SOCIAL ASSISTANCE

**ONTARIO WORKS:** This program is for people who need financial assistance to pay for day-to-day living expenses such as food, housing, and utility costs.

**Eligibility:** It is based on a financial needs test. You can have only a certain amount of assets, savings and income. People applying for the Ontario Disability Support Program (ODSP) are allowed higher levels of assets, savings and income.

**How Much:** This depends on various factors. Contact an income support specialist for more details. An Ontario Drug Benefit Card is provided.

Extra financial help is available for special dietary needs, medical transportation, dental and vision care for children, and the balance for medical equipment or prostheses not covered by the Assistive Devices Program.

**When Benefits Start:** Once the application has been submitted, your benefits will typically begin by the end of the month in which you have applied, however some exceptions may apply. You can contact your income support specialist for more information.

CITY OR REGION	TELEPHONE
Ottawa	311 or 613-580-2400
Lanark County (Smith Falls, Perth, Almonte, Carleton Place)	613-267-4200 ext 2140 or 1-866-878-9588
Rockland	613-446-2020 or 1-800-667-9825
Leeds/Grenville (Brockville)	613-345-4101 or 1-800-267-8146
Renfrew County	613-433-9846 or 1-888-281-7526
Arnprior	613-623-5426
Pembroke	613-732-2601
Cornwall, Stormont	613-933-6282
Glengarry County	613-525-0628
Prescott, Russell County	613-675-4642 or 1-800-667-9825
Dundas County	613-448-3987 or 1-877-448-3987

**QUEBEC SOCIAL ASSISTANCE:** For information on financial resources, contact your local CLSC, at the phone numbers shown below.

CITY OR REGION	TELEPHONE
L'Outaouais	819-246-2494 or 1-888-772-3694
Gatineau	819-568-66500 or 1-866-349-2758
Aylmer	819-682-0362 or 1-800-567-9678

# 5. ONTARIO DISABILITY SUPPORT PROGRAM (ODSP)

ODSP is a provincially funded disability benefit that is based on medical as well as financial needs. An application for ODSP goes through a medical determination process by the Disability Adjudication Unit.

**Eligibility:** The applicant must "have a substantial health condition expected to last more than 1 year". ODSP allows you to have more assets than what is allowed by Ontario Works.

**How Much:** This depends on various factors. The amount received is higher than what is received under Ontario Works. An Ontario Drug Card is issued. Extra financial help may be available for special dietary needs, medical transportation, dental and vision care and some assistance for medical equipment or prosthetics not covered by the assistive devices program. Forms can be accessed through the ODSP worker, and must be signed by your physician.

**When Benefits Start:** Application process can take three to four months or longer to process. If you do not have other income or assets, you should apply for Ontario Works in the interim.

To Apply: Social Services Dept. takes applications for Ontario Works and ODSP.

*If you don't qualify for Ontario Works*, call ODSP directly at 613-234-1188 or if residing in Ottawa dial #311.

For more information on ODSP, contact your local office, or see their website and phone number at www.mcss.gov.on.ca/en/mcss/programs/social/odsp/

# 6. PRIVATE RETIREMENT PLANS / CPP/QPP RETIREMENT PLANS

Some people may choose to take early retirement. Talk to Human Resources personnel at your place of employment. Canada Pension Plan (CPP) and Quebec Pension Plan (QPP) benefits are accessible as early as age 60 at a reduced pension amount. Note that people are able to now work beyond the age of 65 and can continue to contribute to their CPP pension therefore resulting in a higher pension upon retirement.



#### **B. OTHER SOURCES OF FINANCIAL ASSISTANCE**

#### 1. SPECIFIC DISABILITY INSURANCE

Check to see if you have disability insurance on your mortgage, your line of credit, etc. Talk to your bank consultant to see if they can assist.

## 2. ESSENTIAL HEALTH AND SOCIAL SUPPORT (EHSS)

In Ottawa, for those with low income, financial assistance may be provided for:

- Trillium Prescription Drug Plan Deductible
- Dental and vision care for children and adults
- Medical transportation
- Mobility aids
- Assistive Devices Program top-up

If you live in Ottawa, call the City of Ottawa at #311 for more information. If you live outside Ottawa, call Social Services in your local municipality to determine if assistance can be provided for these items.

