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Public and Private Partnerships for Client-Centred Care:



Auto Insurer Funding for the delivery of
Private Rehabilitation and Attendant Care
in and out of Hospital

Presenters:



David F. MacDonald
416-868-3155

Sloan H. Mandel
416-868-3123

Michael L. Bennett
416-868-3246



Debbie Devlin
P.T. and Clinic Director of
CVRC

Susan Fraser
B.Sc., O.T., O.T. (Reg.)

Victoria Gibbins-Verdurmen
B.S.W., M.S.W., R.S.W.



Seminar Objectives:

1. Review accident benefit entitlements.
2. Review roles of case manager, lawyer, private occupational therapist and hospital social worker from admission to discharge in the context of accident benefits.





Seminar Objectives:

3. Medical, Rehabilitation and Attendant Care Services –

Who is responsible to provide services?

- Creating a model for Public/Private Therapy in Hospital and Community.
- Process for gaining access to privately funded services in hospital.
- Explore Case Scenario to deal with above issues and provoke questions.



PART 1: Accident Benefit Entitlements

Which Car Insurer Should I Apply to for Benefits?

In priority:

- a) Your own insurance company
- b) If you are not insured, but are principally financially dependent on someone, their insurer (e.g. son, daughter, spouse, parent, grandparent)
- c) The insurer of the car in which you are an occupant
- d) The insurer of any other automobile involved in the accident
- e) If no recovery available above, from the Motor Vehicle Accident Claims Fund



Accident Benefit Entitlements

Which Car Insurer Should I Apply to for Benefits?

- If more than one insurer is responsible, the person applying for accident benefits can use his or her absolute discretion to decide which insurer they wish to apply to for benefits.
- The insurer that receives the Application for Accident Benefits first has the responsibility to pay even if it disputes its responsibility.
- A summary of all benefits available are included within the client kit which we provide to hospitals, social workers, discharge planners and clients at the outset of any case (see back of binder)



What are the Various Accident Benefit Entitlements?

Visitor Expenses

- Available to the spouse, children, grandchildren, parents, grandparents, brothers and sisters. Also, to any individual with whom the insured was living at the time of the accident.

What Visitor Expenses are payable?

- parking
- meals
- travel expenses
- hotel
- air fare
- child care...



Weekly Benefits

1. **Income replacement Benefits** –
 - maximum of \$400.00 per week.
 - short term/long term disability (or any “collateral insurer”) pays first.
 - For first two years entitled to benefit if insured is unable to return to his “own occupation”.
 - After two years, test changes to unable to do “any occupation”.
- After sixty-five – step down formula similar to pension.



Weekly Benefits

2. **Non-Earner Benefit** – if not employed at the time of the accident and over age of sixteen –
 - amount is \$185.00 per week
 - if student, then non-earner benefit increases to \$320.00 per week after 2 years so long as injured person unable to return to normal life.
 - Payable 6 months after accident, if insured suffers a “complete inability to carry on normal life” as a result of the accident.



Weekly Benefits

3. Caregiver Benefit

- payable if injured person residing with a person in need of care and injured person was primary caregiver before the accident
- maximum of \$250.00 per week for first child and entitled to an additional \$50.00 per week for additional children the injured person was a primary caregiver for before the accident.



Medical and Rehabilitation Benefits -

Wide definition of an insurer's responsibility.

Medical Benefit:

"shall pay for all reasonable and necessary expenses incurred as a result of the accident for medical, surgical, dental, hospital nursing, ambulance, speech language, chiropractic, psychological, occupational therapy and physiotherapy services – transportation to and from treatment".

- Both in and out of hospital



Medical and Rehabilitation Benefits -

Rehabilitation Benefit:

Reasonable and necessary measures "to reduce or eliminate the effects of any disability resulting from the impairment or to facilitate the insured person's reintegration into his or her family, the rest of society and the labour market".



