

## **ELEVEN THINGS YOU SHOULD KNOW ABOUT YOUR NO-FAULT INSURANCE CLAIM**

1. "No-Fault" automobile insurance coverage provides benefits to those occupants in the vehicle who have been injured in an accident. No-Fault benefits are paid regardless of who caused the accident. Benefits include payment of medical bills, lost wages, prescriptions, household services, mileage, and death benefits.

2. An application for No-Fault benefits **MUST BE** submitted to the automobile insurance carrier within 30 days from the date of the accident. Failure to do so may result in the denial of your entire No-Fault claim.

3. If you were employed when the accident happened, you must apply for New York State Disability benefits through your employer. Your employer should know the process for filing a disability claim. We cannot apply for NYS Disability for you.

4. Basic No-Fault insurance covers up to 80% of your average weekly wage less any deductions for NYS Disability, and up to \$2000 per month. You must provide a disability statement to us from your doctor's office every thirty days; otherwise your claim for lost wages will be delayed. No-fault will pay every thirty days, and no sooner than thirty days past the previous payment. Benefits may differ depending on the specific policy covering the vehicle you occupied.

5. Your insurance carrier may periodically send you for appointments referred to as "Independent Medical Examinations" or IMEs. Under your policy provisions, your insurance company has the right to schedule you for these examinations. You **MUST** attend. There is no limit to the number of IMEs the insurance company can schedule. Further, you are only allowed to miss or reschedule **TWO TIMES** during the life of the claim. After that, the carrier will

DENY further benefits and there is little that can be done to reverse that decision.

6. You should use your No-Fault insurance for all accident-related medical bills and expenses. If you use any other insurance, e.g. private health insurance, Medicaid or Medicare, you may be responsible for reimbursing any monies the carrier paid toward your accident. Further, you will not be reimbursed by No-Fault for any insurance co-pays you may incur.

7. You must notify all medical providers, including ambulance companies, hospitals, chiropractors, specialists, etc. of your no-fault insurance information so they may submit their bills to the correct entity. **ALL MEDICAL BILLS MUST BE SUBMITTED TO THE NO-FAULT CARRIER WITHIN 45 DAYS FROM THE DATE OF SERVICE. OTHERWISE, THEY WILL BE DENIED.**

8. No-fault will reimburse for mileage expenses incurred to and from your doctor's appointments and IMEs. You must submit your mileage summaries to our office every 30 days. No-fault will not pay mileage reported later than 90 days after the date of service. Mileage will be reimbursed only during the first year of your claim and will be paid according to the Federal Mileage Reimbursement Rate. (2012 rate: .55/mile). Keep all receipts to submit for reimbursement!

9. No-fault will pay for household assistance by someone not living in your home. Household help will be reimbursed at a rate of no more than \$25.00 per day for the first year of your claim. You must submit proof of payment for household services within 30 days of same for consideration by no-fault.

10. It is important that you continue to treat even if there is a denial of your No-Fault claim. If your doctor is unwilling to treat you based on a no-fault denial, please contact our

office immediately to discuss. Last, no-fault denials are “specialty-specific”. For example, if the carrier denies treatment by a chiropractor, you may still see an orthopedist or neurologist.

11. Basic No-Fault provides up to \$50,000.00 in total insurance benefits. If your policy includes APiP benefits, then you will be subject to additional coverage for wage loss and medical bills. No-Fault deductibles may be paid back by the “at-fault” carrier assuming that carrier admits causing the accident.