



Know Your Occupational Benefits

Benefits and Requirements of the ILLINOIS WORKERS' COMPENSATION ACT

Notifying United Management of Injury/Illness

United requires that the Flight Attendant report the injury/illness within 24 hours after arrival from an ID. If the Flight Attendant is injured enroute, and requires Medical attention at a layover point, they must call **SOS Medaire** for referral to a medical facility in the layover city. **SOS Medaire** will also guarantee payment of all medical expenses in most cases. All calls to **SOS Medaire** or **OPBSK** from a layover location will be reimbursed; however, you will need to submit detailed call expenses via a company expense form to your local domicile. Illinois Workers' Compensation law allows 45 days from the date of the injury/accident. However, the longer the delay in reporting, the longer it will take to process the claim and begin benefits. Make sure the management person notifies the Employee Service Center (ESC) to begin the process. If you don't call in sick immediately, tell the supervisor to change your status to a Lost Time Injury (LTI) at **Gallagher Bassett (GB)** when you do. GB should call you within 48 hours of calling in sick. If you are counseled for filing a claim, call your Local AFA office immediately.

Completing Paper Work to Begin Your Claim with Gallagher Bassett

Assist the Supervisor in filing your claim. You are entitled to benefits if you have medical bills or miss work. The Supervisor may not deny your ability to file the claim. Get a copy of all documents and reports from the Supervisor including the completed UAL HURT form (the report the administrative supervisor files to open the claim). If there is a delay in accepting your claim, call GB to find out if there is anything you can do to speed it along. Filing a claim with GB will not file a claim with the state of Illinois. You have 3 years from the date of injury or 2 years from your last TTD payment to file with Illinois. If you are getting close to either of those dates, contact a lawyer to discuss if you need to contact Illinois.

Filing for Benefits in Illinois or Other Locations with Jurisdictions

Under Section 29 of our Contract every Flight Attendant has the right to file for Workers' Compensation benefits in the state of Illinois and in any other location that has jurisdiction over the claim. There may be other states that will have jurisdiction depending on the circumstances of the injury/illness. For Flight Attendants based in International domiciles, Illinois will probably be the only option unless you are eligible under the law of the country in which you are based. If injured while on a layover in the U.S. you might be able to file a claim in that state. For all Flight Attendant's there will be a presumption that the claim will be filed in Illinois unless you tell UAL that you want to file it elsewhere. The benefits in Illinois are greater than other states so it is usually best to file there first. Filing a claim with GB will not file a claim with the state of Illinois. You have 3 years from the date of injury or 2 years from your last TTD payment to file with Illinois. If there are delays in accepting your claim or it is denied in Illinois or your income for the 12 months prior

to the date of injury is below a certain maximum, filing in another jurisdiction may be available to you. If you ever need an attorney, she/he will need to be from the state in which you filed your claim. If you want to transfer your claim you may do so by calling GB and requesting your claim to be transferred. You may also continue to appeal a denial in Illinois while pursuing benefits in another state. You may only collect benefits once; however, you may collect the highest benefits available to you. Call your local AFA Office or your local Occupational Benefits Committee if you are considering transferring your claim. Proceed with caution when filing a claim in another state.

Medical Treatment

Your first priority is to get treatment. If necessary, get medical treatment before completing any reports. If filed in Illinois, you may choose your own doctor. If filed in another state, this may change; call your Local AFA office for info on your state. Take an **Employee Status Form (ESF)** (see "Use of the Employee Status Form" below) with you each time you see your treating doctor. Have the doctor complete the ESF. You must FAX the ESF to the Flight Attendant Service Center. You do not have to see a Company designated medical facility unless directed by UAL. In Illinois, if UAL directs you to see a doctor of their choice, UAL will pay for all expenses. You must submit to an examination but do not have to be treated by UAL's choice of doctor. Bring the job description with you to this exam. Your treating doctor may refer you to an unlimited number of specialists that UAL must pay for. If you see another doctor in your chain of referrals, notify GB that you are using a new referral doctor. You may also change treating doctors one time. This 2nd doctor may also refer you to an unlimited number of specialists for a 2nd chain of referrals. If you change to a 3rd treating doctor, UAL is not required to pay for that chain of doctors. For treatment in International Locations: (See "Medical Bills" below).

