

YOUR EHCB AND AUTO INSURANCE

What is SABS?

The Government of Ontario has legislation called the **Statutory Accident Benefits Schedule (SABS)**. The SABS applies to all motor vehicle insurance policies and indicates that an auto insurer does NOT have to pay for the part of an expense when payment is available under other insurance or health care coverage.

What Does This Mean for You?

Should you be involved in a car accident and need treatment, this SABS legislation requires you to use all of your extended health coverage benefits you have through your employer, spouse or parent.

This is not a policy of Elevation Physiotherapy and Wellness, but is legislation from the Provincial Government as part of the SABS.

All extended health care benefits (EHCB) that are available to an insured person are to be used first and deducted from the total amount owed for the treatment prior to being submitted to the auto insurance company.

For example, if you have \$500 in EHCBs available for Physiotherapy services, you must first use all of that \$500 available through your employer's benefits (**and/or your spouses** or parents, if you are covered), even though Ontario legislation requires your Auto Insurer to pay for this treatment. The remainder of any additional money for approved treatment would be paid for by the auto insurance company, if determined to be reasonably necessary within the SABS.

Please note that there is a minor injury cap of \$3500 for medical and rehabilitation benefits as referred to in the SABS for treatment of injuries received in your car accident.

What Does This Mean for Your EHCBs?

It is your responsibility to inform Elevation Physiotherapy and Wellness of your yearly EHCB allowances per treatment service. This can be found in your EHCB handbook or check with your insurance company. You must then provide us with all EHCB information and requested paperwork.

You must bring both the money and the statement to the clinic. This must be forwarded to the auto insurer as proof of payment. The auto insurer requires this statement before releasing any further payments. Failure to provide the statement of benefits and ECHB payment to the clinic will result in you being responsible for ALL costs incurred for treatment provided.

Benefits must be used for the entire year, and for any benefit renewals. This means if your benefits run from January to December, legislation requires that we process the treatment costs through work benefits again on January 1.

How Can We Help?

- We will submit for treatment provided on your behalf either through electronic submission or by mail. The payment from the EHCB insurer and statement may go to you, and you must bring it to the clinic
- we **MUST** submit proof to the Auto Insurance company in the form of a statement of benefits that outlines what has been paid by the EHCB company
- once the auto insurer receives the statement of benefits, they will pay the account for all approved treatment and/ or goods and services.