

Submitting a Reconsideration

Produced by:
Saskatchewan Voice of People with Disabilities, February 1999

Acknowledgements:

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Copies are available for \$5.00 per copy, plus \$2.00 shipping and handling.
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Introduction:

Why do you need this CPP Appeal Kit?

The Federal Government does not provide appeal forms or an appeal kit for people who have had their CPP disability benefit application turned down. This kit is designed to assist you with your reconsideration appeal to Canada Pension Plan. A series of information numbers to assist you are available at the end of the manual.

Will you need an advocate's help?

This kit is not meant to take the place of an advocate or lawyer. It is a self-help tool that provides an outline of the first stage of the appeal process - the reconsideration.

How is Eligibility Determined?

To qualify for Canada Pension Plan disability benefits, you must:

1. Be between the ages of 18 and 65
2. Have enough Canada Pension Plan contributions at the time you became disabled.
3. Be disabled according to the Canada Pension Plan definitions
4. Apply in writing.

Contributions:

Contributions to the Plan are based on the amount of earnings from employment and self-employment. Recent changes to the contribution requirement provisions made by the federal government make the date your disability is deemed to begin very important.

If CPP determines that you became disabled prior to January 1, 1998, then you must have worked and contributed to CPP in either two of the three years, or five of the ten years before you became disabled. If CPP determines that you became disabled after January 1, 1998, then you must have made contributions to the Plan in four of the last six years.

People who have contributed to the CPP for 25 years or more have an additional MQP option. A recent update to the Canada Pension Plan legislation says that if you have made valid contributions for twenty-five years or more, you need valid contributions in only three (3) of the last six (6) years to meet the contributory requirement. These new rules apply only to disability benefit applications made on or after March 3, 2008

In order to help you qualify for benefits or increase benefits that are payable, there is a Child Rearing Dropout Provision. This provision allows for certain periods to be excluded when the pension and qualifying period are calculated.

CPP Definition of Disability

You must be deemed to have a “severe” and “prolonged” mental or physical disability to qualify for benefits. CPP defines “severe” as a condition that makes “a person incapable of regularly pursuing any substantially gainful occupation.” “Prolonged” is defined “as such severe disability is likely to be long continued and of indefinite duration.”

The Stages of the Appeal Process:

Stage 1 - Reconsideration

You must appeal in writing no later than 90 days from the date you receive the letter that says your application has been denied.

Stage 2 - Review Tribunal

If Stage 1 is unsuccessful, you can appeal this decision to a Review Tribunal. You have 90 days to submit and appeal at this level.

Stage 3 - Pension Appeals Board

The Minister of Human Resources Social Development can appeal decisions made by the Review Tribunal to this Pension Appeals Board by you, or if they are dissatisfied with a decision. There is also a 90-day deadline to appeal at this level.

This kit is intended to help people who are appealing at Stage 1 - the reconsideration. If your case has gone beyond this stage, you may wish to consult with an advocate to help you.

So if you have just received a letter stating that your application for CPP disability benefits has been turned down, take a deep breath and exhale slowly.

Starting the Appeal:

1. Make a note of the date on your denial letter. You have 90 days to notify CPP in writing that you wish to appeal your denial of benefits.
 2. Write a letter stating when you were notified of the denial and that you wish to appeal. You are only notifying CPP of your intention to appeal; it is not necessary to have your case put together at this time. You can tell CPP that additional information will be sent in later. An example of this letter is located in Appendices.
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Requesting Your File:

First call Human Resources Development Canada, Canada Pension Plan at 1-800-277-9914. Ask them to send an “**information source**” **Personal Information Request form**. You can also find this form in the downloads section of this website.

There are two ways to return the form to CPP.

1. **You can return it to your nearest Income Security office, or**
2. **You can send it to your regional Canada Pension Plan office. This address will be located on your denial letter.**

The Request Form allows you to get a copy of your complete file. It will take approximately 6 to 8 weeks to receive it.

When your file arrives it will include:

1. **Your application form**
 2. **Your doctor’s medical report**
 3. **Any other information sent to CPP**
 4. **The disability adjudication summary that will provide reasons why CPP denied your claim.**
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Reviewing Your File

Applications for benefits are often refused because the applicant has left out important information.

