

Personal Injury Protection Plan Your Guide



MANITOBA
PUBLIC INSURANCE

Your Reference Page

Date of Accident

Injury Claim Number

Personal Injury Case Manager

Telephone number

Best time to call

Vehicle Damage Claim Number

Vehicle Damage Claims Adjuster

Telephone number

Best time to call

Manitoba law defines this insurance policy.

Unlike other insurance policies you may have, which are sold by private companies, Manitoba's Personal Injury Protection Plan (PIPP) is Manitoba law.

The *Manitoba Public Insurance Corporation Act* and its regulations set out types of coverage and eligibility for benefits. This law also describes how the Manitoba Public Insurance Corporation operates. We must follow the law when we respond to a claim from a person injured in an accident.

The *Manitoba Public Insurance Corporation Act* is Chapter P215 of the Continuing Consolidation of the Statutes of Manitoba (C.C.S.M.).

The PIPP Regulations are Manitoba Regulations (Man. Regs.) 37, 38, 39, 40 and 41 of 1994. These reference materials are available in most public libraries and can be purchased from Statutory Publications, 10th Floor-155 Carlton Street, Winnipeg, MB, R3C 3H8, 204-945-3101.

This guide provides information, not advice or legal interpretations.

This guide describes the coverages and benefits available under PIPP. If any differences arise over interpreting what this guide says and what the law says, the law applies.

Personal Injury Protection Plan | Your Guide

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You need medical treatment and have personal and medical expenses

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How this guide can help you

This is your guide to how PIPP works and what entitlements it provides. Though it will likely answer most of your questions, it may not answer all of them.

That's where our staff can help. They're the most valuable source of information at your disposal. If you need more information about PIPP, call your case manager or our general information line for help.



Section 1

Medical and Personal Expenses

Your Coverage

The Personal Injury Protection Plan (PIPP) reimburses expenses medically required because of the accident.

PIPP also reimburses you for certain personal expenses resulting from the accident, including travel costs associated with medical treatment.

Key points

- PIPP covers medical, personal and travel expenses related to the injury resulting from the accident. These expenses will only be reimbursed after a claim has been filed with us.
- We pay medical practitioners, dentists and other health care providers directly in most cases. The amount covered is set in a fee schedule, established in consultation with the professional organization of the healthcare provider.
- PIPP pays for medical treatment that contributes to your recovery and rehabilitation. It doesn't pay for treatments that have no measurable benefit to you.
- If you use your own car or a family member or friend drives you to medical appointments or treatment, car travel expenses are reimbursed. Please check with your case manager for the rate.
- Depending on your situation, PIPP may also reimburse you for parking, public transportation, or taxi or passenger vehicle for hire costs to attend medical treatment. You'll need pre-approval from your case manager to have these costs reimbursed.
- Include legible copies of your original receipts when submitting a claim for medical and personal expenses. Do not include the original receipts as they cannot be returned.
- Medical treatment unrelated to your injuries sustained in the accident is not covered.

We share a goal: your recovery

You're expected to work toward your recovery and to participate fully in the rehabilitation program that your health care team believes will help you.

In principle, PIPP covers medical treatment expenses for as long as they're necessary. However, costs won't be covered indefinitely when a treatment shows no signs of helping you. At some point, we may ask you to consult another medical practitioner and try a different type of treatment.

Medical expenses

Manitoba Health provides primary health care coverage when you're injured in an accident. When you need additional treatment to fully recover, PIPP extends the health care safety net, paying for medically required treatment by a medical practitioner or prescribed by a physician and not paid for by any government health care program.

PIPP covers care by a dentist, optometrist, chiropractor, physiotherapist, registered psychologist, nurse practitioner, clinical assistant, physician assistant or athletic therapist.

Some treatments are only covered when performed by certain health professionals. For example, PIPP covers acupuncture only when it's done by an accredited:

- medical doctor
- physiotherapist
- chiropractor
- dentist
- nurse practitioner
- athletic therapist

Massage therapy is only covered when done by a physician, chiropractor, nurse practitioner, physiotherapist or athletic therapist.