#### 3. ONTARIO TRILLIUM DRUG PROGRAM

This program helps cover the cost of prescription drugs. All Ontario residents under the age of 65 are eligible. A deductable is determined based on the household income. If your income in the current year has been reduced by 10% or more, you can apply for a deductable reassessment. For more information on this program visit:

www.ontario.ca/page/get-help-high-prescription-drug-costs

## 4. QUEBEC PRESCRIPTION DRUG INSURANCE

Everyone who is permanently settled in Québec must have prescription drug insurance coverage at all times. Two types of insurance plans provide this coverage:

The public plan: that is administered by the Régie de l'assurance maladie du Québec. Register online at www.ramq.gouv.qc.ca/en/citizens/Pages/online\_registration\_deregistration.aspx

**Private plans:** (group insurance or employee benefit plans)

If you are eligible for a private plan, you must join that plan and provide coverage under it for your spouse and children. Only those persons who are not eligible for a private plan may register for the Public Prescription Drug Insurance Plan.

Persons residing in Québec temporarily are usually not eligible for prescription drug insurance. However, they can take out personal insurance.

## 5. ASSISTIVE DEVICES PROGRAM (ADP)

This program, sponsored by the Ontario Ministry of Health and Long Term Care, is responsible for this program which assists people with long term physical disabilities in accessing equipment and supplies. There is no financial means test for this program. There are a wide range of equipment needs available through this program.

Refer to their website at www.health.gov.on.ca/english/public/program/adp/adp\_mn.html

Phone: 1-800-268-6021

#### 6. CLAIMING MEDICAL EXPENSES RELATED TO TREATMENT

Patients are eligible to claim certain medical expenses related to treatment as a tax deduction. This includes but is not limited to; travel expenses, lodging, equipment, attendant care, and medication.

## 7. TRAVEL AND LODGING

Patients who live 40 km or more from the hospital may be eligible for income tax deductions for their mileage. Patients who live 80 km or more from the hospital can also claim for meals and accommodations. You must keep track of the number of kilometres driven for the purpose of medical treatment in order to claim this as a tax deduction. You must also submit evidence of all of your medical appointments. This information can be requested through the Health Records department at the hospital.

For additional information, visit Canada Revenue Agency web site:

www.canada.ca/en/revenue-agency/news/newsroom/tax-tips/tax-tips-2016/you-have-medical-expenses-you-may-able-claim-them-on-your-income-tax-benefit-return.html

## **Residents of Northern Ontario** | Northern Health Travel Grant (NHTG)

This program will help to supplement travel related expenses for Northern Ontario residents seeing medical specialist services or procedures at a ministry funded health care facility. Grants are based on the distance to the nearest medical specialist or health care facility. To be eligible you must need to travel at least 100km one way to access services. Expenses that can be claimed include lodging and transportation. The program does not cover meal expenses. For additional information visit:

www.health.gov.on.ca/en/public/publications/ohip/northern.aspx

## **Residents of Newfoundland** | Medical Travel Assistance Program (MTAP)

This program provides financial assistance to beneficiaries of the Medical Care Plan (MCP) who incur substantial out-of-pocket travel costs to access specialized insured medical services which are not available in their immediate area of residence and / or within the Province.

Applicants may be eligible to apply for financial assistance under MTAP for airfare (and related eligible taxi fares); private vehicle usage; purchased registered accommodations (and related meal allowance); busing and use of ferries based on program criteria (deductibles may apply).

# 8. DISABILITY TAX CREDIT | Revenue Canada-Taxation Office: Form T2201

The Disability Tax Credit is a non refundable tax credit that reduces the amount of federal income tax you pay. Apply if you "have a severe and prolonged (at least 12 months) mental or physical impairment such that you are markedly restricted in your ability to perform one or more basic activities of daily living." For more information visit the Canada Revenue Agency at:

www.cra-arc.gc.ca/E/pbg/tf/t2201/t2201-16e.pdf

# 9. REFUGEE HEALTH COVERAGE (IFHP)

In Canada, the interim federal health program (IFHP) provides limited, temporary coverage of healthcare benefits to the people in the following groups who aren't eligible for provincial or territorial (PT) health insurance:

- Protected persons, including resettled refugees
- Refugee claimants
- Certain other groups
- · Basic coverage

Basic coverage (similar to health-care coverage from provincial or territorial health insurance plans):

- In-patient and out-patient hospital services
- Services from medical doctors, registered nurses and other health-care professionals licensed in Canada, including pre and post natal care
- Laboratory, diagnostic and ambulance services

Supplemental coverage (similar to the coverage given to the social assistance recipients by provincial and territorial governments):

- Limited vision and urgent dental care
- Home care and long-term care
- Services from allied health-care practitioners including clinical psychologists, psychotherapists, counselling therapists, occupational therapists, speech language therapists, and physiotherapists
- Assistive devices, medical supplies and equipment, including:
  - Orthopaedic and prosthetic equipment
  - Mobility aids
  - Hearing aids
  - Diabetic supplies
  - Incontinence supplies
  - Oxygen equipment

## For additional information:

www.canada.ca/en/immigration-refugees-citizenship/services/refugees/help-within-canada/health-care/interim-federal-health-program/coverage-summary.html

# C. DRUG INSURANCE FOR QUÉBEC RESIDENTS

## 1. PRESCRIPTION DRUG INSURANCE

Everyone who is permanently settled in Québec must have prescription drug insurance coverage at all times. Two types of insurance plans provide this coverage:

- the public plan, that is, the one administered by the Régie de l'assurance maladie du Québec
- private plans (group insurance or employee benefit plans)

If you are eligible for a private plan, you must join that plan and provide coverage under it for your spouse and children. Only those persons who are not eligible for a private plan may register for the Public Prescription Drug Insurance Plan.