It is a good idea to go over your documents to check them for completeness and relevance. If there are important details that have been omitted, or if there are facts that are incorrect, make a note so you can address them in your appeal.

In particular, review Questions 18 to 22 on the Questionnaire you filled out. These questions deal with your disability and your ability to work.

Some Points to Consider:

- 1.** Have you described in detail how your disability prevented you from performing the duties of your last job? If this has not been done, then be sure to include this information in your appeal. Provide information if your employer has made any modifications so you can continue with your job despite your disability, for example, did you use special tools or equipment to aid you with your job? Did you have to reduce your hours due to illness?
- 2.** Read the Medical Report that was completed by your doctor. Is it accurate? Does your doctor appear to be supportive? How has your disability been summarized? What has been said about your prognosis? Has anything been said about your ability to work?
- 3.** Check to see what other medical information is included. Is there anything there that you were not aware of? Is the medical information consistent or contradictory? Has your doctor said that you are employable?
- 4.** What has CPP said on their disability summary sheet? Have they overlooked anything important or are there any errors?

TIP: Many people are denied benefits because they do not provide enough information about their disability. It is your onus and responsibility to provide all the information to support your appeal.

By answering the above questions, you have started to focus on the relevant issues. These notes can provide useful references as you work through the appeal process.

Putting Your Case Together

Now that you have reviewed all the information that CPP has on file, your need to ask the question, "Why was my application turned down?"

The first clue will be in your letter of denial. Often the letter will include a sentence such as, "The information on file shows that you should be able to do some form of work, suitable to your conditions and limitations, on a regular basis in the near future."

Most applications are turned down because CPP has taken this position - that the applicant is capable of some kind of work.

In order for you to successfully appeal your case, you do not have to prove that you will never be able to work again. The definition of disability requires only that your disability prevents you from regularly pursuing work that is substantially gainful. If for example, when you were employed your disability caused you to often be late or erratic in your work habits, this could make you an inconsistent employee and prevent you from maintaining your job. If this is the case, then you are not capable of working regularly. Predictability is the essence of regularity.

Another common reason for the denial of an application is information that implies your condition will improve. Improvement is only relevant if it is likely that you will return to a state where you have the ability to work on a regular basis. Many times you may be denied because the doctor has stated your condition is “stable” - take this in context. Although stable may mean you are not deteriorating, you still may not have residual capacity in which to attend a place of employment on a regular basis. Another catchword that is used to deny is due to the lack of “objective medical information” – how does one establish objectively mental health issues or chronic pain that are typically diagnosed based on a clinical observations?

Important Things to Consider:

1. Does your disability prevent you from working regularly? Consider not only your previous job, but also any job.
2. It is unlikely that your disability will significantly improve in the foreseeable future?
3. Is your doctor aware of the full extent of your disability? Has he/she acknowledged the limitations that your disability creates in your daily life and your ability to obtain and maintain employment? This can be particularly important if you have more than one condition.

If the answers to all the above questions are “yes” then your appeal may be relatively straightforward. If the answer to question #3 is “no” then you need to talk to your doctor because, without supporting medical documentation, it will be extremely difficult to win your appeal.

TIP: Many people are denied benefits because they do not clearly describe how their disability prevents them from pursuing regular employment.

Getting Medical Letters

For better or worse, doctors’ letters carry a lot of weight in appeals. If you have more than one doctor, whom do you ask for a support letter? Here are some considerations:

The General Practitioner

The advantage of information from a G.P. is that he/she is probably the doctor that knows you the best. Also, if you have more than one disabling condition, the G.P. may have the best overview of how all your disabilities affect your daily living and your ability to work.

The Specialist

The advantage of getting information from a specialist (e.g. psychiatrist, neurologist, surgeon) is that he/she usually has more in-depth knowledge of your condition. Also, the opinion of a specialist may be given more weight by CPP than the opinion of a general practitioner.

However, the specialist will usually only provide information on the condition that he/she is treating you for - they may not understand how your disabilities interact. Also, specialists generally don't know patients very well - they may see a patient only once or twice.

