



Disability Insurance

for People with MS



Multiple Sclerosis Society of Canada

BC & Yukon Division

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Introduction

This booklet helps people with MS in three ways:

- Provides information on different types of disability insurance
- Assists you with applying for disability benefits from your insurance provider
- Assists you with appealing a denial of disability benefits

Additional Information

For more information on Disability Insurance, please visit the Canadian Life and Health Insurance Association website at www.clhia.ca.

This booklet is one in a series of five that have been developed by the Volunteer Legal Advocacy Program (VLAP). Other booklets available:

- Advocacy
- MS and Human Rights
- Community and Legal Resources
- Canada Pension Plan Disability Benefits

Booklets are available at www.mssociety.ca/bc/vlap.htm or from the Multiple Sclerosis Society of Canada, BC & Yukon Division office.

VLAP provides a range of legal and advocacy support to people living with MS throughout British Columbia and the

Yukon by utilizing volunteers who have legal expertise and/or advocacy experience.

Pro bono legal representation is available in specific legal areas of expertise in several communities throughout the BC & Yukon Division. Please contact the BC & Yukon Division office for details.

CHAPTER 1

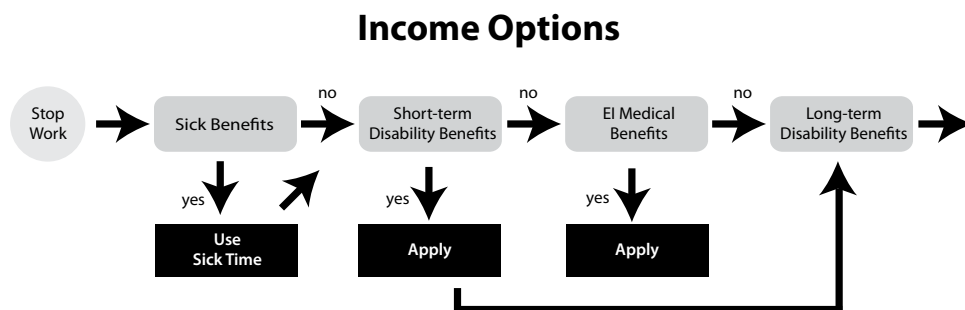
Types of Disability Insurance

Income support after leaving work as a result of illness or disability can take several different forms. Which process applies to you will depend on several factors, including:

- Your level of disability and the course of your MS, which will determine the period of time you will be absent from the workforce
- The benefit package that your employer offers, such as short-term and long-term disability benefits

Income can come from different sources or a sequential combination of sources:

- Sick time accumulated through your employer
- Employment Insurance (EI) sickness benefits: A federal program that provides up to 15 weeks of sickness benefits
- Private insurance company short-term disability benefits: typically, these run for 15, 26, or 52 weeks
- Private insurance company long-term disability benefits: Depending on the plan, up to 2 years or longer



Long-term disability benefits usually start after sick time and EI sickness benefits or short-term disability benefits have been exhausted. Depending on your employment benefits, you will either qualify for short-term disability benefits, followed by long-term disability benefits or first use EI sickness benefits, followed by long-term disability benefits.

When leaving the workforce either short-term or long-term, one of the first steps should be to review your policy booklet to learn about the specific benefits that might be available to you through your employer.

Group Disability Policy

The majority of working people who have any kind of disability insurance have group coverage. The details and costs (premium rates) of the group plan are negotiated between the employer and the insurance company. Factors considered in the cost and details of the benefit plan include:

- The size of the entire group that is being underwritten
- The type of work done by the employees in terms of risk of injury and illness
- The financial position of the business with respect to their ability to cover the costs associated with the plan



Example: A business that employs thousands of employees in low-risk occupations may be able to negotiate lower premiums or a higher level of coverage than one with fewer employees in high-risk occupations.

