

Mr. McGREGOR: I wish now to deal with the claims pending, that is, the alleged delays in the payment of benefits.

This is a rather lengthy statement, but, I felt that we should give a thorough background and detailed examination of what took place. The statement is as follows:

Claims Pending

To give members an understanding of what is involved in making a claim, it might be well to first outline the procedure. This is as follows:

A claimant goes to the local office and

- (a) registers for work, and
- (b) if no suitable work is immediately available, he files a claim.

This claim is completed by a claim taker who records all of the pertinent information on the proper forms. The claimant leaves his insurance book and is instructed when next to report.

Particulars of the claimant's last employment are sent to the employer concerned, for verification; and the insurance book, together with what we call a computation sheet, is sent on immediately to the regional office where, from the book and previous contribution records, it is determined

- (a) whether the claimant is eligible, and, if so,
- (b) the weekly rate at which he will be paid as well as
- (c) the maximum length of time for which he may be paid.

This information is returned to the local office where, if the employer's verification has been returned, the decision of the insurance officer is made and either the claim goes into payment or the claimant is notified of any disqualification imposed.

Claims are held for the maximum of a week, from the date filed, to permit of return of the employer's verification. If the employer's verification is not returned by that time, the insurance officer's decision is made on the information furnished by the claimant with any adjustment, arising from the subsequent return of the verification, made if and when that form is received.

That is what happens when there are no complications.

When claims are made by mail there are, of course, several difficulties. To continue with the statement:

When payment is not made on time it is generally due to a variety of circumstances. Delays are due for the most part to—

1. Failure to deposit the insurance book at time of claim.
2. Circumstances of separation requiring full investigation.
3. Labour Disputes.
4. Armed Service credits.
5. More than one insurance number.
6. Previous claims at other points.

Dealing with these in turn, it is our experience that upwards of 20 per cent of claimants fail to produce their insurance books at time of claim and for a variety of reasons —

Some of which are as follows:

- (a) a claimant simply neglects to bring it,
- (b) he has lost or mislaid it,
- (c) he failed to pick it up from his last employer (he may have walked off the job and will not go back to get his book),