

INJURED IN AN AUTOMOBILE ACCIDENT?



After a Motor Vehicle accident (MVA), you want to make sure your injury (or potential for injury) is attended to right away. Any delay can compound the stress you already feel. Most people worry about what their insurance will have to say about the matter, and wait until they receive the go-ahead. Here is some info to help you start rehab as soon as possible.

1. **See a primary health care practitioner** (chiropractor, medical doctor, physical therapist) as soon as possible for an assessment of your injury & treatment if needed.
 - Most minor injuries will surface within 72 hours of your MVA. Some may affect you a bit later, so it's a good idea to get checked out while your injuries are new.
 - **Insurance only pays for one assessment so it is advisable that this is done by the professional who will be treating you & who is well trained in assessment.**
2. **File an injury/accident report with the police.**
3. **Complete the Notice of Loss and Proof of Claim Form (AB-1)**, retain a copy for your records and send the original signed form(s) to the insurance company. If you are unable to send the form within the following timeframes, submit it to your insurance company as soon as practical and explain the reason for the delay.
 - If your injury is diagnosed as a sprain, strain or a whiplash associated disorder I or II, submit this form within 10 days of the accident to access Diagnostic & Treatment Protocols funding.
 - If you have other types of injuries, submit the form within 30 days of the accident (e.g. concussion, fractures or 3rd degree sprains/strains)
4. **You will be contacted** about the benefits you are entitled to receive after the insurance company reviews your completed form. If your insurance company needs any additional information in order to process your application, they will contact you.

Section B – Accident Benefits

Auto insurance is mandatory in Alberta and consists of different sections, each addressing different types of losses.

- Section A is the third-party liability section; it applies if you are in an accident which is your fault and you injure someone else or damage their vehicle.
- Section B is the accident benefits section; it applies if you, a passenger or a pedestrian, is injured in an accident regardless of who is at fault.
- Section C is the loss of or damage to your automobile

1. Section B: No-Fault Accident Benefits

- When you've been injured in an MVA (this means any accident involving a motor vehicle, even if you were a pedestrian), you are entitled to medical benefits.
- Responds if you are injured in an accident regardless of who is at fault.
- Often referred to as "no-fault accident benefits", This means you are entitled to benefits even if you are responsible for the accident.

2. How it works

- Most people involved in an MVA are covered by Section B benefits of an auto insurance policy, whether their own or someone else's.
- If you have your own auto insurance policy, it will apply if you are in an MVA as a driver.
- If you are involved in an MVA as a passenger in someone else's vehicle, the Section B of the driver's policy will apply.
- If you are involved in an MVA as a pedestrian, Section B of the vehicle owner's policy will apply.

3. Coverage

- Section B has 3 categories of accident benefits: medical benefits, death and disability benefits, & benefits for accidents occurring outside Alberta in a no-fault jurisdiction. We will focus on **Medical Benefits**
 - You are entitled to coverage for all reasonable expenses incurred as a result of injuries suffered in the MVA, up to \$50,000.00 incurred within 2 years from the date of the accident.
 - This includes expenses for necessary medical, surgical, chiropractic, dental, hospital, psychological, physical therapy, occupational therapy, massage therapy, acupuncture, and professional nursing & ambulance services, & other related rehabilitative services, supplies, & treatment.
 - Certain services are capped at fixed dollar amounts:
 - Chiropractic: \$1000.00 • Massage: \$350.00
 - If your practitioner diagnoses you with an injury that falls “Inside Protocols”, the MVA insurance is obligated to pay for at least 10 physiotherapy treatment blocks, and may be required to pay for up to 21 depending on the injury.
 - Any additional treatments must be approved by your insurer.

4. When you are not eligible for accident benefits

- There are certain circumstances that disqualify you from receiving accident benefits.
 - driving when you knew or should have known that you did not have valid insurance;
 - driving while impaired or refused to give a breath sample
 - driving a vehicle when you knew or should have known you were driving without the owner's consent,
 - you were a passenger who knew or should have known that the driver did not have the owner's consent to drive the vehicle,
 - using an automobile in connection with criminal activity,
 - knowingly misrepresented information when you applied for your insurance.