We must authorize dental treatment before treatment begins, except for emergency dental work just after the accident.

Your case manager can confirm that a specific treatment is covered. If in doubt, please check with us before starting treatment.

Most physiotherapists, chiropractors and athletic therapists bill us directly

Most physiotherapists, chiropractors and athletic therapists bill Manitoba Public Insurance directly for accident-related treatments. This means there is no direct cost to you. PIPP covers these treatments provided they're medically necessary because of your injuries from the accident.

Claiming your expenses

If your claim is in Winnipeg

You'll get forms in the mail or in a meeting with your case manager shortly after reporting your claim by phone. Complete the forms and return them to us with legible copies of the receipts for your expenses.

Once we've received the proper documentation from you, we will mail you a reimbursement cheque for your expenses. The cheque will usually arrive within a week.

If your claim is at a rural Manitoba Public Insurance claims office

Your case manager will ensure you get the forms you need for any related expenses. Your case manager will also help guide you through the process.

Forms are also available at mpi.mb.ca

Recovering from Whiplash Injuries

Although it may take some time, most people fully recover from whiplash.

We cover care from the following providers:

- medical doctor
- nurse practitioner
- chiropractor
- athletic therapist
- physiotherapist

Note: You do not need a referral from your doctor to see a chiropractor, physiotherapist or athletic therapist.

Together with chiropractors, physiotherapists and athletic therapists, we've developed guidelines for treating whiplash. At the start of any treatment, ask your health care provider how these guidelines apply to you.

What to expect if you require treatment

Your health care provider will outline the treatment that is best for you. Generally, improvement should come quickly. If you think you're not improving quickly enough, discuss this with your health care provider.

Medicines and medical supplies

PIPP covers the costs of over-the-counter and prescription medicines and medical supplies – such as bandages, ointments and dressings – that you require because of injuries sustained in the accident.

Medical device expenses

We also cover the costs of purchasing, renting, repairing, replacing, fitting or adjusting devices that are medically required and prescribed because of injuries sustained in the accident. Devices covered include eyeglasses, hearing aids, back supports, special footwear, crutches and artificial limbs.

If the device wears out from normal use, we'll pay for its repair or replacement. However, repair or replacement due to neglect, misuse or willful damage is not covered.

Example *Jason's right leg was severed above the knee in a car accident. PIPP will cover the cost of purchasing an artificial leg and will continue to pay for the repair and replacement of the artificial leg.*

PIPP also covers the cost of repairing, replacing or adjusting a device that you had before the accident and that was damaged or lost in the accident or that no longer meets your needs because of injuries sustained in the accident. This is a one-time replacement coverage.

➔ How do you know if you're recovering properly?

Ask yourself these questions:

- Do I understand my condition?
- Am I feeling better now than I did when I started treatment?
- Have treatment goals and milestones been discussed with me?
- Has my treatment plan changed to reflect my progress?
- Have I stopped taking medicines which I started because of my injury?
- Have self management measures, such as exercise, been discussed with me?

If you answered 'no' to any of these questions, talk with your health care provider to better understand your condition and recovery. Remember, you and your health care provider are on the same team, working towards the same goal: your recovery. Your case manager's role is to make sure you understand and receive the benefits to which you are entitled.

Example *Paula broke her prescription eyeglasses when her head hit the sun visor in a car accident. PIPP will pay the costs of replacing her eyeglasses.*

Original receipts

Please give us legible copies of your original receipts when you claim reimbursement for medical device expenses, medicines and medical supplies. We are unable to return original receipts.

Ambulance services

PIPP pays the costs of transporting you by ambulance from the scene of the accident to the hospital.

We also pay for ambulance services because of injuries sustained in the accident when:

- It's medically necessary to transfer you from one hospital to another. The physician responsible for your treatment orders the ambulance service so that you can receive necessary treatment.
- An emergency arises, requiring urgent transportation either by ground or air ambulance.

