

POLICIES: GRIEVANCE PROCESS INVOLVING THE APPLICATION OF A BENEFIT PLAN

Policy Section: 2 Employment
Policy Number and Title: 1.0.2c Grievance Process Involving the Application or Interpretation of a University Benefit Plan
Applicable to: Administrative and Support Staff
Effective Date: November 1996

Introduction

Any benefits eligible faculty and staff hired through the Office of the Dean of the Faculty or the Office of Human Resources, whose claim for benefits under a University benefit plan has been totally or partially denied by the insurance carrier/administrator, may request a review by the insurance carrier/administrator of the claim(s) that were denied. To do so, the faculty or staff member should follow the steps outlined in the insurance carrier/administrator's written explanation of how to request a review of the denied claim(s).

Effective Date

The Grievance Process Involving the Application or Interpretation of a University Benefit Plan policy is effective November 2006.

Application of This Process

If the faculty or staff member believes that he or she has been adversely affected by a misinterpretation or misapplication of a University benefit plan, he or she may request a review of the denied claim(s) by the Office of Human Resources. All requests for a review of claims that have been denied by the insurance carrier/administrator should be submitted to the director of benefits, Office of Human Resources, 1 New South within 30 business days from the final decision of the insurance carrier/administrator. The director of benefits will review the benefit plan and the specific claim and will advise the faculty or staff member of the decision, usually within 15 business days following receipt of the employee's request.

If the decision reached by the director of benefits regarding the claim under question is unsatisfactory to the employee, the employee may request that the University's Benefits Committee review the matter in dispute. 1 A written request for formal review by the Committee should be submitted to the University Benefits Committee, Office of Human Resources within 15 business days from receipt of findings from the director of benefits. After receipt of the employee's request for review, the Committee will consider the issues raised and will provide a written response to the employee, within 30 business days after completion of the review. The decision of the Benefits Committee is final.