Use of the Employee Status Form (ESF)

The Employee Status Form is a tool to help make the decision as to whether the Flight Attendant is able to return to work. The ESF however is **not** considered "medical documentation/medical report". It has a list of activities that are needed in the job with a percentage of how often the Flight Attendant can do that activity, if at all. This is returned by the Flight Attendant to the Employee Service Center (ESC) by fax immediately after each visit to your treating physician. The ESC will send it to the occupational specialist who will compare it to a detailed job description to determine if the Flight Attendant can return to work. If there is a dispute the Flight Attendant may go to company medical (Concentra or U.S.Healthworks) for another opinion. If there is still disagreement, and if your treating physician feels you should **not** return to work, contact your Local AFA Office for assistance in requesting a review from United's company physician, and pursuing Medical Arbitration (Contract Section 20.D.).

Investigating the Claim: "Arising Out of and In the Course of Employment"

GB will investigate all claims to ensure the injury/illness is work related. When completing your report include how your work caused the injury, if applicable. For example, "while reaching for a tray in the cart, I felt a sharp pull in my back" not

merely “during the flight I felt a pull in my back.” Layover injuries are covered as long as you are doing something that someone would reasonably do while out of town for business, i.e. slipping in the bathtub, tripping while walking to a restaurant, etc. If in doubt file a claim. Cooperate with the investigation including sending documents requested as long as they relate to your injury. You are not required to submit to a tape recording of questions and answers or statements. Benefits cannot be denied or held hostage because you refuse to allow a taped statement. You must allow medical reports regarding treatment related to the injury only to be sent to GB but you are not required to answer questions about your medical condition and your treating doctor and her/his staff do not have to fill out questionnaires sent by GENEX or GB; however you may allow this if you want. Avoid giving out too much information.

Medical Records Release Form

You must allow the release of medical records but only of those associated with the body part(s) that are affected by the injury/illness. GB will send a medical records release form for you to sign. **Do not sign this form.** AFA has written an amended medical release form that you should use, which is included in this packet. If you have signed the GB release form, sign the AFA form and FAX/mail it to GB. Inform any care provider (and FAX the AFA Medical Records Release form to them) who has treated you that you have signed another form that should be honored.

Medical Bills

You should not receive any medical bills that result from treatment of your occupational injury/illness once your claim has been accepted. If you are sent a bill, immediately send it to GB and call your claims representative to inform her/him the bill is being sent. If your claim has been denied but you are appealing it, you should submit your bills to **AETNA, or BCBS** (depending on your state of residence) marking the box that asks if it is work-related and send a copy of the denial letter along with the medical bill. For payment in International Locations: Some facilities in countries outside the United States will not provide treatment unless payment is made in advance. If you have problems with medical treatment payments outside of the United States, contact the domicile or station manager in the country where medical treatment is taking place for assistance in paying Medical Bills. For further assistance in paying for occupational medical bills in international locations contact Dorothy Malone, Senior Staff Representative Workers’ Compensation (Dorothy.Malone@united.com) or Barry.Jenkins@united.com.

Managed Medical Care under the Illinois W.C. Act

UAL will be using **GENEX** as a managed care vendor to advise GB claims representatives about medical treatment. In some cases, GB may refuse to pay for treatment. However, they must pay for any bills incurred until the Flight Attendant is notified of the decision to stop payment. **GENEX** has Nurse Case Managers on staff who will discuss your case with your claims representative. If GB refuses to pay for treatment, your treating physician may call these doctors to discuss this. If your case is assigned a nurse, she/he will contact you to ask you a series of