Coverage for attending to someone who needs critical care

PIPP covers out-of-pocket expenses for attending to a close relative in hospital who requires critical care because of an automobile injury. A maximum of two people are covered for up to 21 days after the accident.

Expenses are covered up to a set amount.

To be covered, you must be the injured person's:

- parent or guardian
- grandparent
- spouse, common-law partner, fiancé or fiancée
- adult child
- brother or sister

The injured person must be one or more of the following:

- under 16 years old
- in intensive care
- requiring an invasive examination or surgery, both under general anesthesia
- suffering from an unstable or life-threatening injury
- near death

We reimburse out-of-pocket expenses related to:

- authorizing the injured person's treatment
- persuading or influencing the injured person to take treatment
- helping administer treatment
- other medical or compassionate reasons at our discretion

You must prove your expenses and they must be for one or more of the following:

- transportation, parking and tolls
- accommodation and meals
- child care beyond the care you'd normally provide
- ninety per cent of your net income lost, calculated the same way as Income Replacement Indemnity but with no waiting period

PIPP doesn't cover critical care expenses if they're covered by:

- The *Health Services Insurance Act*
- another policy of insurance
- social assistance
- any employment benefits (including sick leave or compassionate leave)
- any other plan or payment

Travel expenses to and from treatment or medical appointments

PIPP covers the costs of travel to and from medical appointments and treatments that are necessary because of injuries sustained in the accident.

We reimburse:

- Travel when you drive your vehicle, or a friend or family member drives you, to a medical appointment. Please check with your case manager for the current vehicle rate.
- Parking costs when you use a private vehicle to go to a medical appointment.
- Public transportation costs.
- Taxi or passenger vehicle for hire costs if you can't drive yourself and public transport isn't available or appropriate. You must receive pre-approval from your case manager in order to be eligible for this reimbursement.
- Travel and accommodation costs for someone to accompany you to medical appointments or treatments if your age or your mental or physical condition prevents you from going alone.



The 100 kilometre rule

You can choose where you want to receive medical care. However, PIPP limits coverage for travel expenses to a medical appointment or treatment to a maximum of 100 kilometres each way when similar care is available closer to your home.

Example *Norma lives in a farming community south of Brandon. She's seeing a chiropractor twice a week for treatment of neck pain resulting from a car accident. Although there's a chiropractor in a town 20 kilometres away, Norma prefers to see a chiropractor in Brandon, which is 110 kilometres away. We'll cover Norma's travel expenses up to a maximum of 200 kilometres (maximum of 100 kilometres each way) per visit.*

Questions and Answers

- Q** *If I send you original copies of my receipts, will they be returned to me at a later date?*
- A** No. We request legible copies of your original receipts because we are unable to return the original receipts. Our record keeping process involves retaining only an electronic copy of your submission. The paper documents are destroyed once the electronic copy is created and will not be returned to you.
- Q** *My husband and I were both injured in a car accident. We're going to a clinic for treatment every Monday morning and we go together in one vehicle. Can we both claim this travel expense?*
- A** No. PIPP reimburses you for the costs you have from injuries sustained in an accident. You and your husband don't have separate travel costs when you go to the clinic together. Only one of you can claim the expense.



Section 2

Income Replacement

Your Coverage

You're entitled to income replacement, beginning on the eighth day after the accident, when:

- A motor vehicle caused the injury.
- The injury prevents you from performing all or most of the main daily duties of the job you had at the time of the accident.

Income replacement covers 90 per cent of your net employment insurance benefits, lost wages or salary based on gross yearly employment income.

Income replacement under PIPP has a maximum limit. You can buy extra coverage from us to increase this limit if needed.

Key points

- Income replacement begins on the eighth day after the accident when injuries continue to prevent you from working.
- Income replacement payments start after we've received income information from your employer or the required business records from you.
- Once income replacement payments begin, a cheque will be mailed or deposited directly into your bank account every 14 days until you're no longer eligible for income replacement. Income replacement stops when there's no medical reason preventing your return to work.
- Income replacement is based on the income you were earning before the accident. Your past income tax returns and employment slips are the best ways to establish your income at the time of the accident.
- Income replacement is 90 per cent of your net income, up to a maximum amount that's adjusted annually.