Persons residing in Québec temporarily are usually not eligible for prescription drug insurance. However, they can take out personal insurance..

#### 2. PRIVATE PLAN

A private plan is a group insurance or employee benefit plan offering basic coverage for prescription drugs. Plans of this type are called private plans because, unlike the public plan, they are offered by private-sector companies.

Private plans are usually available through employment, in the form of group insurance, which an employer may offer to its employees as a fringe benefit. In addition, many professional orders and associations, as well as unions, make such plans available to their members.

Private plans are sometimes called healthcare plans or health insurance plans. Most private plans offer prescription drug coverage along with other services, such as paramedical services or consultations with certain health professionals (chiropractors, physiotherapists, dentists, etc.), but some offer prescription drug coverage only.

The coverage provided may vary from one private plan to another, depending on the agreement entered into between the policyholder and the insurance company or plan administrator. However, in Québec, all private insurers offering prescription drug insurance must fulfill minimum conditions regarding the coverage they provide and the financial participation they require of the persons they insure.

Generally speaking, when someone begins to work at a new job or for a new organization, the group plan administrator, who may be a human resources employee or an employee benefits specialist, gets in touch with the person and explains the various coverage options offered. The person then normally registers for the private plan.

Please note that employers offering an insurance plan are not required to cover all their employees and the plan may have eligibility requirements. For example, the plan may exclude part-time, temporary or contractual employees, or may cease to cover those who become eligible for retirement.

However, no one may be denied prescription drug coverage under a private plan because of any risk the person may represent due to age, sex or state of health, nor may anyone's spouse.

If the employer offers a private plan, the employees are required to join that plan, unless they can prove that they are covered by another private plan (another group insurance or employee benefit plan). They can do so by providing the employer with one of the following documents:

- a photocopy of their group insurance card
- a form filled out by their spouse's employer, or an official letter from that employer on the company's or organization's letterhead
- a letter or certificate from another employer or from the professional association or order to which they belong

## 3. REGISTRATION OR DE-REGISTRATION

The Public Prescription Drug Insurance Plan is administered by the Régie de l'assurance maladie du Québec and is intended for persons who are not eligible for a private group insurance plan covering prescription drugs, for persons age 65 or over, and for recipients of last-resort financial assistance and other holders of a claim slip (carnet de réclamation). Children of persons registered for the public plan are also covered by that plan; it is necessary to register.

The Régie invites you to register online (if your family situation and age allow you to use this service).

You can also call the Régie during office hours. Make sure to have your Health Insurance Card on hand. However, the Régie cancels the registration of the following persons, without them having to submit a request:

## • Person who cease to receive a claim slip:

The Ministère du Travail, de l'Emploi, de la Solidarité sociale issues claim slips to recipients of last-resort financial assistance and, in certain conditions, to adults or families not receiving last-resort financial assistance benefits. Holders of claim slips can obtain certain drugs prescribed by a doctor and certain services, such as eye examinations and dental care. (carnet de réclamation) and their children under age 18

## Persons registered as a child:

Children are persons under age 18 or persons age 18 to 25 inclusive who are spouseless, who live with their parents and who are full-time students at in an educational institution at the secondary, college or university level. Persons age 18 or over are considered children if they are spouseless, have a functional impairment that began before age 18, are not receiving last-resort financial assistance benefits, and are domiciled with someone who would exercise parental authority over them if they were a minor.

Just the same, they receive in the mail the information necessary to determine whether they or their parents (as the case may be) must contact the Régie with respect to maintaining their registration for the public plan.

#### 4. TO EXTEND THE COVERAGE OF A CHILD UNDER AGE 18

Persons who turn 18 may extend the coverage, if they are full-time students, and do not have a spouse.

