



## **Written Submission for the Pre-Budget Consultations in Advance of the 2021 Federal Budget**

**By: Multiple Sclerosis Society of Canada**

## Recommendations

### **Recommendation 1 – Expand Benefit Period**

That the government expand the EI Sickness Benefit period from 15 to at least 26 weeks while taking steps to ensure that private coverage is neither reduced nor cancelled as a result.

### **Recommendation 2 – Equity and EI Sickness Benefit**

That the government use an equity lens to conduct a thorough review of how episodic disabilities interact with Employment & Social Development Canada (ESDC) programs

### **Recommendation 3 – Enhance Coordination**

That the government enhance coordination between public benefits programs and between public and private insurers by adopting a claimant-centred client approach.

## Introduction

Multiple sclerosis (MS) impacts all Canadians not just the people who live with MS – their family, their friends, their community and country are all touched by this disease. The unpredictable, episodic, yet progressive nature of MS makes it particularly challenging to maintain an adequate quality of life. MS is a disability which has both visible and invisible symptoms, and barriers in government support programs add immense financial and practical challenges for Canadian families who struggle with the realities of living with MS.

Today's trying times resemble what it's like to live with MS – every single day. Every day, people with MS wake up to adversity and do everything in their power to persevere...

- The woman with progressive MS who struggles to button her shirt in the morning yet is determined to dance at her granddaughter's wedding.
- The high school athlete who ignores the tingling and numbness in his legs to rally his team to victory.
- The lawyer with blurred vision and foggy thoughts. The father struggling to say his child's name. The avid cyclist feeling her balance go.

Canada has one of the highest rates of MS in the world, Canadians know that MS can be harsh. Unfair. Overwhelming. A disease that always takes away, never gives back, and always threatens to take again. The COVID-19 pandemic is exacerbating the challenges for this vulnerable population due to the immune suppressant drugs typically used to manage their MS, the increased social isolation which puts them at greater risk for mental health issues, as well as longer term health impacts. Nevertheless, our community continues to do what we do best – remaining strong, resilient and solution-focused. We are adapting to these challenges in real time and innovating solutions to deliver upon our mission.

It's time for the federal government to join our collective effort towards our mission of connecting and empowering the MS community to create positive change that helps realize our vision of a world free of MS. We are committed to ensuring Canadians living with MS, and their families, can participate fully in all aspects of life. This pre-budget submission is focused on a gap COVID-19 has highlighted – a gap that has been there all along but can no longer be ignored - the inadequacy of Employment Insurance Sickness Benefits as highlighted in this [2019 Multi-Stakeholder Policy Roundtable Report on Employment Insurance \(EI\) Sickness Benefits](#).

***Canada has one of the highest rates of MS in the world!***

MS is a chronic, often disabling, disease of the central nervous system. Since that includes the brain, spinal cord and optic nerve, MS can affect vision, memory, balance and mobility.

Over 77,000 Canadians live with MS. Approximately 1 in every 385 Canadians live with MS. Women are three times more likely to be diagnosed with MS than men.

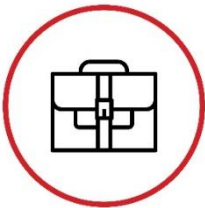
MS is the most common neurological disease affecting young adults in Canada. 60% of adults diagnosed with MS are between the ages of 20 and 49 years old. On average, 11 Canadians are diagnosed with MS every day.

## Expand Benefit Period

People with MS want to work, but it is challenging to do so. The episodic nature of their disease means that regardless of their desire, their symptoms during a relapse sometimes render them incapable of working periodically. Current science doesn't allow us to predict when these relapses will occur nor how long they will last. As a result, some people living with MS rely on the EI Sickness Benefit program to ensure that they are able to remain active participants in the labour market even as their disease progresses. Unfortunately, when the EI Sickness Benefit period falls short of the recovery time needed for their relapse, the fact that they can recover means that they won't qualify for Long-Term Disability. With more than 60% of people living with MS eventually reaching unemployment it's clear that more flexibility is needed.

For the 13 million Canadians identified as not having short-term disability insurance in a 2015 report from the Institute for Research on Public Policy, *Leaving Some Behind: What Happens When Workers Get Sick*, this means that at the end of 15 weeks, they can either be recovered, or receive nothing. The [2019 EI Roundtable Report](#) noted that three of the four major parties recognized in their 2018 platforms that it's time to extend the benefit from 15 to at least 26 weeks.