The group plan applies to all employees. Individual employees do not have the option to negotiate different conditions from the group plan. On the other hand, individual employees usually are not denied coverage or asked to pay higher premiums than other employees because of a pre-existing medical condition. Employees usually do not have to undergo individual medical assessments to qualify for the group plan. However, at the time of a claim, your case will be assessed in detail. This may result in denial on the basis of a pre-existing condition prior to you joining the plan. This scenario is more likely with small employers than large employers due to the size of the contract.

Some plans stipulate that you must be signed up for the group plan within a specific time period after starting employment with a new employer such as at the end of the probation period. If the necessary paperwork is not submitted on time, it may result in a request for a medical assessment prior to being accepted into the plan.

At the beginning of any new employment, request details of your benefit package and become aware of any timelines required for enrollment. Notify your employer or supervisor of important deadlines.

The plan is usually reviewed yearly by the employer and the insurance company, which may result in changes to premiums or insurance coverage based on the business' use of the plan, injury or illness rates, economic concerns, and any other relevant factors.

Each plan will be different in terms of the coverage provided (short-term, long-term, or both), waiting periods, benefit periods, and the cost of the plan. Common options are:

- Only short-term disability benefits (STD)
- Only long-term disability benefits (LTD) that start after a specified number of days or months of being unable to work
- Short-term and long-term disability benefits which work in tandem
- Long-term benefits can range from a specified number of months to long-term coverage – usually to age 65.

Long-term disability policies that provide coverage for several years or up to age 65 usually treat the first 1–2 years differently from the remaining years of coverage:

- Year 1–2: a person has to be unable to work in their **own occupation**.
- Thereafter: a person has to be unable to work in **any occupation**.

Continuing benefits are dependent on a number of factors, including whether or not you remain disabled according to the definition of the insurance provider. Factors often considered are medical factors and the level of your disability as well as the availability of suitable employment associated with your education. Some insurance providers offer retraining as part of their benefits package for people receiving long-term disability benefits.

Most long-term disability (LTD) plans will require that you apply for Canada Pension Plan Disability (CPP-D) benefits as soon as you move from short-term to long-term disability.

Most plans deduct CPP-D from the amount payable by the LTD plan.

Individual Disability Policy

Individual disability policies are usually taken out by self-employed workers or those whose employers do not provide a group plan. The plan details are negotiated between the individual purchasing a policy and the insurance provider.

Examples of plan details:

- Cost of living adjustment
- Partial or proportional disability coverage
- “Own” occupation versus “any” occupation coverage
- Waiting period

Factors considered in the design of the plan and premiums include:

- **Health status and pre-existing medical conditions:**
A medical exam is usually required prior to the policy coming into effect.
- **Occupational classification**

Certain groups of occupations tend to result in more claims than others as a result of the nature of the work. Insurance companies address this type of variation by adjusting the length of the benefit period offered, the amount of benefits offered, and the premium level.



Example: A person working in the logging industry will likely have to pay higher premiums for a shorter period of benefit coverage than a teacher.

CHAPTER 2

Full-Time and Part-Time Work

Benefit payments are usually calculated as a percentage of your average income during the most recent period of work. The time period that is used for the calculation varies from one policy to another.

It is often better to work full-time until you cannot work anymore and then apply for disability benefits. Reducing your work hours to accommodate your disability and applying for insurance afterwards will usually result in lower income from the insurance policy.

Some insurance policies allow for the option of working part-time and receiving part-time benefits to the level of the full-time income. This option is helpful to those who are no longer able to work full-time in their occupation due to disability but can still manage part-time work in the same position. Check your insurance policy carefully to determine if this option is available to you.

When to Apply for Disability Benefits

Work has many other benefits besides financial ones. These include meeting people's social needs, adding pleasure to one's life because of the opportunity to learn new skills, feeling and being productive, and giving a sense of purpose to life. However, it must be your decision to determine how much and for how long you can continue working.

Consider how MS is affecting your ability to work and your functioning in daily life. For some people, continuing to work may exacerbate their MS; for others, this may not be so. Some

people may have debilitating fatigue as a consequence of forcing themselves to work full-time; others may not. You need to do what is best for you in the long-term.