questions about your claim. She/he cannot prescribe treatment. Be courteous but remember this nurse is an employee of UAL and will report any information they receive from you or your doctor to GB and UAL. GB, as UAL's agent, has the right to obtain the existing written records and reports from the medical providers that are related and necessary to their obligation to pay your benefits (See "Medical Records Release Forms" above). The nurse should not ask questions about medical treatment beyond your diagnosis, treatment and progress. Neither you nor your doctor has to respond to written questions sent by GB or GENEX. You may advise the nurse that you do not want her/him to speak with your doctor or her/his staff beyond diagnosis, treatment and your progress. Your claims representative should not threaten to cut off your benefits if you don't allow the nurse to speak at length with your doctor. Any medical details can be obtained by getting the medical records regarding treatment for your current injury. You can also expect a call from the nurse after each appointment with your treating doctor. You may answer questions as to how your treatment is going. If you want to discuss your case with the nurse you certainly may do so. The **GENEX** nurse is not part of the treatment for your injury and is not bound by doctor/patient confidentiality. Any information obtained will be given to UAL. Anything you say can be used against you. If your claim continues, a field nurse may be assigned to manage your case. She/he will want to meet with you in person and/or go with you to your doctor's appointment. You do not have to meet with the nurse nor let her/him into your home. If you do want to meet with the nurse, arrange to meet at a place close to but not in your home. If you do allow the field nurse to speak with your doctor, you should be in the room. She/he does not have the right to sit in during the examination. The job of the **GENEX** nurse is to control the cost of your claim.

Disability Pay, Temporary Total Disability Pay, Paid directly to you by GB

Your workers' compensation disability pay, called Temporary Total Disability pay (TTD), is based on your pay for the 12 months prior to your injury. First, your Average Weekly Wage (AWW) is calculated by dividing all the money you earned in those 12 months by the number of weeks worked. Every penny you're paid, (excluding multi day per diem, taxi cab reimbursements, profit sharing), is included in this calculation. If you earned \$45,000 the 12 months prior to the injury, it would be divided by 52 weeks to get your AWW. If you took ANP, RDO, GWOP or were on a leave of absence (LOA) this time should be subtracted from the calculation. For example, if you made \$45,000 but took 30-day ANP (WOP) you would divide the \$45,000 by 48 weeks not 52. This is multiplied by .6667 to calculate your TTD. In the above example $\$45,000 \div 48 = \$937.50 \times .6667 = \$625.03$ TTD per week. Since it extremely rare that two Flight Attendants would earn the exact same amount of money, it is normal that no two Flight Attendants will have the same weekly TTD payments. TTD is not taxable. It is very important that it is calculated correctly initially. Call GB to determine what they have calculated as your AWW and TTD. Your TTD payment, the majority of your total disability pay, will come directly from GB. Because of this it is very important that you monitor GB to make sure they are paying you correctly and in a timely fashion. To find out if your TTD payment has been sent you may call 1-888- UAL-0040. If you are based at an International Location, direct deposit is available. Be sure to advise the claims representative if that is how you would like to receive your TTD payments.

Section 12 Examination (Formerly Independent Medical Examination)

UAL does have the right to have you examined (but not treated) by a doctor of their choice at their expense. It is usually referred to as an Independent Medical Examination (Section 12 Exam). When the request letter is sent it must be accompanied in the same envelope as an expense check that is required to be sent for travel costs. This doctor cannot prescribe treatment. You will probably be sent to Chicago for the Section 12 Exam. The reason for this is if there is a need to have a hearing before the Illinois Workers' Compensation Commission (WCC), it is easier to admit the opinions of an Illinois doctor before the WCC. This does not mean your treating doctor's opinions will not be accepted, in fact, there is a presumption that the treating doctor's opinion is correct if there is a dispute between your doctor and UAL's doctor. In some cases, the Section 12 Exam may state you can return to work (RTW) while company medical will not release you to RTW. UAL will place you on personal S/L because GB will terminate your Workers' Comp benefits based on the Section 12 Exam. You will probably need an attorney to reinstate your benefits. GB might ask for a Section 12 Exam if there is dispute in your claim or if you have reached Maximum Medical Improvement (MMI). MMI is when you have improved as much as you can after medical treatment. It does not always mean you are 100%. UAL must pay for all reasonable expenses associated with the Section 12 Exam before the appointment. If you are sent for a Section 12 Exam you must be notified of the appointment at least 10 days before the date. If you are not, or if the date is inconvenient, call GB and the Section 12 doctor to reschedule the appointment. Do not ignore the request. UAL should make arrangements for a hotel room if you need one and travel arrangements, usually a Positive Space ticket if you must travel by air. If you commute, request the ticket be written from your home. They should issue a check prior to your going to cover most expenses. If it is not received or not enough to cover most of your expenses, you may reschedule your appointment. Call GB before you do that. Keep all receipts and submit an expense report to prove how much was spent. You do not have to attend a Section 12 Exam on a day off if you are back to work. You must attend these appointments or your benefits could be discontinued until you are examined. Take the job description with you when you go and take good notes during the exam. If you are physically unable to attend, you may reschedule the appointment with a doctor's note or request a local doctor; although there is no guarantee you'll be allowed to go to a local doctor.



