

Right Care, Right Time.

Auto Insurance Reform Submission - February 15, 2019

The Ontario Rehab Alliance (ORA) appreciates this opportunity to contribute to the Auto Insurance Reform consultation.

The ORA represents primarily small to medium sized healthcare businesses that collectively employ upwards of 4000 healthcare providers including Regulated Health Professionals, social workers, personal support and rehabilitation support workers. We are the primary providers of rehabilitation to Ontarians seriously injured in automobile accidents. Most of our members work throughout the healthcare system, giving us a wide-angle view.

Since 2010 we have seen reduced medical and rehabilitation benefits, more obstacles to treatment, increased red tape, and higher levels of dispute. These changes have impeded the central purpose of insured benefits: helping injured people get better. Instead, they too often contribute to disability, rather than reducing it.

We believe system reform can replace obstacles to care with proactive 'on ramps' to treatment, eliminate, simplify and modernize processes, retain appropriate checks and balances and reduce friction points **without increasing costs**. Simply put: the right care at the right time.

Recommendation: *Eliminate procedural delays and red tape. These obstacles stem from institutionalized distrust towards injured claimants and their clinicians such as insurer IE assessments on clinician requests to conduct initial assessments, and 10-day waits for approvals at hospital discharge.*

Benefit categories and coverage for non-MIG injuries should be reconsidered. Previous reforms have disproportionately relied on reducing these benefits and making it more difficult to access catastrophic-level benefits. The seriously injured now often exhaust coverage before they can return to work or school. The most seriously injured wait without treatment for years to see if they will be deemed catastrophic. Premature discharges damage lives, create disputes, and contribute to hallway healthcare. With little to no OHIP-funded rehab available, they turn to emergency rooms and acute care.

Recommendation: *To ensure sufficient benefits basic mandatory coverage should be increased, or policy options design should offer a standard benefit package of higher magnitude with a buy-down option to the current basic level. Consider mechanisms such as a 'no dispute zone' and proactive healthcare for non-MIG injuries. Reconsider whether the 'hard stop' between non-MIG and catastrophic benefits, and the catastrophic definition, are properly serving accident victims and Ontario taxpayers.*

The ORA embraces the goals of modernization and customer service.

Recommendation: *Distill the bloated claims processes, create accessible, plain language e-records for claimants, and institute e-payment.*

We support the goal of affordable auto insurance. As a mandatory product, the government has a responsibility to ensure it's serving customers at a reasonable cost that is relatively easy to use. We believe there are cost savings to be found as outlined above, but even more so in other facets of the



system such as towing, storage, repairs and rentals. It is a sad irony that it's currently much easier to get a car back to pre-accident condition than the accident victim.

Recommendation: Complete thorough cost analyses, including impacts on public healthcare and social services, so that consumers and policy makers can be better informed.