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## Efficiency needed in dispute process



PERSONAL INJURY

A streamlined accident benefits dispute process is needed to improve the system surrounding recovery for claimants, Toronto plaintiff's personal injury lawyer **Darcy Merkur** writes in *Law Times*. [Read Law Times](#)

"What we need is a better dispute process that's more efficient and timely," writes Merkur, partner with **Thomson Rogers**. "We need a system that's accessible without delays."

In the article, Merkur describes this common scenario: A personal injury client is seriously injured and needs care and rehabilitation. A lawyer navigates through red tape and things run smoothly until the insurer secures a highly-contentious, independent medical examination report that leads to crucial treatment and care denials.

"The report, often by someone specializing in independent medical examinations rather than treatment, concludes that the care recommended by the treating health practitioner is unnecessary and unreasonable," writes Merkur, who devotes his practice to helping catastrophically injured car accident victims in Ontario. "You try to persuade the insurance adjuster to reconsider the denial by providing additional medical support for the request and explaining how the report is sloppy and riddled with numerous factual errors. The insurer, however, maintains the denial."

What happens next could be a years-long, drawn-out process that may include disputing the denial, mediation, arbitration and appeals, writes Merkur.



“The accident benefit dispute process makes no sense,” he writes. “The premise of the no-fault system is immediate access to necessary benefits. A lengthy dispute process to resolve claims for immediate benefits is absurd.”



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