

# **Response to FSRA Consultation on Revision of UDAP Regulation Governing Unfair or Deceptive Practices**

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## **Implications of Auto Insurance Reform**

The UDAP regulation was created to reflect, and encourage compliance with, the current auto insurance scheme. If changes are made to the auto insurance product, and in particular to the SABS, then it only makes sense for the UDAP regulation to be revised to reflect that new reality. In particular, the UDAP regulation needs to be strengthened in order to better protect consumers if other checks and balances are being removed from the system. We look forward to an opportunity to provide input to a future UDAP consultation review to ensure that it appropriately reflects changes.

## **Consumers Are Also Claimants**

Many of the proposed principles and suggested revisions to the UDAP focus on the consumer at the point-of-sale when products are chosen and purchased, and do not sufficiently address the rights and needs of consumers/users of the product at the point at which they become a claimant. As such, when considering the removal of barriers to innovation that may promote incentives and innovation within the auto insurance industry, we caution rule-making that promotes consumer choice for cost savings which ultimately sacrifice the consumer's access to care in the event they are injured in a collision .

## **Claims Handling, [s.1.9, 5, 6]: Slide 15.**

We commend FSRA for its intent to establish and articulate principles of fair claims handling. We are pleased to respond to FSRA's invitation to offer alternative language for this section and have articulated our suggestions as statements of principle, rather than prescription, below.

Conduct that does not meet the standard of examining and settling claims fairly.

Principles of fair claims handling include:

### **# 1: Good Faith**

Providing access and supporting claimants in finding coverage for purchased benefits where such coverage exists within the policy to maximize their recovery in the most expeditious manner, and where not doing so negatively impact recovery.

### **# 2. Timeliness**

Expediently facilitate delivery of goods and services recommended by regulated health care practitioners to maximize and speed recovery. In the event that goods and services are denied by the insurer, this principle extends to the expeditious arrangement of the appropriate examination(s) and, subsequently, the timely delivery of the report and the insurer's determination regarding the issue(s) in dispute. The expectation of timeliness additionally applies to the payment for approved goods and services.

### **#3 Accountability and Transparency**

Accessible accountability mechanisms to enable: a) the reporting of suspected violations; b) the issuing of penalties significant enough to effectively discourage such violations; and, c) ensuring transparency through public posting of confirmed violations to support consumer education and protection.