CHAPTER 3

Applying for Disability Benefits



Carefully review your insurance plan and request clarification if you have any questions. Ensure that you fully understand all definitions and conditions outlined in your policy.

Be clear on statements or clauses such as:

- “Pre-existing conditions”
- “The right to refuse” by the insurance provider
- Addressing non-compliance with recommended protocols
- Eligibility criteria such as unable to do “some work,” “your own occupation,” or “any work”

For clarification of questions related to your specific plan, contact your employer’s human resources department or your union if you are covered under a group plan. If you purchased an individual disability policy, contact the insurance agent or broker for further information.

Once you know what your plan states, provide the information and supporting documents that your insurance provider requests. Make sure the documentation you provide is correct, thorough, and consistent, and keep copies for yourself.

The following are some other details to remember about disability benefits provided by your insurance company:

- Most policies require that you be under the constant care of a physician.

- Some policies require that you utilize available treatments.
- Benefits from individual policies are not taxable.
- Some group disability benefits are taxable and others are not. If the premium is paid fully by the employee, the benefit is not taxable. If the benefit is partially or fully paid by the employer, the benefit is taxable. Most plans are designed to be non-taxable.
- Keep a journal detailing your symptoms and activity level while receiving disability benefits.
- Keep copies of everything concerning your disability. This includes all correspondence from doctors, all results of tests, and any other relevant documents.

You should apply for long-term disability benefits as soon as you are unable to work because of your disability. Most insurance companies require both you and your doctor to fill out forms describing your condition. Some policies only request information from your physician.

Plan Member/Claimant's Statement for Disability Benefits

The way you answer the questions on the Statement for Disability Benefits will determine whether or not your application is accepted.

The following paragraphs provide examples and detailed information on how to describe your disability to increase your chances of a successful application. If your plan only requires your physician to complete forms, you will need to work with your physician to ensure that he/she fully

understands the impact of your symptoms on your ability to perform your work duties.

Answer the questions clearly, accurately, and completely.

If you need to add pages to your application, do so. When completing the application, remember the following tips:

- Base the information you give on days when the symptoms and functional limitations of MS are average to severe.
- Provide relevant and focused information on your medical condition(s).
- Provide enough relevant detail and clear examples to show how all your medical conditions, including MS, are preventing you from working and how they are affecting your daily life.
- Make sure your answers throughout the application are consistent
- Make sure your doctors have provided consistent rather than contradictory information.
- Type your answers if possible.

An insurance company may deny an application because the information provided to them is either contradictory or they judge, based on the information provided, that you can still perform your job (or any job, depending on their definition of disability). Therefore, it is crucial for the success of your application that you show clearly and thoroughly what your limitations are and how they prevent you from working.

While filling out the application, focus on painting a picture of how living with a disability impacts your day-

to-day life and prevents you from working. Consider your ability to work within the context of your life in general and the normal demands of your life.

For example: You are a parent and fatigue is one of your key symptoms affecting your ability to work. Ask yourself:

- Am I able to fulfill my normal parenting and household duties in addition to working? Or, am I able to work if I fulfill my normal parenting and household duties?
- Am I neglecting my child for the sake of continuing to work?
- Am I still able to cook nutritious meals for my child in addition to working?
- How much additional childcare and household work is my spouse shouldering now compared to before my diagnosis with MS?
- Would I be able to work a full day in my position if I resumed my pre-illness normal child rearing and household duties?
- Are there any modifications possible at work such as changes in work hours or work demands that would allow me to resume my normal duties at home while I continue to work?
- Am I becoming socially isolated as a result of not being able to socialize with family and friends in addition to working?

This approach to describing the impact of your symptoms on your life and your ability to work will allow the reviewer(s) of your case to assess your application based on concrete

facts. This involves the consideration of your background and medical condition when determining whether you are capable of working regularly. The reviewer will ask whether it is realistic for you to work while pursuing and fulfilling normal roles outside of work.