Know Your Occupational Benefits

Contractual Occupational Benefits

Occupational Sick Leave

Whether you are on occupational Sick leave (S/L) or non-occupational S/L you will draw sick leave from the same bank. You accrue 4 hours per month up to a maximum of 1000 hours. That is approximately a year of S/L for an average of 83.33 hours per month. The TTD to which you are entitled will be paid directly to you from GB. You may then augment your disability pay by using your personal S/L. You may use your S/L with the options of Section 19.A of the Flight Attendant Agreement; bid a line of flying and be paid the difference between your TTD and the hours of the line, opt for the quarterly maximum or opt for the 71 hour minimum, again with the difference between your TTD and hours chosen paid out of your S/L bank. If you chose the 71 hour option and your TTD is greater than the 71 hour amount, you will be placed on a medical leave of absence immediately and will not be allowed to return to sick leave status until you have one day of active status. Be very careful of choosing this option. Try to calculate your TTD before you make the decision to use the 65 hour minimum. You may also opt to go on a medical LOA and save your S/L. However, if you cannot return to one day of active status you may not use your S/L. Great care should be made in making the decision as to whether you want to go on a medical LOA and not use your S/L. Under Contract Section 23.C. the medical LOA is for 3 years only. If you use both your S/L and then the medical LOA you will have more time to recuperate to return to flying.

Family Medical Leave Act (FMLA)

The Family and Medical Leave Act (FMLA) was developed to allow employees time off for their own medical needs or those of their family without worrying about losing their jobs. On December 9, 2009 the Airline Flight Crew Technical Correction Act was signed into law. This Act amended a portion of the Family and Medical Leave Act and established special hours of eligibility for airline Flight Attendants and flight crew members. In addition to these Acts, United has a Family and Medical Leave policy which mirrors the acts. If your occupational illness or injury qualifies for FML, and you have flown 504 hours in the prior 12 months, the absence will be automatically certified as FML and no points will be assessed for the time away from work. If the illness or injury does not qualify as FML as you do not meet the eligibility requirements, you will be assessed 2 points. If the illness or injury is less than 6 days and you have a physician's note, the points will be reduced to 1.5. An occupational absence should never be used as the triggering incident for discipline. Call your Local AFA Office for more information on the use of FMLA.

ANP (WOP) and Special Leaves of Absence

While you are on occupational status if you have requests for special leaves of absence or ANP (WOP) you should consider removing them until you return to active status. These requests will be granted which could lead to consequences you did not intend. **Once you have been placed on a different LOA you will not be allowed to transfer back to occupational status without one day of active status.** In other words, you must be released from S/L and be qualified to fly a

trip before you may be placed back on occupational status. A Personal LOA or taking 2 consecutive months of 30-day ANP (which results in a Personal LOA) will mean that you can no longer use your S/L, and you won't accrue seniority after 180 days. Also on a Personal LOA, to continue medical and dental insurance you must pay COBRA rates. Additionally, you will not accrue S/L, vacation, or be able to use travel benefits after 90 days. You will merely be allowed to remain on the LOA for 3 years at which point you will be terminated if you do not qualify for retirement. Even if you think your injury/illness is minor, consider removing the requests until you have returned to active status. If you have a transfer on file, and your transfer goes through and you cannot accept it, it will be considered refused; however, you will not be inhibited from submitting another transfer request at any time.

