

2022/2023 Insurance Information Package

COMMON QUESTIONS ASKED REGARDING ACCIDENT INSURANCE

1. WHEN WILL I GET PAID/REIMBURSED?

This is a reimbursement policy with a \$100 deductible for any one accident, for therapy and/or dental coverage. Due to the processing time involved, payment for the reimbursement of claims may be anywhere from four to six weeks. If there is indication that further receipts will be submitted, rather than reimburse a claimant for one or two, the insurance company may wait and process a cheque for them all at one time. Some common reasons for delay in payment are:

- i) if the injured athlete has other insurance (this policy is a "second payer" and will come into effect after all other insurance available to the athlete is exhausted);
- ii) the address on the claim form for the athlete is incorrect or incomplete;
- iii) no physician's referral and receipts have been received;
- iv) there is no indication that the initial treatment was received within 30 days of the accident;
- v) the claim was submitted after 90 days of the accident date.

2. ARE BRACES COVERED?

Yes, however, there must be a written prescription by a licensed doctor in order for air casts/braces, etc. to be insured. **Proof of purchase is not evidence of a prescription.** Air casts/braces, etc. required primarily for sports activities are not covered. They must be required for daily wear to rehabilitate.

3. CAN THE PHYSIOTHERAPIST REFER CLAIMANT FOR TREATMENT?

No. A licensed doctor must refer claimant. The injured athlete must be referred to a Physiotherapist, Chiropractor, Athletic Therapist or Massage Therapist in order for expenses to be reimbursed.

4. IS PHYSIOTHERAPY (CHIROPRACTIC, ATHLETIC OR MASSAGE THERAPY) 100% COVERED?

Starting April 1, 2020 there is a \$100 deductible for each of the above. Coverage is provided once all other insurance available to the claimant is exhausted and a licensed doctor has referred the injured athlete to the therapist.

- The rates within the Sport Accident Policy for all therapy will be \$50.00 per visit with a maximum of \$2,000.00 per accident over a 52 week period from date of the accident. This includes physiotherapy, athletic therapy, chiropractor, massage therapy and osteopath. As per above, this is the SECOND PAYER to any other coverage available to the individual (employee benefits plan, etc.).

5. DO I NEED EXTRA COVERAGE FOR TRAVELING?

Travel Insurance within Canada is always recommended within Canada for costs not covered by Manitoba Health IE. Air Ambulance.

No coverage is afforded for Out of country coverage. If traveling outside of Canada, recommend purchasing travel insurance policy.

6. HOW LONG CAN I CLAIM EXPENSES?

Up to one year from the date of the accident.

7. IS AMBULANCE COVERED?

Yes (Ground Ambulance Only)

8. DO I HAVE TO WAIT UNTIL I HAVE ALL OF MY RECEIPTS BEFORE SUBMITTING MY CLAIM?

No. You may submit your claim form and physician's referral first so that Markel Insurance Program receives your claim within 90 days of the accident. Once your claim has been processed, any receipts can be submitted on an ongoing basis (up to one year after the accident date) directly to your Provincial Sport Organization (PSO). If Markel Insurance Program receives just the athlete accident claim form and physician's referral, they will open your file and await any receipts. If after a period of time no receipts have been submitted, a form letter will be sent to you requesting any receipts.

9. WHAT HAPPENS IF MARKEL INSURANCE PROGRAM RECEIVES A CLAIM PAST 90 DAYS OF THE ACCIDENT DATE?

Claim will be denied. However, claims received past 90 days may be considered if Markel Insurance Program feels that the reason for the delay is justified. (A letter of explanation for the delay should accompany the claim.)

10. IF I HAVE OTHER INSURANCE, DO I SUBMIT MY EXPENSES TO THAT COMPANY FIRST?

Yes. However, in order for a claim to be processed, Markel Insurance Program must receive a completed athlete accident claim form and physician's referral **within 90 days** of the accident date. There is a section on the claim form that asks if there is other insurance. This will indicate to Markel Insurance Program that the balance of receipts not paid will be forwarded once all other insurance is exhausted.

11. AT WHAT POINT DO ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS APPLY WHEN TRAVELING TO AN EVENT BY AUTOMOBILE?

There must be three or more people traveling together in the same automobile for these benefits to apply. Applicable in Canada only.