Commonly Asked Questions

While every insurance company has a different Claimant's Statement, the following questions can be found on most forms. Below each question are suggestions on how to best answer.

Q. From what date did your condition prevent you from working?

This is where you enter the date you stopped working and started using sick time, or started receiving EI sickness benefits, or short-term disability benefits. Some forms may ask for details. If so, describe in detail how MS has affected your employment and resulted in your stopping work.

Q. When do you expect to be able to return to your own job?

In order to qualify for long-term disability benefits, it is assumed you cannot or will not likely return to your work in the near future and possibly never because of the prolonged duration of your disability. Therefore, do not suggest or imply that you will be returning to work in the near future, want to return to work soon, or that your doctor thinks you should or can return to work soon. Reinforce that you are currently not able to work, that multiple sclerosis is a progressive disease, and that your level of disability has been progressing over

time and that you are unable to determine if you will ever be able to return to work at this point in time.

Q. Describe your present condition (illness, injury).

State ALL your illnesses or impairments precisely. This may be MS alone (e.g., multiple sclerosis and the symptoms of MS) or MS and other medical conditions (e.g., multiple sclerosis and the symptoms of MS; arthritis and its specific symptoms). Include information about your symptoms.

Q. Describe your illnesses or impairments precisely and thoroughly and how they prevent you from working.

It is important to clearly describe the impact of your symptoms and the limitations on your ability to work. It is often helpful to develop two lists to help you organize your thoughts:

1. List the symptoms that you experience with a description of how they impact or limit your ability to perform specific work activities or functions.
2. List the common activities such as standing, walking, etc., with a description of how your ability to perform these activities is altered or limited by your symptoms.

For each symptom and activity, provide as much detail as possible about what you cannot do rather than what you can do. Discuss any modifications to your workplace, work routine, or work times that you and your employer have tried in an attempt to continue working.

Q. Describe the impact of your disability (or illness) on non-work activities.

Some forms may also ask you to describe the extent of your disability as it relates to non-work activities. This can show how all of your life activities have been affected in a negative way. Non-work activities include hobbies, social activities, volunteer work, sports, household activities, etc. Describe any limitations that your disability has created in these areas.

It is useful to include this type of information in your description of how your disability prevents you from working if there is no additional question that addresses non-work related concerns.

Q. List all the doctors you have seen for this condition and any doctors you plan to see in the near future about this condition.

This question asks you about every general practitioner (GP) and specialist you have seen and every hospital stay you have had since you have been diagnosed with MS. List every one of these.

Q. What treatments are you presently receiving?

List all medications you are currently on, including those that may not be for MS. Describe other treatments you have had for MS or treatments you are currently receiving. Include all treatments, such as counseling, physiotherapy, acupuncture, massage therapy, etc. If your GP or neurologist is planning on future treatments or medical tests describe what they are and when you expect to start them.

For example, My neurologist is planning to start me on _____ in July or August of this year.

List all medical devices you use or need to use (cane, walker, wheelchair, scooter, grab bars, ceiling lifts, etc.).

For example, I use a cane everyday and my walker when I am having extreme difficulty with my balance and walking. I have grab bars beside my bathtub to assist me with getting in and out safely.

Samples of Symptoms and their Impact on Work and Non-Work Activities

The following information contains examples only. You will have to modify answers based on your own specific circumstances, symptoms, and their impact on your functioning and your ability to work or perform non-work activities.

Symptoms can include:

- **Motor symptoms:** muscle weakness, poor hand coordination, etc.
- **Sensory symptoms:** numbness in your hands, etc.
- **Visual symptoms:** double vision, blurring, etc.
- **Bladder dysfunction:** frequency, loss of control, etc.
- **Bowel problems:** diarrhea, constipation, loss of control, etc.
- **Fatigue:** this symptom often worsens other symptoms or can lead to an inability to think clearly and concentrate.
- **Dizziness**
- **Mood changes:** irritable, impatient, depressed, etc.
- **Cognitive changes:** reduced memory, difficulties

concentrating, difficulties analyzing and solving complex problems, etc.

