



Short Term & Long-Term Disability FAQ's

When Does Your Disability Claim Begin?

- If you are absent from work for 5 or more consecutive days or you have a planned medical procedure, in all cases a disability claim should be started as soon as possible if the duration is anticipated to be longer than 5 days. This will mean advising your manager and sending a [HelpNow request](#). The request to HelpNow+ should include the anticipated start and end date of your leave. This helps to avoid overpayment at the start of your leave.

What happens next?

- You will need to complete a claim for disability benefits, which is 3 parts for RBC Insurance, and it must be submitted directly to them.
- Your claim can begin to be reviewed for approval by RBC when they receive all 3 forms.
 1. A Client's Statement of Disability (from you)
 2. An Attending Physician Statement (from your doctor)
 3. An Employer's Statement of Disability (submitted by VMware)
- Once all 3 forms are received by RBC, a disability specialist will be assigned to your claim and the assessment will begin. An RBC Representative will contact you for a detailed telephone interview and may request additional medical information from your attending physician.

Where do I send the disability claim forms?

By email: intake@rbc.com
By fax: 1-800-714-8861
By mail: RBC Life Insurance Company, Life & Health Claims Department
P.O. Box 4435, Station A
Toronto, Ontario
M5W 5Y8

Your Contact Information

To make sure that VMware as well as RBC can reach you, please make sure that your contact information in Workday (personal email, phone numbers and home address) are up to date. Your contact information will be used to send correspondence and to reach you throughout your leave.

Your Privacy

- Your privacy and the confidentiality are important to us. Please remember that all medical information is to be directed to RBC and not VMware. Also be mindful of medical information shared in emails where multiple people are copied.

RBC will advise VMware on your return-to-work status and medically approved accommodation.

How long does it take for a decision to be made on my claim?

- From the time all required claim forms are received through to a full review of the supporting information, the normal processing time for initial review, is 10 business days.

What does it mean if my claim is pending?

- If your claim is pending, this means RBC may require more information from you or your attending physician. RBC will advise you verbally and in writing of what is needed to complete the assessment of your claim.

How can I avoid delays in my claim?

- The time it takes to make a decision on a claim depends on the complexity of your condition and other factors preventing you from working. Therefore, a decision might take longer as RBC tries to assess and understand your medical and functional circumstances and how they impact your ability to work.
- Submitting thoroughly completed claim forms and information to RBC as quickly as possible assists in moving the claim process forward and avoids delays.
- The best way to help speed up the decision process is to make sure that forms are fully completed and submitted to us right away. Claim forms should be sent to us at least 8 weeks before the end of the elimination period. You can also encourage your employee to do their part and send their claim for—and their physician's form—to RBC Insurance as quickly as possible.

How will I know I've been approved for Short Term Disability benefits?

- If your claim is payable, RBC will call you to communicate their decision. They will explain the benefit details and coverage information, as well as the next steps and expectations for the ongoing management of their claim. An approval letter confirming the decision and outlining the details will be sent to you as well as VMware.
- A disability claim will be payable as long as you are deemed "disabled" according to the definition of disability in the VMware group policy. The length of payment depends on a few major factors: severity and complexity of the medical condition, required recovery time and treatment of the condition, and any rehabilitation that might be needed to help you return to work. Because every claim is unique and the medical circumstances of an employee are different, the duration of a claim will vary.

Do I receive payment from VMware or RBC?

- Once you are absent from work for 5 days or more and have started the Short-Term Disability process, all payments will come from RBC, the timeliness of submitting your paperwork is important to ensure no delays in payment. Your VMware pay will suspend, and disability payments will come from RBC.

What if the claim is not payable?

- RBC will provide a clear and detailed explanation of their decision to you in writing and over the phone. VMware will also be advised of RBC's decision on your claim.

Examples of why your claim may not be approved:

- You do not meet the definition of disability
- Your claim is due to a pre-existing condition
- You are not under the appropriate care of a physician
- You do not meet the minimum hours requirement to qualify for coverage

Please review the group policy for full details of all terms of coverage. Your RBC Disability Claims Specialist can assist you with any questions regarding the disability terms.

Can I appeal a denial of my disability claim?

- The RBC claim process is designed to ensure that your claim receives a thorough, fair, and objective evaluation. You have the right to appeal the decision within 90 days of the date of the decision letter. The appeal process will be clearly outlined in the denial letter. Any questions about the appeal should be directed to RBC.

Where do I go if I have questions?

- If you have any questions call RBC toll free at 1-877-519-9501 or 416-643-4700.
- For work or VMware policy or process questions please use reach out to HR Source by creating a HelpNow+.