Rehabilitation Benefits include:

Includes social work, rehabilitation support worker and

- Life skill training,
- Family counseling,
- Social rehabilitation counseling,
- Financial counseling,
- Employment counseling,
- Vocational assessments,
- Vocational and academic training,
- Workplace modifications,
- Home modifications,
- Vehicle modifications,
- Transportation to and from training sessions,
- Other goods and services that the insured person requires.

Medical limits

- \$100,000.00 unless catastrophically impaired then \$1,000,000.00



Attendant Care Benefit – Defined by Form 1

What is Attendant Care?

- Personal Care
- Supervisory Care
- Professional Care
- Available to family members
- No need for family members to be paid by injured person, just provide services
- assist with exercises
- care which ensures comfort, safety and security in hospital or home environment...
- \$1,000,000 if CAT – lifetime (max \$6,000 per month)
- \$72,000 if non-CAT – 2 years (max \$3,000 per month)



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Attendant Care Needs Determination

Form 1 – Part 2 – Basic Supervisory Care
- can be provided by family members.

“applicant lacks the ability to independently get in and out of a wheelchair or to be self sufficient in an emergency.”

“applicant lacks ability to respond to an emergency...”

- “emergency” means any emergency, includes medical emergency or environmental emergency such as a fire.
- no one knows when an emergency is going to occur.
- unless you are self sufficient, you require 1-1 care to respond to an emergency.



Insurer’s Responsibility

To pay attendant care for all hours other than those when client is receiving 1-1 care from in-hospital staff. ¹⁴



Calculating Attendant Care Needs for Clients in Hospital

- Ontario Society of Occupational Therapists endorse this approach:
 1. Determine staffing of hospital. Include nursing and Personal Service Provider provision of 1-1 care.
 2. Private OT determines needs for attendant care in 24 hour period.
 3. Subtract from total hours of need for care the amount of 1-1 care provided by hospital staff.
 4. Remaining hours = maximum hours of attendant care per day.



Calculating Attendant Care Needs for Clients in Hospital

Example-

- Based on staff to client ratios, client receive three hours of daytime support and one hour of overnight support for a total of four hours of hospital 1-1 support/supervision.
- Client will therefore require an additional 20 hours of supervision per day.
- Insurer responsible to pay for costs of additional care.
- Can fund family and/or private personal service providers.
- Attendant care required in case of medical emergency is not equal to attendant care required because: "client lacks the ability to independently get in and out of a wheelchair or be self-sufficient in an emergency."



Catastrophic Designation

- Paraplegia or quadriplegia
- Total permanent loss of use of both arms or both arm and leg
- Total loss of vision in both eyes
- Brain impairment – GCS of 9 or less or GOS of 2 or 3
- Psychiatric impairment – class 4 or class 5
- Combination of impairments which result in 55% or more whole person impairment



Catastrophic Designation in Practice

- Incomplete paraplegia or quadriplegia qualify
- "Confounded" GCS qualifies (e.g. alcohol, medication, intubation, drugs)
- Can add brain impairment, psychiatric impairment and physical impairments together to reach 55% whole person impairment
- Single leg above knee amputation is catastrophic (more than 55%)
- Single arm above elbow amputation is catastrophic (more than 55%)



PART 2: Roles and Responsibilities

Roles and Responsibilities Rehabilitation Case Manger

When a client suffers a catastrophic impairment (or on the consent of the insurer) a Case Manager can be appointed.

- Choice of Case Manager is entirely up to the injured person/representative. An insurer will often wish to appoint a case manager with whom it has a rapport.
- Case Manager is to provide important linkage between recommendations made by treating health care professionals in hospital and provisions of those recommendations once the accident victim moves home and into community.
- After discharge, the case manager will identify, arrange and co-ordinate health care professionals for community based rehabilitation.



Rehabilitation Case Manager

- Liaises with client, family, and all health care professionals assisting in rehabilitation.
- Ensures all impairments, disabilities and other factors affecting recovery are identified.
- Ensures that all treatment and goods and services required are provided.
- Provides ongoing problem solving with client.



