

Extending Your Client's EI Sickiness Benefit Period



Final Test Workbook

Today is Monday, June 15, 2020.

You are serving your next client, Natalie Lefebvre, who wishes to extend the EI sickness benefit period on her claim.

Refer to the medical documentation, FTS and NWS images, and week code calendar found in this workbook, along with your operational procedures and the knowledge acquired so far, to complete all final test questions.

DENIS PERREAULT
M.D., F.R.C.S. (C)



MANON PERREAULT
M.D., F.R.C.S. (C)

ORTHOPEDIC SURGEONS
MOOV! SPORTS MEDICINE CENTRE
123 SAINTE MARIE BOULEVARD
GATINEAU, QUEBEC
J8J 8J8
PHONE: 819-555-1234

To whom it may concern:

Date: June 15, 2020 Name: Natalie Lefebvre
Address: N/A Phone: 819-123-5555

This note confirms that the above patient attended my office/clinic for an appointment.

The patient has (or had) surgery on: May 15, 2020

And is required to remain off work for approximately:

_____ Week(s) _____ Month(s) _____ indefinitely

Was examined and treated in my office/clinic, and in my opinion should:

☒ Return to work on July 27, 2020

☐ Return to modified work

☐ Restrictions: Duration _____ Day(s) _____ Month(s) _____ indefinitely

☐ Other: _____

Sincerely,

Denis Perreault
Denis Perreault, M.D., F.R.C.S. (C)

Manon Perreault, M.D., F.R.C.S. (C)

File Search View Transaction Enquiry Mainframe Links Window Help

Claimant Access Code Issue Payments

SIN: 111-222-333 Access code: 01 Benefit period commencement: 2238/10May20

Name: Natalie Lefebvre Date of birth: Tue 04 Dec 1990 SCC: 2445 - Maniwaki

Address: 12345 Laurier Street Gatineau, QC J0J 0E0 Gender: 3 - Female SCC province: 5 - Quebec

Language: 1 - English Telemesssage security: 0 - No restriction

Telephone: 819-888-7777 Access to Electronic reporting: T - Selected

[Disqualifications / Disentitlements](#) [Outstanding Registrations](#) [Direct Deposit](#)

Summary Rate/Duration E-Report Payments Overpayment **Special Benefits** Project Pending/Reject History Dormant Manual Pay

Maternity

Expected/Actual date: Indicator: Period: Weeks paid:

Parental

Entitlement weeks: Adoption/Arrival date: Parental duration: Period: Weeks paid: Extended parental: ☐

Compassionate Care

Entitlement weeks: [Second Entitlement Period](#) Period: Weeks paid: Compassionate care status: Certificate number:

Sickness

Recovery week: 2241/06Jun20 Weeks paid: 3

[Special Benefits Extension](#) [Supplemental Unemployment Benefits](#) [Wage Loss Insurance](#)

Regular weeks paid: 0
Special weeks paid: 3
Total weeks paid: 3

Full Text Screens

File View Transaction Enquiry IPOC Mainframe Links Window Help

Claimant Access Code Issue Payments

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Summary Rate/Duration E-Report **Payments** Overpayment Special Benefits Project Pending/Reject History Dormant Manual Pay

Report Week	Date Processed	Amended	OP	Gross	Earn(1)	Earn(2)	Tax	Deductions	Net	Benefit Type
2241/31May2020 – 2241/06June2020	2242-09June2020	<input type="checkbox"/>		\$350	\$0	\$0	\$13	\$0	\$337	10 - Sick
2240/24May2020 – 2240/30May2020	2241-02June2020	<input type="checkbox"/>		\$350	\$0	\$0	\$13	\$0	\$337	10 - Sick
2239/17May2020 – 2239/23May2020	2241-02June2020	<input type="checkbox"/>		\$350	\$0	\$0	\$13	\$0	\$337	10 - Sick
2238/10May2020 – 2239/16May2020	2241-02June2020	<input type="checkbox"/>		\$0	\$0	\$0	\$0	\$337	\$0	10 - Sick

Registration Number Details

Registration 1

Registration number:

123456

Action:

SCC:

2445 - Maniwaki

Date registered:

2243-2/15Jun20

Status:

0 - Registered only - no transaction entered

Claim source:

Service unit:

Decision type:

3 - Revised

Registration flag:

Registration 2

Registration number:

Action:

SCC:

Date registered:

Status:

Claim source:

Service unit:

Decision type:

Registration flag:

☐ Create Work Item

Update

Close

Page 6 of 13

Renewal / Revised			
Registration number:	<input type="text"/>	BPC:	<input type="text"/>
Renewal:	<input type="text"/>	Revival:	<input type="text"/>
Claim type:	<input type="text"/>	Earnings week 1:	<input type="text"/>
Manual action:	<input type="text"/>	<input type="checkbox"/> Rescind	
Insured Hours: <input type="text"/> Earnings: <input type="text"/>		Rate Calculation Period Start: <input type="text"/> Divisor: <input type="text"/> End: <input type="text"/> Cutoff date: <input type="text"/>	
Recalculation: <input type="text"/>		Violation: <input type="text"/>	
Record of Employment: <input type="text"/>		Gender: <input type="text"/>	
Action: <input type="text"/>	Disentitlement: <input type="text"/>	Start: <input type="text"/>	End: <input type="text"/>
<input type="text"/>	Disqualification: <input type="text"/>	# of weeks: <input type="text"/>	Start: <input type="text"/>
Claimant's Report No claimant's report: <input type="checkbox"/> Rescind <input type="checkbox"/> System action: <input type="text"/>		Tentative allocation <input type="text"/>	
Wage loss insurance: <input type="text"/>	SUB: <input type="text"/>		
Waiting period: <input type="text"/>	Railway / Rural: <input type="text"/>		
Decision type: <input type="text"/>	BPNE: <input type="text"/>	Contentious: <input type="text"/>	Complete: <input type="text"/>
Overpayment Detection: <input type="text"/> Infraction: <input type="text"/> Message: <input type="text"/>			
		Store	
		Update	Close

Special Benefits	
Sickness Last day worked: <input type="text"/> Recovery week: <input type="text"/> <input type="checkbox"/> Rescind	
Maternity Confinement: <input type="text"/> <input type="checkbox"/> Rescind	
Parental Arrival/Placement week: <input type="text"/> Start week: <input type="text"/> Entitlement weeks: <input type="text"/> Natural/Adoption: <input type="text"/> Modification: <input type="text"/>	
<div>Save</div> <div>Close</div>	

Decision type:

-

1 - Initial
2 - Renewal
3 - Revised

Contentious:

-

1 - No
2 - Yes

Complete:

-

C - Yes
D - No

Claim source:

-

1 - In person
2 - Appli-Web Internal
3 - Mail/Hard Copy

Service unit:

-

1
2
3

Decision type:

-

2 - Renewal
3 - Revised

Registration flag:

-

0 - Regular registration
1 - Integrity Services

SIN: (111-222-333)

Checklist: Transcript of Doctor's Note

1. Medical information as reported on the note:

(To whom it may concern:

Date: June 15, 2020

Name: Natalie Lefebvre

Address: N/A

Phone: 819-123-5555

This note confirms that the above patient attended my office/clinic for an appointment.

The patient has (or had) surgery on: May 15, 2020

Was examined and treated in my office/clinic, and in my opinion should:

Return to work on July 27, 2020.

Sincerely,

Denis Perreault)

a. Or content illegible:

()

2. Doctor's:

a. Name

(Denis Perreault)

b. Phone Number and area code

(819-555-1234)

c. Specialty

(Orthopedic Surgeon)

3. Doctor's Signature:

(Yes)

4. Date of Signature:

(June 15, 2020)

5. Letterhead or Official Stamp?

(Yes)

Work

Users

Statistics

Search

Open

Close

Save

Draft

Delete

Add

Note

Print

Create

Complete

Reassign

Reassign

Move to Pending

Move to Current

SIR Options

Create

Reinstate

Move

Modify

Decision Options

RCM

MSCA

Create Questionnaire

View Questionnaire

Processing Activities

View Letters

Reference Tools

111-222-333 - Lefebvre, Natalie

Phone number: 819-888-7777

Client information tree

Historical

111-222-333

Web Application - 14/05/2020

External

Work item(s)

Historical

WI

Specification

Due Date

User

Status

Workload

General Inquiry

Web Application

14/05/2020

Complete Application View

Summary

Start Application

Filing Instructions

Identity Information

Personal Information

Programs and services

Income Tax Information

Direct Deposit

Other Personal Information

Last Employer

Last Employer Earnings

Job Title Information

ROE Information - Last Employer

Other Employers

Sickness

Maternity Information

Employment History

Business Relationship

Variable Best Weeks

Workforce History

Self-Employment

Farming

Training

Third Party Declaration & Attestation

Confirmation and Information

Exit

Summary

This claim was completed in English

111-222-333	Natalie	Lefebvre	Female	English/English
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Phone:

819-888-7777

Messages:

819-888-7777

Date of Application Start:

14/05/2020

15:17

Date of Application:

14/05/2020

16:25

Direct Deposit:

Use existing account information.