### Key Actions for the federal government:



- Expand Employment Insurance (EI) Sickness Benefits from 15 weeks to at least 26 weeks
- Take steps to ensure that an increase from 15 to 26 weeks does not result in a decrease of real coverage from 30 to 26 weeks as a result of private insurers removing or reducing their own benefits

The [2019 HUMA Committee Report on Episodic Disabilities](#) stated explicitly that Employment and Social Development Canada (ESDC) should take these important steps to better support people with episodic disabilities. There is ample evidence to support moving ahead with these changes including the following;

- That the economic cost of disability – through foregone productivity or replacement labour cost – is upward of \$13 billion annually;
- Anxiety over the expiry of benefits often inhibits recovery or adds a mental health complexity to what is otherwise a physical recovery;
- Canada's current EI Sickness Benefit period is woefully inadequate compared with OECD countries and, in fact, would only be 1/3 of what is offered in Germany and Sweden after being increased to 26 weeks; and
- Extending the benefit to 26 weeks would allow for symmetry with the Compassionate Care Benefit which also provides an example of how warnings about the cost of expanding the program, as with the expansion of the CCB, ring hollow.

## Equity and EI Sickness Benefits

With the implementation of the *Accessible Canada Act* in 2019 the Government of Canada committed to a country free of barriers for people living with an episodic disability. Unfortunately for those living with MS, the EI Sickness Benefits program makes no accommodations for people who are generally able to work but affected by intermittent periods of acute symptoms nor for those who range from full ability to work to short periods of inability. Instead, the program works with a binary on/off switch that divorces EI Sickness Benefits from the reality of living with an episodic disability, such as MS, thus creating a barrier to accessing the program. With more than 55% of EI Sickness Benefit recipients in 2017 being women, and women three times more likely to be diagnosed with MS than men, this is an issue that disproportionately impacts women. It's time to change that.

### Key Actions for the federal government:



- Conduct a review of EI Sickness Benefits using an equity lens in order to propose access remedies to the current barriers preventing full use of the program by those living with an episodic disability
- Address further equity concerns by examining how the 600-hour qualification threshold disproportionately impacts women and people living with a disability who are already more likely to be struggling as a result of the COVID-19 pandemic

Meeting the obligations under the *Accessible Canada Act* for a barrier free country requires the Government of Canada to take proactive steps to address systemic barriers to access that exist in federal programs. The binary on/off switch is just one of those barriers inherent in the current EI Sickness Benefits framework that needs to be addressed by a thorough review of the program using an equity lens.

## Enhance Coordination

For many Canadians living with a disability the EI Sickness Benefits program is just one part of a larger benefits framework that allows them to continue living their lives to the fullest. However, the current structure is not nimble enough to accommodate shorter term acuteness of symptoms leaving Canadians without programs to support them when EI Sickness Benefits are exhausted. In combination with the insufficient benefit period for chronic episodic conditions this lack of coordination between public benefit programs as well as between public and private insurers results in serious gaps in coverage that significantly impact people living with MS. It's time to change that.

### Key Actions for the federal government:



- Create a single window approach to sickness and disability benefits that delivers an accessible, flexible and portable income and employment supports framework using a client centred case management approach
- Enhance coordination between government, insurers and businesses to find mutually beneficial solutions to the following issues
  - Decrease in uptake of the Premium Reduction Program (PRP) specifically among small and medium sized businesses
  - Lack of awareness of the PRP and EI Sickness Benefits generally among the self-employed
  - Complexity of PRP administration to the point that it discourages employers from using the program at all

The HUMA Report on Episodic Disabilities specifically called for an improvement to coordination of benefits and the use of a single window approach. Insurers and business groups are calling on government to play a lead role in coordination and development of short and long-term goals for an integrated EI sickness benefit and long-term disability framework. We add our voice to these calls to support people living with MS who have fallen through the cracks created by the federal government's current benefits framework.

Further **evidence** for the necessity and benefits of improving the EI Sickness Benefits program is found in the following:

- [Multi-Stakeholder Policy Roundtable Report on Employment Insurance \(EI\) Sickness Benefit Policy](#) (2019)
- Report of the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA) (2019) [Taking Action: Improving the Lives of Canadians with Episodic Disabilities](#)
- Disabled Women's Network of Canada (DAWN Canada) (2019) - [More Than A Footnote: A Research Report on Women and Girls with Disabilities in Canada.](#)
- Conference Board of Canada (2018) report: [MS in the Workplace: Making the Case for Enhancing Employment and Income Supports](#)
- Public Policy Forum (2017) report: [Condition Chronic](#)
- Conference Board of Canada (2016) report: [Multiple Sclerosis in the Workplace: Supporting Successful Employment Experiences](#)
- Institute for Research on Public Policy (2015) report: [Leaving Some Behind: What Happens When Workers Get Sick.](#)

## Conclusion

Canada's EI Sickness Benefit has remained virtually unchanged since the 1970s. Over the last several months Canadians have seen, through the very worst of circumstances, what people who live with MS have known for years; EI Sickness Benefits in Canada are not an ideal solution for far too many Canadians. It's time to change that.

In the last federal election, the Liberal Party of Canada promised to "move forward with extending Employment Insurance sickness benefits from 15 to 26 weeks." The MS Society of Canada, on behalf of the nearly 80,000 Canadians who live with MS and the tens of thousands more who are part of the MS community, respectfully call on the federal government to Act Now for MS and extend the length of the benefit while also taking action to address the additional concerns we raise in this submission.

We thank you for your time and consideration of these requests.

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