You should request letters from all the doctors you are seeing who are willing to support your appeal. Here are some tips for dealing with your doctor.

1. Make an appointment specifically to talk about your CPP appeal and why it was denied.
2. Ask the doctor whether he/she feels that your disability creates a severe barrier to employment, not only now, but in the future.
3. Clarify the expected duration of your disability.
4. Show your doctor the covering letter and one of the sample letters in the appendices of this kit.
5. Ask your doctor to write a support letter to specifically address the limitations that your impairment creates, especially within the context of employment.
6. Ensure that your doctor's letter comments on the barriers you face to all employment opportunities, not only in your previous occupation.

If the doctor you are speaking with tells you that he/she believes that your disability will significantly improve in the foreseeable future, or that he/she believes that you will be able to return to work, then requesting a support letter may not be wise. If none of your doctors are willing to support your appeal, then you may need to reassess the situation and/or you may wish to get the advice of an advocate.

Other Supporting Documentation

Are there health professionals, other than your doctors, who would be willing to provide support letters? They can provide relevant information that details the impact your disability has on your daily life.

Family and friends can also be asked to provide letters, although this kind of information is often considered of secondary importance by CPP.

You may also wish to obtain a printout of medication prescribed to you by your local pharmacist.

Once you have gathered the letters from your doctor and other support people, it is a good idea to provide your own covering letter. In your letter you may state:

1. Your own personal experience of your disability, including the symptoms you have.
2. A profile of a typical day and examples of the limitations you face on a daily basis. This can be a powerful and effective way to describe your disability.
3. Examples of how your disability has affected your ability to work are very useful.

TIP: A report or letter may provide important information, but if it includes even one line that indicates that you are employable, the letter may be detrimental to your case.

Completing Your Appeal

The information in your appeal should focus on the facts of your disability and demonstrate that you fulfill the criteria of disability as defined by the Canada Pension Plan.

For the Best Chance of Success:

You should have:

1. Sent a letter to CPP within 90 days of the denial letter stating that you wish to appeal the decision.
2. Requested and reviewed your CPP file.
3. Obtained doctor's letters that clearly state that you have a prolonged condition and that the severity is such that it prevents you from working regularly.
4. Included other support letters, where possible, that help describe the full extent of your disability.
5. Written your own letter, that explains in your own words how your condition affects you on a daily basis and limits your ability to work.

TIP: Be sure to include your Social Insurance Number with each piece of information you send in to the Canada Pension Plan.

Conclusion:

Once the appeal is sent in, you will have to wait several months for a response. You can send in additional information during that time, especially if there is any change in your condition.

CPP may also ask you to see a doctor of their choosing or ask for updates. It is important to comply with these requests; if you ignore them, you will jeopardize your appeal.

Canada Pension Plan will send you a letter that tells you whether your appeal has been accepted or denied.

If Your Appeal is Accepted

Congratulations - you can expect to receive a retroactive payment that is back-dated to the time that your disability was recognized by CPP. Usually this is a cheque for several thousand dollars.

If Your Appeal is Denied

It is not unusual for appeals to be turned down at the first stage. There may be a number of reasons why this has happened. Sometimes the reason is clearly stated in the letter you have received from CPP. Often the grounds for denial are not immediately obvious. As it states in the letter of denial, you may request a Review Tribunal. This request must be submitted within 90 days of receiving your rejection letter.

As this kit focuses on Stage 1 of the appeal, we recommend that you seek the advice of an advocate or lawyer to find the best way to proceed.

**Perseverance will often get results.
Good luck and remember, never give up!**

Appendices:

A: Requesting a Reconsideration

This letter must be sent to Canada Pension Plan within the 90 day appeal period.

B: Covering letter to your doctor(s)

You can take this letter to your doctor, along with one of the other sample letters. It describes how the doctor can help you with your appeal.

C: Requesting a Medical Report

Sample letter 1.
Sample letter 2.

D: Important Contact Numbers.

APPENDIX A: Reconsideration Letter

Today's Date

Appeals and Reconsideration Division
Canada Pension Plan
Your Regional Office – address located on denial letter.