Type of Benefit:

Illness Initial

Last Employer:

Bert's Chimney Cleaning and Repair 07/10/2009 To 14/05/2020

ELWW: \$700.00 (Agree)

Vacation Pay

NWE: \$700.00

Employment History Issues:

Variable Best Weeks

- Call Back
- Action Item
- General Inquiry
- Reminder
- Claim Assessment / Specialized application
- Adjudication Issue
- Claim Review
- Assessment Issue
- ROE Issue
- Correspondence

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Complete X

Action: Completed

Completed date: Insert current date

Details:

8000 Characters remaining

OK

Cancel

The Golden Rules	
The incapacity end date falls between a Monday and a Saturday.	Use the week code that contains the incapacity end date.
The incapacity end date falls on a Sunday.	Use the code of the week prior to the date the incapacity ends.
The recovery date falls between a Tuesday and a Saturday.	Use the week code that contains the recovery date.
The recovery date falls on a Sunday or a Monday.	Use the code of the week prior to the recovery date.
The recovery information shows a month and a year instead of a date.	Use the first day of the month as the recovery date (see above guidance regarding the day of the week on which the first day of the month falls).
The incapacity period is indefinite or the recovery date is not indicated or is undetermined or unknown.	Select 9999 - Indefinite from the drop-down menu.

2020

WEEK CODE CALENDAR
TABLEAU DES INDICATIFS HEBDOMADAIRES

2020

WEEK SEM	SUN DIM	MON LUN	TUE MAR	WED MER	THU JEU	FRI VEN	SAT SAM	WEEK SEM	SUN DIM	MON LUN	TUE MAR	WED MER	THU JEU	FRI VEN	SAT SAM
JANUARY 01								JANVIER 07							
2219				1	2	3	4					1	2	3	4
2220	5	6	7	8	9	10	11	2246	5	6	7	8	9	10	11
2221	12	13	14	15	16	17	18	2247	12	13	14	15	16	17	18
2222	19	20	21	22	23	24	25	2248	19	20	21	22	23	24	25
2223	26	27	28	29	30	31		2249	26	27	28	29	30	31	
FEBRUARY 02								FÉVRIER 08							
							1								1
2224	2	3	4	5	6	7	8	2250	2	3	4	5	6	7	8
2225	9	10	11	12	13	14	15	2251	9	10	11	12	13	14	15
2226	16	17	18	19	20	21	22	2252	16	17	18	19	20	21	22
2227	23	24	25	26	27	28	29	2253	23	24	25	26	27	28	29
								2254	30	31					
MARCH 03								MARS 09							
2228	1	2	3	4	5	6	7				1	2	3	4	5
2229	8	9	10	11	12	13	14	2255	6	7	8	9	10	11	12
2230	15	16	17	18	19	20	21	2256	13	14	15	16	17	18	19
2231	22	23	24	25	26	27	28	2257	20	21	22	23	24	25	26
2232	29	30	31					2258	27	28	29	30			
APRIL 04								AVRIL 10							
				1	2	3	4						1	2	3
2233	5	6	7	8	9	10	11	2259	4	5	6	7	8	9	10
2234	12	13	14	15	16	17	18	2260	11	12	13	14	15	16	17
2235	19	20	21	22	23	24	25	2261	18	19	20	21	22	23	24
2236	26	27	28	29	30			2262	25	26	27	28	29	30	31
MAY 05								MAI 11							
						1	2	2263	1	2	3	4	5	6	7
2237	3	4	5	6	7	8	9	2264	8	9	10	11	12	13	14
2238	10	11	12	13	14	15	16	2265	15	16	17	18	19	20	21
2239	17	18	19	20	21	22	23	2266	22	23	24	25	26	27	28
2240	24	25	26	27	28	29	30	2267	29	30					
2241	31														
JUNE 06								JUIN 12							
		1	2	3	4	5	6				1	2	3	4	5
2242	7	8	9	10	11	12	13	2268	6	7	8	9	10	11	12
2243	14	15	16	17	18	19	20	2269	13	14	15	16	17	18	19
2244	21	22	23	24	25	26	27	2270	20	21	22	23	24	25	26
2245	28	29	30					2271	27	28	29	30	31		