Rehabilitation Case Manager

Other Responsibilities of Case Manager

- Liaises with insurance adjuster, lawyer and health care professionals to ensure appropriate understanding of injured persons' condition by claims adjuster and to help the lawyer secure funding for recommendations made by the injured persons' team.
- Facilitate group communication and ensure consistent approach to rehabilitation goals.



Roles and Responsibilities

Roles and Responsibilities Personal Injury Lawyer

For client in hospital:

- Ensure client receives all benefits to which s/he is entitled expeditiously.
- Help identify appropriate privately funded treatment providers.
- Complete Accident Benefit Application immediately following accident in order to secure payment of benefits. In most cases, benefits will not be paid until a complete Application is submitted to the insurer.
- Arrange Occupational Therapist to complete Form 1 to identify client's attendant care needs in hospital.



Personal Injury Lawyer

For client in hospital:

- Inform family members of their entitlement to visitor expenses and assist family members apply for reimbursement.
- Communicate with Employer(s) to obtain necessary employment/benefit information
- Communicate with Social Worker/Discharge Planner to learn of any adjunctive therapies required in hospital.
- Learn of discharge recommendations and ensure insurer agreement to fund.



Personal Injury Lawyer

For client in hospital:

- Communicate with accident benefit adjuster to ensure timely payment of benefits.
- Ensure that all relevant information is appropriately brought to the attention of the responsible insurers.
- Make adjusters and insurers aware of legal and arbitration decisions which support entitlement to various benefits.
- Attend team meetings as necessary to ensure that all treatment recommendations are fully identified and funded by the insurer.



Personal Injury Lawyer

Legal Fees

Personal Injury lawyer's involvement must be to reduce the personal and financial stress caused to an injured person and his/her family. As such:

- In ninety percent (90%) of motor vehicle personal injury cases no fees are paid until a settlement is obtained.
- All leading personal injury counsel will attend initial meetings with injured persons and family members on a no fee, no obligation basis.
- Should assist injured person complete Accident Benefit Application at first meeting, even if not retained.



Personal Injury Lawyer

Legal Fees

- No payment should be requested from the client for a medical report during the process of a motor vehicle accident case.
- Insurer of at-fault party is responsible to pay for most medical report costs at the end of the case.



Private Occupational Therapist

- Assess attendant care needs in hospital – Form 1
- Home assessment
- Perform rehabilitation co-ordination role if no case manager
- Provide augmentative therapy if hospital believes it to be appropriate
- Recommend, instruct and monitor rehabilitation support worker for hospital/community based intervention
- Provide progress reports to insurer
- Determine if recreational therapist, tutoring or other interventions would be useful for avocational, school or vocational reintegration



Roles and Responsibilities Concerning Accident Benefits:

Hospital Social Worker

- Provides complete assessment of family and client coping and adjustment
- provides supportive counselling
- Determine whether or not legal counsel is appropriate to assist injured person access benefits from insurer – including benefits the insured and the family are entitled to receive while still in hospital (visitor expenses, attendant care, income replacement benefits, and augmentative therapy from third party providers).
- Provide advice to family re: communicating with the adjuster for accident benefit insurer adjusters for the insurer of the at-fault parties.



Hospital Social Worker

- Consult to determine whether the client should receive adjunctive private therapy in hospital and/or following discharge (e.g. occupational therapy, physical therapy, speech therapy, physiotherapy, rehabilitation support worker, recreational therapy and social worker/psychologist).
- Convey these needs to lawyer and case manager.
- Consider preparing and supplying to family, insurer and lawyer a list of hospital recommendations for discharge needs re: care, speech, physio, OT, home assessment, mobility assessment, case manager.



Hospital Social Worker

- Be source of first contact for any third party health care professionals contacting hospital (may apply to case coordinator)
- Your suggestions...



Partnerships and Referrals

Conflict of Interest

- no conflict of interest will arise when referring in-patient to CVRC

Conflict of interest only arises when:

“a person may receive a Financial benefit directly or indirectly as a result of the provision by another person of goods or services”

AND

“the person who may receive the financial benefit is not the employee of the person who will provide the goods or services.”