Functional activities include:

- **Sitting and standing:** How long can you do either before the symptoms worsen?
- **Walking:** How far can you walk? Can you carry anything while walking, etc.?
- **Lifting and/or Carrying:** How much can you lift and/or carry?
- **Reaching:** Can you reach above shoulder level or forward?
- **Bending:** Can you pick items off the floor safely or retrieve items from low cupboards?
- **Driving/transportation:** Has your ability to drive a car or to take public transportation changed?
- **Personal care:** Are you able to wash you hair, dress, and shower without assistance and within a normal amount of time?
- **Household maintenance:** Are you able to shop, cook, clean, launder, etc.?

We provide short examples of how some of these symptoms and functional activities can be described. However, it is important that you give thorough and concrete examples based on your own experience.

Motor Symptoms:

Mild incoordination of my hands significantly reduces my typing speed. I now need twice as long to complete a letter and therefore I am no longer very productive at work.

Muscle weakness in my legs makes it difficult for me to stand for more than 30 minutes at a time. My work requires that I am standing at the customer counter most of the day. I have tried using a chair but this did not work well because there is little space and I have to get up frequently to use the photocopier. Getting up frequently to walk is very tiring for me.

Bladder Dysfunction: (frequency; retention; hesitation; urgency; loss of control)

I sometimes lose control over my bladder and I have had to leave customers standing at the counter to get to the washroom quickly in order to prevent a bladder accident.

Fatigue:

Fatigue is one of the most limiting symptoms that I experience. I am unable to complete any household tasks when I am working and have to rely on my husband to shop and prepare meals. I would not be able to work for eight hours if I also had to look after the household on my own.

My fatigue worsens significantly after working for approximately three hours. I begin losing my concentration and I notice that I make mistakes more frequently. I also become more irritable and there have been incidents when I became short and angry with customers. My boss has complained about this.

Cognitive Problems: memory, concentration, problem solving, etc.

I have significantly more difficulties concentrating. I find it difficult to follow discussions in meetings when several

people are speaking quickly in succession. I have missed important information as a result of this and made mistakes.

I have difficulties remembering what I was doing or where I was in a task when I get interrupted. It is much more difficult for me to shift quickly from one task to another such as when I have to answer the phone in the middle of working on a document.

My short-term memory is not very good anymore. I find that I have to re-read information frequently and have to immediately write down any information I am told by my supervisor. I have forgotten to do important tasks because I forgot to write down the information.

Sitting/Standing:

On a good day I can sit for 2-3 hours before I feel pain providing I am sitting in a chair with armrests and good padding. On a bad day I can sit for 1 hour. I tend to have 2 bad days per week, 3 good days, and 2 average days. I find it difficult to cross my legs while sitting as I tend to lose balance.

On a good day I can stand for 20 minutes without support. On a bad day I can only stand momentarily without support. On average I have 2 good days per week, 3 bad, and 3 average. I can stand for longer if I have a walker or cane, but I still find it difficult.

Walking:

I can walk 3 blocks on a good day and 1 block on a bad day with 3 minute rests along the way. With a walker I can walk 6 blocks on a good day and 2 blocks on a bad day. I am able to

do this daily but find that walking down hills and using stairs is difficult even on a good day.

I find it difficult to carry anything while I am walking. I tend to lose my balance more easily and stumble more often when I carry even light items such as files.

Leisure:

I used to play tennis 3 times per week, however, the effects of heat and fatigue have made it difficult to play since June 2003. I no longer watch TV, as I find it difficult to concentrate as well as remember what is happening on the show from beginning to end.

Household Maintenance:

Cooking: I tend to cook instant meals or get takeout because I do not have the energy to cook. I used to enjoy cooking and would make homemade meals from scratch approximately 5 days a week.

Cleaning: I used to vacuum and dust every week. Now I vacuum and dust every 2 months. I use disposable plates as I do not have the energy to wash them. Although I try to sweep the floors every 2 weeks, I rarely wash the floors.