Tax Refund

TTD is not taxable for Federal, State or FICA taxes. Since you will receive the TTD directly, there will be no tax refund except under very limited circumstances. After the initial 6 months of disability, you should have no Social Security taken out of any payments including personal S/L.

Vacation during Occupational Sick Leave (S/L)

If your vacation falls within your occupational S/L, you will be paid for your vacation (pursuant to Section 18.K.c of the 2101-2016 CBA). You may defer your vacation thru interim be id for a different vacation using the procedures of Section 18 of the Contract. Speak to an occupational specialist about keeping you on occupational S/L status instead of vacation. If you are on occupational S/L or LOA during the annual vacation bid period (Oct. 29 - Dec. 11) you must bid for a vacation for the following year or you will be assigned one. Pick up your vacation bid package (or print it from SkyNet).

Using Personal Sick Leave or Medical Leave of Absence

You may stay on a medical LOA for 3 years. If you cannot return to work at that time you will either be terminated or retire if you qualify. If you want to save your S/L you may use the option of 71 hours which would allow you to use very little of your S/L bank if any and still have the benefits of active status. Again, be very careful of using the 71-hour minimum as you may be placed on an occupational medical LOA.

Buying Back Sick leave /Overpayments

If you choose to use personal S/L to supplement your TTD checks from GB, the TTD will be sent directly to you, and you will receive the S/L hours pay via a normal United payroll check. The only time you may have to buy back your S/L hours would be if your claim is not immediately accepted. You will be placed on personal S/L until it is accepted. Once your claim is accepted, and if you are off of work for 14 days or more on account of your injury illness, your TTD checks should be paid directly to you and retroactive to date of injury. As you will initially be paid from your S/L bank during the investigation period, and then paid retroactive to DOI when the claim is accepted, you will be paid twice. You should receive an overpayment letter from UAL corporate payroll fully detailing the amount of overpayment, AND a payment authorization form which allows you to pay the

amount in full, or pay in installments deducted from your paycheck which you receive from UAL. Once the overpayment is repaid in full, your personal S/L bank should have the associated hours restored. We suggest that you review your S/L hour bank after repayment in full, to insure that the hours have been properly credited to your bank.

Settlement for Permanent Partial Disability (PPD) Benefits

When you reach maximum medical improvement if you have suffered some permanent injury, however minor, you will probably be entitled to a lump sum settlement. This would be one instance where you might be requested to go for a Sec 12 Exam. This doctor will determine how much of a disability you have. This is called a disability rating and is measured as a percentage of the use of that body part. For example, if you injured your elbow and do not have as much flexibility as you did prior to the injury, you could be given a disability rating of 15%. This does not mean your whole body is 15% disabled, only your elbow. Therefore, a 15% disability rating of your elbow will be less than a 15% disability rating of your back. You might want to contact an attorney. AFA has a list of Illinois attorneys who know our Contract and our occupation. After you sign a release form, your local AFA Office will send the list. Once you are paid a settlement your TTD will end. Depending on your disability you may be entitled to permanent partial disability or permanent total disability. There is no requirement that you resign or retire in order to receive a settlement for your PPD. If your lawyer and UAL cannot agree on a settlement you may have a hearing before the Illinois WCC to determine your PPD benefits.

Vocational Rehabilitation

Depending on the amount of time you are out of work and the nature of your injury/illness you might be offered vocational rehabilitation (voc rehab). This usually happens when a doctor (probably after a Section 12 Exam) states you are "permanently disabled from doing your job". Under the Illinois statute you are to work in conjunction with the Voc Rehab specialist to develop a training program. This training should be an extension of your interests, ability and previous training. However, in some cases, it might merely involve job placement if you possess marketable skills. Participating in voc rehab will not jeopardize any of your Contractual benefits such as the 3-year occupational medical LOA or your ability to return to work as a Flight Attendant. Even if you are retrained and take a position elsewhere (or within UAL) you are allowed to remain on the 3-year medical LOA. You do not have to resign to take another job. You must cooperate with the Voc Rehab specialist or your benefits may be cut off. If you are not physically capable of participating in training you should tell the Voc Rehab specialist that it should be postponed until you are MMI. You will continue to receive payments in the same amount as your TTD; however they are referred to as "maintenance" throughout your training in addition to other expenses paid. To continue receiving this payment you must prove you are actively seeking employment.