5. Benefits for Accidents Occurring Outside Alberta in a No-Fault Jurisdiction

- Section B is referred to as no-fault, but it is the only element of Alberta auto insurance that is truly no-fault. In addition to receiving Section B benefits, you are also entitled to sue an at-fault driver for compensation, including for pain & suffering, wage loss, loss of earning capacity, & out of pocket expenses incurred in relation to the MVA.
- In Saskatchewan, Manitoba, Ontario, and Quebec, auto insurance is a pure no-fault system. That means, if you are in an MVA, you are entitled to a standard and pre-established set of benefits regardless of who is at fault. You cannot sue the at-fault driver for any additional compensation.
- If you are involved in an MVA in one of these no-fault jurisdictions, your Section B policy provides you are entitled to the more generous accident benefits payable under the applicable laws of that no-fault jurisdiction.

6. Using these benefits will not affect your insurance rates

- Many people worry that their insurance premiums will go up if they use these benefits. This is not the case – these are no-fault benefits and using them will not affect your insurance rates.



Acknowledgement: MVA Injury Treatment Process

These are items we need to ensure you are aware of before starting MVA treatment at Collegiate:

Diagnostic & Treatment Protocols Regulation (DTPR): is the law in Alberta that determines how much treatment an MVA victim is entitled to. Under the Regulation, as long as a physiotherapist, chiropractor or physician deems it necessary, the regulation automatically grants Strain, Sprain & Whiplash injuries up to 10 or 21 paid medical blocks. The intention was to allow access to treatment quickly & easily.

If you have been injured in an automobile accident in Alberta, in most cases you are entitled to accident benefits coverage regardless of whether you were at fault. The benefits you receive depend on the type of injury you have:

Inside Protocol/Minor Injuries - sprain, strain or WAD I & II (whiplash associated disorder):

- These injuries are treated using pre-approved protocols described in the DTPR (10 or 21 treatment blocks).
- Fees & treatment blocks are determined by DTPR, a minor sprain or strain will be allocated 10 treatment blocks, a more serious sprain or strain will be allocated 21 treatment blocks
 - at 3 of 10 or 7 of 21 treatment blocks the fee covered drops from \$83/visit to \$41/visit (equivalent to a 10-min appointment). To maintain our clinic philosophy of quality care we don't offer 10-min appointments therefore we ask your insurance company to use 2 blocks at a time for these remaining visits.
 - This does not limit your coverage & has been approved by the Superintendent of Insurance in Alberta
- It is your responsibility to make sure the Notice of Claim (AB-1 form) has been sent to your insurance company within 10 days of accident
- Inside protocol visits expire at 90 days after the date of accident or when the total number of visits authorized by regulation has been reached, whichever comes first. The claim then moves to 'Outside Protocol' (see below notes).
- The assigned visits are used for any permitted practitioners & are shared between them (physiotherapy, chiropractor, massage)
 - It's up to you to keep track of visits if you are attending multiple clinics & update us so we follow necessary billing & reporting rules.

Outside Protocol/Other Injury (WAD III, concussion, fracture, etc): Are outside treatment protocols

- Does not change coverage, are defined as not a minor injury therefore there is no minor injury cap for compensation from at-fault person on pain & suffering.
- Also, any injuries where protocols have expired will fall Outside Protocol
- If you have private health insurance, you must use it for payment first. The MVA insurance will then cover the qualifying expenses not covered by your private plan.
 - Some insurance companies may not allow direct billing for this portion.
 - This is a legislated rule we are required to follow. If you have additional questions, please contact your adjuster.

Please be aware that if the MVA insurance protocols are not followed you may be responsible for any balance owing to Collegiate Sports Medicine Inc.