(Two persons (of the opposite sex or the same sex) are considered spouses if they are: (1) married and have entered into a civil union (2) have been living together for 12 months (separations of less than 90 days do not interrupt the 12-month period) (3) are living together (regardless of for how long) and together have had or have adopted a child.) Children who live with their parents remain covered by the public plan as a child. In this case, the person's parents must contact the Régie to request that the person's coverage as a child be extended

#### 5. RECENT DRUG PURCHASES

If you purchased covered drugs prescribed by a health professional before contacting the Régie to register, ask your pharmacist to check whether the cost may be reimbursed to you. In this regard, the Act respecting prescription drug insurance specifies that the only prescription drugs reimbursable are those received within 3 months preceding registration

## 6. WAITING PERIOD

A legal person that holds a permit issued by the Autorité des marchés financiers authorizing it to transact personal insurance in Québec and that assumes, in return for a premium paid, the financial consequences resulting from one or more risks specified in the contract signed by the parties. This sometimes imposes a waiting period when someone begins to work at a new job or for a new organization. A waiting period is a period during which an employee is not eligible for the group insurance offered. For example, the insurer may require an employee to work a minimum number of hours before joining the plan.

Persons who are subject to a waiting period need to make sure they have coverage under another plan during that period. They must therefore check whether they are immediately eligible for another private plan, such as their spouse's plan or the one offered by a professional order or association to which they belong.

As a last resort, they must register for the public plan, administered by the Régie de l'assurance maladie du Québec, or remain registered for it throughout the waiting period.



#### D. RETURN TO WORK

Many people are concerned about returning to work after experiencing cardiac problems. Family members may be worried as well. This is normal. However, work can help you feel better about yourself by offering a challenge, time with other people, a better income and take the focus away from your symptoms. Most cardiac patients return to their past jobs after the cardiac event.

The timing of return to work varies from person to person and is related to your health and job demands; for example those of an Office Worker as compared with those of a Plumber. In very general terms:

- After a heart attack, the usual time off work is 4 weeks
- After cardiac surgery, the usual time off work is 3 months
- After angioplasty, the usual time off work is 1 week

The decision remains with your physician.

Your doctors will assess if you are able to handle the job demands by considering your heart health. If a license is required to do your job, for example, truck drivers, pilots; then a medical report will likely be required from a specialist e.g.: a cardiologist.

Your doctor needs to know the job duties and working conditions such as:

- The physical requirements of the job: lifting and carrying, pulling and pushing, shoveling, using heavy tools like jackhammers, etc.
- The conditions you work in: heat, cold, fumes, shift work
- The stress on the job from: deadline, supervising, job strain (too much work and no ability to control the work).

When your physician has decided that you can return to work, a gradual return to work over 4-6 weeks can help with readjusting to work. A gradual return to work might involve moving from part-time hours to full time hours as well as beginning with lighter duties, perhaps lifting and carrying is restricted for the first 4 weeks. A written schedule will help you and your employer. You may need to neglect household chores and social activities when you first return to work in order to not become over-tired. Most individuals report that they are tired when they return to work; this usually improves in 2-4 weeks.

Income while you are off work can come from a variety of sources. Your benefits may have accumulated sick leave and/or disability insurance either short or long term. Long term benefits may be available through your employment; for further details check with your supervisor or Human Resources dept.

Employment insurance benefits (sickness benefits) may be available, see page 3 of this booklet.

If your physician indicates that you should never work again; you may be entitled to Canada Pension Plan Disability benefits. See page 4 of this booklet.

While you are off work, stay in contact by telephone, email or dropping in to see your boss and coworkers occasionally. This will help them know that you are okay, show that you are interested in returning to work, and may help with work return by making you aware of any changes that have taken place.

Before you return to work, think about what new work habits you would like to put in place. When you return to work, make some changes. Some recommended changes include: not taking work home, limiting work hours, taking a lunch break which includes exercise, delegating or saying no to extra work or work that someone else can do.

If you are concerned about stress; remember that every job has some stress and stress can be positive and help us perform. You can learn more about stress online (see resources below) and/or take a stress management course. The University of Ottawa Heart Institute offers Stress Management programs. Go to www.ottawaheart.ca/patients\_family/outpatient-program.htm

#### **ONLINE RESOURCES**

- www.helpguide.org/topics/stress/htm
- www.mayoclinic.org/healthy-living/stress-management/in-depth/stress-management/art-200442899
- www.heretohelp.bc.ca/factsheet/stress
- www.camh.ca/en/hospital/health\_information/a\_z\_mental\_health\_and\_addiction\_information/ stress/Pages/info\_stress.aspx
- www.nlm.nih.gov/medlineplus/stress.html
- www.cci.health.wa.gov.au/resources/infopax.cfm?Info\_ID=46

It is normal to have questions about returning to work and there is assistance for you.

A Vocational Counselor who specializes in work issues is available through the University of Ottawa Heart Institute Cardiac Rehabilitation program. If you are not already referred to the Cardiac Rehabilitation program, ask your physician to refer you. See:

www.ottawaheart.ca/patients\_family/outpatient-program.htm

You may be able to access an Occupational Health nurse or company doctor or an Employee Assistance program through your work.

Your family physician may be able to assist as well.