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PSSPF NEWSFLASH

Understanding Your Permanent Disability Benefit

We have answered some of the most common questions to help you understand who qualifies, how to apply and what to expect during the claims process.

Q1: What does "Permanent Disability" Mean?

Many members believe: Sick = Disabled. This is incorrect.

Permanent disability is different from temporary illness or injury. It means that, based on medical evidence, you are unlikely to recover sufficiently to return to your own occupation or another suitable occupation for which you are reasonably qualified through education, training or experience.

Q2: What is the Permanent Disability Benefit?

The Permanent Disability Benefit provides financial protection to eligible PSSPF members who become totally and permanently disabled and are no longer able to work due to illness or injury.

Every disability claim is assessed individually in accordance with the Fund Rules, the insurance policy (where applicable), and the medical evidence submitted. Meeting the application requirements does not automatically guarantee approval of a disability benefit.

Q3: Who qualifies for this benefit?

You may qualify if:

- You are an active contributing PSSPF member.
- Your employer's contributions to the Fund are up to date.
- You have become totally and permanently disabled as defined in the Fund Rules.
- Your employer notifies the Fund of your disability within the prescribed timeframes.
- Your claim is supported by satisfactory medical evidence.

Q4: What is the value and purpose of the benefit?

The purpose of the Permanent Disability Benefit is to provide financial support when a member can no longer earn an income because of permanent disability.

If your application is approved, you may receive:

- Your accumulated Fund Credit; plus
- A Capital Disability Benefit of up to 3.25 times your annual Fund Salary, subject to the Fund Rules and applicable maximum benefit limits.

Example:

For example, if a member's monthly salary is R5 000.00
(R5 000 X 12 months)

Their annual salary becomes R60 000.00.

R60 000 x 3.25 = R195 000.00
The above amount will be combined with the total retirement savings received. Let's say on the date of the claim submission, the member's retirement savings were R165 000.00.

PSSPF will pay the member R195 000 + R165 000, totaling to R360 000.00

Please note that the disability benefit reduces for members who become disabled within the ten years preceding normal retirement age (65 years).

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Q5: Will I pay tax?

Disability benefits may have tax implications in terms of South African tax legislation. The Fund will apply the relevant tax directives issued by SARS before payment.

Q6: How do I apply?

Applying for a Permanent Disability Benefit is a collaborative process between you and your employer.

Step 1:

Obtain the Disability Benefit Application Form from your employer. This is a comprehensive 12-page application form that must be completed in full.

Step 2:

Complete the required claim forms and ensure they are fully completed, signed and stamped by both you and your employer.

Step 3:

Gather all the required supporting documents, including:

- A certified copy of your South African ID or valid identification document.
- Proof of your bank account or a bank statement (not older than three months) bearing the bank's stamp.
- Your tax number or tax certificate.
- Comprehensive medical reports supporting your disability application.
- A sick leave report.

Step 4:

Submit the completed application and supporting documents to your employer. Alternatively, where applicable, the completed forms may be submitted directly by the member.

Step 5:

Once all documents have been verified, your employer must submit the complete application package to psspf.disabilityclaims@salteb.co.za for processing.

Remember: Incomplete forms, missing signatures, missing employer stamps or outstanding supporting documents may delay the assessment of your disability claim. Before submitting your application, ensure that every section of the forms has been completed accurately and that all required documents are included.

Q7: What supporting documents are required?

Your claim should include:

- Completed Disability Claim Form.
- Medical reports and supporting medical evidence.
- Any additional documentation requested by the Trustees or Administrator.
- Any further medical assessments requested by the Trustees, if applicable.

Additional documents may be requested depending on the circumstances of your claim.

Q8: How long does the process take?

The turnaround time depends on:

- Receipt of a fully completed claim.
- Submission of all required supporting documents.
- Medical assessments and specialist reports where required.
- Approval by the Trustees where applicable.

Once all required documentation has been received, the Fund aims to complete the assessment within approximately 90 days, depending on the complexity of the claim and whether additional medical information is required.

Q9: What are the most common reasons for delays for claim rejections?

- Required documents are missing.
- Medical reports are incomplete.
- Additional medical information is required.
- The employer delays submitting the claim.

Claims may be declined where:

- The disability definition is not met.
- Medical evidence is insufficient.
- Policy exclusions apply (e.g. a disability resulting from a pre-existing condition).
- Required information is not provided.
- The claim falls outside prescribed notification periods.
- Membership or contribution requirements are not met.

Q10: Can I appeal my claim?

If you disagree with the outcome of your claim, you may request that the Fund reviews the decision by submitting additional medical evidence.

Q11: Is my medical condition treated with confidentiality?

Your personal and medical information will be processed confidentially and only for purposes of assessing your disability claim, in accordance with the Protection of Personal Information Act (POPIA).

Q12: Where can I get assistance?

If you need help with your disability claim, you can contact our Administrator Salt Employee Benefits:

Call Centre:
086 11 77 775

Email:
psspf.disabilityclaims@salteb.co.za

You can also speak to your employer's HR department for assistance with completing and submitting your claim.

Additional Frequently Asked Questions

Can I apply directly to PSSPF?

Your employer plays an important role in the submission process and should be notified as soon as possible after your disability.

Will I be asked to undergo additional medical examinations?

Yes. The Trustees may request additional medical assessments by a medical practitioner appointed by the Fund if further evidence is required.

Can I claim after retirement?

No. A Permanent Disability Benefit is not payable after reaching the Fund's normal retirement age of 65 years.

What can I do to help avoid delays?

- Notify your employer as soon as possible.
- Complete all forms accurately.
- Submit all required supporting documents.
- Ensure your medical reports are comprehensive and up to date.
- Respond promptly if additional information is requested.

PSSPF is committed to supporting members during difficult times. If you believe you may qualify for a Permanent Disability Benefit, contact your employer or the PSSPF Call Centre for guidance as early as possible.