Dear Sir/Madam:

Re: Denial of Canada Pension Plan disability benefits

Your Name

Your Social Insurance Number.

Further to your letter of DATE, I wish to advise that I will be appealing the denial of my disability benefits. I believe I qualify for Canada Pension Plan disability under the legislative criteria.

Please hold my reconsideration in abeyance until I have been able to provide your office with further medical and supporting information. I will forward this information to your office as soon as it becomes available.

Enclosed is a duly executed authorization enabling you to provide me with a complete copy of my Canada Pension Plan file. If you require any further information, I can be reached at _____.

Yours truly,

(Name)

APPENDIX B: Covering Letter to Doctor

Dear Doctor _____:

The following is a sample letter that was developed to assist doctors in writing medical letters for their patients who are preparing appeals for Canada Pension Plan disability benefits.

The onus is on the applicant to prove disability to Canada Pension Plan. CPP does not pay for medical letter unless they request them so you may wish to discuss this matter with your patient.

For each patient, the facts of the disability and his/her circumstances and limitations will differ. However, a clear, concise letter from the appellant's doctor is a necessity if there is to be a successful outcome to the appeal.

We recommend that you structure your letter so that it covers the following three important areas:

1. The facts of the patient's disability.

The first step is to list the diagnosis(es) and describe your patient's symptoms and the history of the disabling condition. Comments about how the disability affects your patient's ability to function can also be included in this section.

2. Why the disability is prolonged

The prognosis and treatment options should be described in this section. An individual must have a long term disability that is not expected to significantly improve in order to qualify for disability benefits. If improvement is indicated, it is only significant if your patient is likely to be able to return to regular work in the foreseeable future.

3. Why the disability is severe and prevents the patient from working.

CPP considers someone severely disabled if their condition prevents them from working regularly. Therefore, it is necessary to comment on how your patient's disability impairs his/her ability to obtain and maintain employment. Together, the severity and prolonged nature of the disability will negatively impact on the patient's ability to pursue any kind of employment regularly.

With your appeal letter outlining these issues, your patient will have a much greater change of having Canada Pension Plan's decision reversed and disability benefits granted.

Your cooperation in this matter is greatly appreciated.

Yours truly,

(Name)

APPENDIX C: Sample Letter 1

CPP Applications and Appeals Division
Income Security Programs
P.O. Box 818, Station Main
WINNIPEG, Manitoba
R3C 2N4

Dear Sir/Madam:

Re: Name of Patient

Social Insurance Number.

1. Facts of patient's disability.

Mr. Smith has rheumatoid arthritis. He was diagnosed as having this disease in May 2002, although in retrospect the symptoms started to appear and effect his

capacity to work for several years previously. Many joints are involved including wrists, small joints of the hands, ankles, shoulders, knees and small joints of the feet. The joints that are most problematic are the feet, ankles and fingers. The arthritis has made it difficult for Mr. Smith to use his hands.

The fact that most of his joints are involved also contributes to the severity of the disability in that he is unable to perform many activities of daily living, such as grooming and dressing. He is unable to stand for prolonged periods of time, walk for more than a block or two at a time, and has great difficulty walking up hills and stairs. The arthritis also causes fatigue, morning stiffness and painful joints which all contribute to his disability.

2. Reason the disability is prolonged.

Rheumatoid arthritis is a chronic disease. Because we do not know the cause, we do not know the cure. Some patients will spontaneously go into remission. However, this is by far a small minority of patients. Some patients will respond to treatment with anti-inflammatory drugs and some to the slow acting remittive agents. However, the process is a prolonged one and it takes several months to know if the patient will even respond to the latter type of drugs. In this particular case, it is very unlikely that Mr. Smith will show any improvement over time.

3. Why the disability is severe and prevents the patient from working.

Because of Mr. Smith's arthritis, he is definitely unable to pursue his former occupation of electrical contractor. The involvement of the small joints of the hands and wrists result in an inability to do fine work. It also results in decreased grip strength and Mr. Smith has noticed an increased propensity to drop things. Both of these types of disability would make it impossible for him to do any electrical work.