Laundry: I used to do laundry twice a week but now I do it every 2 weeks as it takes too much effort to walk to the laundry room in my building. I find it difficult to carry large loads and often require assistance.

Shopping: I do not shop for groceries as often as I used to. I used to shop twice a week, but now I shop every 10 days. I always require a shopping cart for stability while shopping.

On a good day I can shop for 20 minutes using the cart as a mobility device. On a bad day I cannot shop and I rely on family to pick up the things I need.

Using Public Transportation:

I do not use public transportation because I cannot walk the 4 blocks to the bus stop. I also worry about not having access to a washroom on a bus. However, if I did take transit I would require a seat as I can not stand without losing my balance. I sometimes use HandyDART when I cannot drive.

Medical Report/Physician's Statement

The medical report/physician's statement is the most important part of the application, according to most long-term disability plans.



If your physician does not support your application, does not provide evidence for severe and prolonged disability, or provides contradictory information, you most likely will not receive long-term disability benefits.

Choosing a Doctor to Write the Report

Choose the doctor or specialist to complete this report who best knows you, your disability, why and how it has prevented you from working, and how it has affected your daily life.

Additional information from specialists such as neurologists, urologists, surgeons and neuro-ophthamologists may carry extra weight or status in the application process. These

specialists have a deeper knowledge of the specific condition they are treating you for and that knowledge is very important.

On the other hand, specialists tend not to know you as well as a general practitioner. Nor do they know the details of the ways your disabilities have impacted your work and daily life. This is particularly true if you have multiple disabilities.

If you have reports from specialists, make sure they include only relevant information. Ensure that their information is consistent with your general practitioner's descriptions.

Completing the Report

Make an appointment with the doctor specifically to talk about your application and how he/she can complete the report to increase the likelihood of your application being accepted.

If you think your doctor does not understand the variability and unpredictable nature of MS very well, feel free to provide him/her with literature from the Multiple Sclerosis Society of Canada.

Your doctor should complete it knowing that your insurance company:

- Wants to know about your medical condition(s), history, treatments, and prognosis
- Is interested in your inability to work your own job initially with the possibility of never being able to work again in any job
- Is not interested in irrelevant information such as educational level, language ability, past work history

(these may be deficits for some people but they are not disabilities)

- Is interested in detailed objective medical information that substantiates the severity and prolonged duration of your disability such as x-rays, lab reports, and other test results
- Is interested in medical opinion based on observation and test results

Here are some questions that you may ask your doctor to answer and include in his/her report:

Describe my medical condition(s).

List all diagnoses and outline the history, symptoms, physical findings, and test results (x-rays, lab reports) that support your diagnoses.

What is the prognosis?

Describe the types of treatment that have been tried.

Has there been any significant improvement with treatment?
Are there any further treatment options available?

What referrals have been made to specialists and other health professionals? Are there any reports that have not yet been made available?

In your opinion, am I capable of returning to any substantially gainful occupation on a regular basis by or since the date _____?

Please explain your answer in detail, providing as much medical support for your conclusions as possible.

Request that your physician return the medical report to you so that you can include it with the rest of your application and send it all at once. Photocopy it with his/her permission. All doctors will bill you for writing their reports.

CHAPTER 4

Appealing the Denial of Disability Benefits

If you have been denied disability benefits through your insurance provider, try the following steps:

1. If you have not already done so, obtain a copy of your policy so that you are clear about qualifying conditions and whether or not you are eligible to receive the benefits.
2. Request the reasons for denial in writing. Unfortunately, unless your plan states so, the insurance provider is not required to give them to you.
3. If you believe that you have a case with good medical data, request that your claim be reconsidered. Ask your doctor to write a letter supporting you and describing your inability to continue working. The more specialized the physician, the greater the weight her/his opinion will carry. Send the physician's letter along with your own to the insurance company stating that you are disputing its decision.
4. Most insurance companies have a policy for reviewing declined claims. If your disability insurance is provided through a bank, contact the bank's ombudsperson.
5. If the suggestions listed above do not produce a satisfactory result in providing your disability benefits, there are a number of organizations you can contact for information and assistance. Their addresses and phone numbers can be found in Chapter 5 (page 29) of this booklet.