Long Term Disability Insurance

If you have the Long Term Disability (LTD) insurance apply for it 6-8 weeks before you qualify which begins on the 271st day of total disability. You must also apply for

Social Security benefits and send in the denial letter or there will be a presumption that you qualify and it will be deducted from you benefit amount. The benefit from LTD is 50% of your 82 hours of pay if you are based in a domestic domicile or 75 hours if based in an International domicile (includes HNL). You must apply for the benefits within 12 months of your disability or you may forfeit the benefit for that absence. TTD will off-set the LTD benefit; however, you must apply when you first qualify or you will not be allowed to collect the benefit even if your TTD is terminated.

Return to Work/Medical Arbitration

The supervisor will look at your ESF to determine if you can return to work. If there is a dispute as to whether you may or must return to work, you may consult company medical and ask for a review. If there is still a dispute you may request medical arbitration under Section 20.D. of the Contract. For there to be a valid dispute you must have a doctor support your position. During the arbitration you will be placed on ANP status until it is resolved. If you prevail, you will receive back S/L (if you have hours in your S/L bank) or back pay if you are returned to work. AFA has developed a step-by-step procedure to guide you through this process. There are time limits for this process so it is best to call AFA as soon as you know there is a dispute to receive guidance. If you are sent for a Section 12 examination this doctor may write in her/his report to GB that you may return to flying status. It is very important that you determine your status with UAL. If you and your doctor agree that you should not return and company medical states you should RTW, ask the company physician for a review of her/his decision. This begins the medical arbitration process. You will then have 40 days to be examined again by a doctor of your choice and have her/him send a report to company medical. If company medical will not make a decision, call your administrative supervisor to determine your status. If UAL has placed you on non-occupational S/L or medical LOA, you will need to provide detailed documents, or Absence Certificate to UAL medical to prove your need to remain on S/L or medical LOA. Do not assume since you have not heard from UAL or GB about your status that you may remain on S/L or medical LOA. You may be charged with unauthorized absence, or job abandonment.

Contacting a Workers' Compensation Attorney

If you decide to retain an attorney, please call your Local Occupational Committee for a release to fill out. This release allows AFA to give you the list of suggested Workers' Compensation attorneys in Illinois. The release form must be faxed or scanned and emailed to your Local Council Occupational Volunteer before we can give you the suggested Attorney's list. Once you hire an attorney, GB will not be able to speak to you; everything must go through your attorney. In some cases having an attorney is essential. If you have problems, your first recourse is to speak with the administrative supervisor who is handling occupational benefits at your domicile. If you cannot get satisfaction from him/her please see the "Procedures to Follow if Problems Arise" page included later in this publication.

Contacting AFA for Assistance

If you have any questions about any of these procedures, feel free to contact your local AFA Office or your Local Occupational Benefits Committee. Although most of these benefits are legal benefits, we are happy to guide and assist you through the maze, even if it is to tell you that it may be time to contact an attorney.

The Cause Foundation

If you find yourself in a financial bind because of problems with your occupational claim, there are programs that can assist you. The *CAUSE* Foundation was established by United Flight Attendants for United Flight Attendants to help if there are financial problems. Call your Local AFA office for information on this very helpful Foundation.

Union Dues While on Occupational LOA Status

The **AFA Constitution and Bylaws** requires that all Flight Attendants pay dues for the first 3 months of any leave status, including **voluntary furlough**, and **Occupational LOA's**. Flight Attendants should contact the Local AFA Council with any questions about payment methods. If you would like to pay your dues beyond the required first three months to remain an active Member to vote, please contact the AFA International Office Membership Department at 1-800-424-2401, ext 707 to receive the the form for monthly deductions taken out of your checking account. You will also need to ask the Membership Department where you should fax or send a written and signed statement stating that you would like to "leave and remain active". If you choose not to pay additional dues on a monthly basis, should there be an AFA issue that becomes available for membership vote, you may also bring yourself "dues current" prior to the voting deadline in order to be eligible to participate.