Mr. Smith is over 55 years of age and has a grade ten education. Any opportunity to retrain would be severely impacted by the limitations I have discussed in this letter. He also has chronic pain which requires the use of medication leaving his concentration impaired. He may only be able to attend a place of employment for a very short period of time and not without pain and discomfort. He would be unable to perform any kind of work because he is unable to stand for any prolonged periods of time or walk for any distance. Stairs are also a major problem.

Therefore I feel that Mr. Smith is indeed a suitable candidate for permanent disability as outlined by the Canada Pension Plan. I therefore support his appeal of the rejection of the initial application for disability benefits.

Yours truly,

Doctor's Name.

APPENDIX C: Sample Letter 2

CPP Applications and Appeals Division
Income Security Programs
P.O. Box 818, Station Main
WINNIPEG, Manitoba
R3C 2N4

Dear Sir/Madam:

Re: Patient's name

Social Insurance Number

1. Nature of Disabling Condition?

Ms. Frances has a psychiatric diagnosis of chronic Bipolar Disorder. She was first diagnosed in Alberta in 1985, but has been receiving treatment, services and medication from the Regina Mental Health Services since November 1986 when Mary first moved to Saskatchewan. I have been Mary's psychiatrist since December 1990.

2. Why the disability is severe and prolonged.

There is no cure for Ms. Frances condition but with the proper use of medication and supportive services, she may be psychiatrically stable for periods of time. When Ms. Frances' symptoms are in remission, I see her on a monthly basis.

Ms. Frances is prescribed three medications: Risperidone 3 mg bid, Kemadrine 5mg bid, and Chloral Hydrate 1gm. Mary was on injection medication, Pirpotil, but due to severe side effects, Risperidone is now being used. She will require neuroleptic medication indefinitely to maintain her psychiatric stability. In addition, Mary also sees Ruth Black, RN for other non-medication services, including counseling for personal and inter-personal issues.

Although Mary is psychiatrically stable at this time, she experiences regular exacerbations of her illness and she has been hospitalized for short periods over the past ten years. During these periods, she can experience a variety of symptoms including paranoia, delusions, poor concentration, anxiety, insomnia and depression. At these times, she is seen on a weekly or bi-weekly basis.

In summary, Ms. Frances has a chronic mental illness, and the prognosis for any improvement in her level of functioning is poor. I am not aware of any other treatment modality available today that is likely to change the clinical picture for this patient.

3. Why the disability is severe and prevents the patient from working.

I am aware of Ms. Frances' desire to work and she has been able to obtain some employment over the years. Unfortunately, she is unable to keep any of these jobs because the symptoms associated with schizophrenia severely limit her ability to cope with job tasks, and to relate to her co-workers and supervisors in an acceptable manner.

In regard to retraining or the possibility of performing light work, I feel that Ms. Frances' limitations are not the outcome of a lack of education or training, but directly the result of her psychiatric condition.

In my opinion, Mary Frances is not capable of working regularly. Although she has found work on at least two occasions over the past few years, she has not been able to maintain this employment.

Her last employer made adjustments to her job description in order for her to keep working as long as possible, but Mary's health caused her to leave the job.

I support Ms. Frances' appeal to receive CPP disability benefits based on the severity of her illness and the fact that she is probably functioning at the optimum level given the treatment options available. It is evident that her psychiatric disability prevents her from pursuing any substantially gainful occupation.

Yours truly,

Doctor's Name.

APPENDIX D: Important Phone Numbers

Canada Pension Plan

1-800-277-9914 English
1-800-277-9915 French

Disability Claims Advocacy Clinic Inc.

4047 Windsor Park Bay East
REGINA, Saskatchewan
S4V 3B1
Phone: (306) 352-6221
Fax: (306) 352-6250
[Email: dcac@sasktel.net](mailto:dcac@sasktel.net)

Saskatchewan Voice Of People with Disabilities

984 Albert Street
REGINA, Saskatchewan
S4R 8P8
Phone: (306) 569-3111
Fax: (306) 569-1889
[Email: voice@sasktel.net](mailto:voice@sasktel.net)