CHAPTER 5

Government and Community Organizations Directory

Canadian Human Rights Commission

BC & Yukon Western Region

301 – 1095 West Pender Street

Vancouver, BC V6E 2M6

Telephone 604-666-2251

Toll Free 1-800-999-6899

TTY 1-888-643-3304

Email info.com@chrc-ccdp.ca

Web www.chrc-ccdp.ca

British Columbia

BC Coalition of People with Disabilities, Advocacy Access Program

204 – 456 West Broadway

Vancouver, BC V5Y 1R3

Telephone 604-872-1278

Toll Free 1-800-663-1278

TTY 604-875-8835

Email advocacy@bccpd.bc.ca

Web www.bccpd.bc.ca/s/AdvocacyAccess.asp

BC Human Rights Tribunal

1170 – 605 Robson Street

Vancouver, BC V6B 5J3

Telephone 604-775-2000

Toll Free 1-888-440-8844

Email BCHumanRightsTribunal@gems9.gov.bc.ca

Web www.bchrt.bc.ca

Community Legal Assistance Society (CLAS), Disability Law Program

Suite 300 – 1140 West Pender Street

Vancouver, BC V6E 4G1

Telephone 604-685-3425

Toll Free 1-888-685-6222

Web www.clasbc.net/disability_law_work.php

Dial-A-Law, Canadian Bar Association, BC Branch

Also available in Chinese and Punjabi (Punjabi – website only)

Telephone 604-687-4680

Toll Free 1-800-565-5297

Web www.dialalaw.org

Enquiry BC

Telephone 604-660-2421 (Vancouver)

..... 250-387-6121 (Victoria)

Toll Free 1-800-663-7867

TDD 604-775-0303 (Vancouver)

TDD Toll Free.... 1-800-661-8773

Email EnquiryBC@gov.bc.ca

Web www.mser.gov.bc.ca/prgs/enquiry_bc.htm

LawLINE, Legal Services Society

Telephone 604-408-2172

Toll Free 1-866-577-2525

Web www.lss.bc.ca/general/LawLINE.asp

Lawyer Referral Service, Canadian Bar Association, BC Branch

Telephone 604-687-3221

Toll Free 1-800-663-1919

Web www.cba.org/BC/Initiatives/main/lawyer_referral.aspx

Legal Services Society

400 – 510 Burrard Street
Vancouver, BC V6C 3A8

For Legal Aid:

Call Centre 604-408-2172

Toll Free: 1-866-577-2525

TTY 604-601-6236

TTY Toll Free 1-877-991-2299

Web www.lss.bc.ca

Pro Bono Law of BC

P.O. Box 103

845 Cambie Street

Vancouver, BC V6B 4Z9

Telephone 604-893-8932

Email info@probononet.bc.ca

Web probononet.bc.ca

**The Salvation Army’s Pro Bono Lawyer
Consultation Program**

555 Homer Street

Vancouver, BC V6B 1K8

Telephone 604-694-6647

Email contact@probono.ca

Web www.probono.ca

The Western Canada Society to Access Justice

1440 West 12th Avenue

Vancouver, BC. V6H 1M8

Telephone 604-482-3195

Clinic Line 604-878-7400
Toll Free 1-877-762-6664 (Appointment Line)
Email help@accessjustice.ca
Web www.accessjustice.ca

Yukon

Inquiry Centre

Telephone 867-667-5811
Toll Free 1-800-661-0408
TTY..... 1-867-393-7460
Web www.gov.yk.ca/services

Law Line, Yukon Public Legal Education Association

Telephone 867-668-5297
Toll Free 1-866-667-4305

Law Society of Yukon

Suite 202 – 302 Steele Street
Whitehorse, YT Y1A 2C5
Telephone 867-668-4231
Email info@lawsocietyyukon.com
Web www.lawsocietyyukon.com

Lawyer Referral Service, Yukon Law Society

Telephone 867-668-4231
Web www.lawsocietyyukon.com

Yukon Council on Disability

4194 B 4th Avenue
Whitehorse, YT Y1A 1J8
Telephone 867-668-6703

Email yukoncod@northwestel.net
Web www.ycod.yk.ca

Yukon Human Rights Commission

101 – 9010 Quartz Road
Whitehorse, YT Y1A 2C5
Phone 867-667-6226
Toll Free 1-800-661-0535
Email humanrights@yhrc.yk.ca
Web www.yhrc.yk.ca

Yukon Legal Services Society (YLSS)

Suite 203 – 2131 Second Avenue
Whitehorse, YT Y1A 1C3
Telephone 867-667-5210
Toll Free 1-800-661-0408 ext. 5210
Email administration@legalaid.yk.ca
Web www.legalaid.yk.ca

Yukon Public Legal Education Association

Yukon College Library
P.O. Box 2799
Whitehorse, YT Y1A 5K4
Telephone 867-668-5297
Toll Free 1-866-667-4305
Email yplea@yukoncollege.yk.ca
Web www.yplea.com

CHAPTER 6

MS Society of Canada Directory

BC & Yukon Division

1501 – 4330 Kingsway

Burnaby, BC V5H 4G7

Telephone 604-689-3144

Toll Free 1-800-268-7582

Email info.bc@mssociety.ca

Web www.mssociety.ca/bc

National Office

700 – 175 Bloor Street East

Toronto, ON M4W 3R8

Telephone 416-922-6065

Toll Free 1-800-361-2985

Email info@mssociety.ca

Web www.mssociety.ca

Chapter Offices

Please contact your nearest Chapter for their location and address.

Central Island Chapter

Telephone 250-754-6321

Toll Free 1-888-844-2047

Email info.centralisland@mssociety.ca

Web www.mssociety.ca/chapters/centralisland

Fraser Valley Chapter

Telephone 604-393-7122

Toll Free 1-877-303-7122

Email info.fraservalley@mssociety.ca
Web www.mssociety.ca/fraservalley

Kamloops & Area Chapter

Telephone 250-314-0773
Toll Free 1-888-304-6622
Email info.kamloops@mssociety.ca
Web www.mssociety.ca/chapters/kamloops

Lower Mainland Chapter

Telephone 604-689-3144
Toll Free 1-800-268-7582
Email info.bc@mssociety.ca
Web www.mssociety.ca/bc

North Vancouver Island Chapter

Telephone 250-286-0999
Toll Free 1-888-299-2025
Email judy.spencer@mssociety.ca
Web www.mssociety.ca/chapters/northvanisl

Okanagan Chapter

Telephone 250-762-5850
Email info.okanagan@mssociety.ca
Web www.mssociety.ca/chapters/kelowna

Prince George Chapter

Telephone 250-564-7074
Email info.princegeorge@mssociety.ca
Web www.mssociety.ca/chapters/princegeorge

South Okanagan and Similkameen Chapter

Telephone 250-493-6564

Email info.penticton@mssociety.ca

Web www.mssociety.ca/chapters/sos

South Vancouver Island Chapter

Victoria

Telephone 250-388-6496

Email info.victoria@mssociety.ca

Web www.mssociety.ca/chapters/svic

Cowichan Valley

Telephone 250-748-7010

Email anne.muir@mssociety.ca

Web www.mssociety.ca/chapters/cowichan

West Kootenay Region

Telephone 250-229-4994

Toll Free 1-866-352-3997

Email lonnie.facchina@mssociety.ca

Web www.mssociety.ca/chapters/westkootenay

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The Multiple Sclerosis Society of Canada's Volunteer Legal Advocacy Program provides a range of legal and advocacy support to people living with MS throughout British Columbia and the Yukon by utilizing volunteers who have legal expertise and/or advocacy experience.

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