Income replacement is for people who were working or could have been working

For someone who was working at the time of the accident:

Income replacement begins on the eighth day after the accident.

PIPP provides income replacement to full-time, temporary or part-time earners who cannot continue working because of their injuries.

For someone who could have been working at the time of the accident but wasn't:

Income replacement begins after 180 days.

People who were employable but not employed at the time of the accident become eligible for income replacement for their determined employment 180 days after the accident. However, they are only eligible for income replacement if they still can't work because of injuries sustained in the accident.

If you can prove you would have held employment during the first 180 days following the accident, you will be entitled to income replacement based on the position you would have held. However, there must be sufficient evidence to clearly prove that you would have been employed had you not been injured.

For someone who couldn't work at the time of the accident:

No eligibility for income replacement.

People who had a physical or mental illness that prevented them from working at the time of the accident are not eligible for income replacement.

The law distinguishes between full-time, part-time, temporary and non-earners. It would be unfair to lock in the income replacement paid to people who were employable and could have held full-time work but did not happen to be working when the accident happened.

➔ Where do you fit in?

Minor: someone under 18 years of age at the time of the accident.

Student: someone 18 and over who was attending school full-time at the time of the accident. (*Special rules apply to minors and students. See the details later in this section.*)

Non-earner: someone who was unemployed at the time of the accident but was able to work.

Part-time earner: someone who had a regular, part-time job of less than 28 hours a week at the time of the accident.

Temporary earner: someone who, at the time of the accident, held a regular job of 28 hours a week or more, for less than 12 months before the accident.

Full-time earner: someone who, at the time of the accident, had a regular, full-time job of at least 28 hours per week.

We reassess the employment status of non-earners, part-time earners and temporary earners if they are still unable to work because of the accident 180 days (six months) after it occurred.

Example *Mario worked for 15 years as a shipper in a factory. Four months ago, the factory closed. He was lucky enough to find a new full-time job in a large retail outlet, but for less pay. Last week, Mario lost control of his car and was seriously injured. Mario is a temporary earner because he hasn't worked at his current job for one year. He will receive income replacement based on his salary at his new job for 180 days (six months). If he's still unable to return to work after 180 days, we'll reassess his employment status and base his income replacement on the type of work he was capable of doing at the time of the accident. Income replacement after six months won't be less than the amount he received for the first six months.*

Determining employment 180 days after the accident: for part-time, temporary and non-earners

We determine employment for people who were part-time, temporary or non-earners at the time of the accident and who still can't return to work or unable to work 180 days after the accident because of their injuries. Determining employment means establishing the type of work that you could reasonably have been doing or would have been able to do at the time of the accident. This employment then becomes the basis for income replacement and for your job search.

We determine the type of work you could have been doing or would have been able to do at the time of the accident even if you were actually doing a different type of work.

To do this, we look at your:

- education
- training
- work experience
- physical abilities
- intellectual abilities

Unless you could only work part-time, we'll determine a full-time job for you 180 days after the accident. Your income replacement may go up or stay the same or you may start receiving income replacement, depending on the job we determine for you.

After we determine employment for you, you won't receive less income replacement than you received during the first 180 days after the accident.

Determination of employment is very important for two reasons. First, it may increase the income replacement you receive. Second, it establishes the type of work you're considered qualified to do when your injuries have improved.

We usually require that a health care practitioner assesses your physical abilities after we determine your employment. If this health care practitioner finds that you can successfully do the determined employment, your income replacement stops. If this health care practitioner finds that you can't do the determined employment, you'll receive income replacement based on the salary range for that type of job.

Example *Henry had an office job as a project manager for a mining company. Last summer, he became tired of paperwork, decided he wanted to get out of the office and transferred to a position in the mine. His salary was \$100 less a week. On his way back to town one day, his car was sideswiped by a truck. Henry broke his collarbone and had internal injuries. He was classified as a temporary earner and received income replacement based on his salary as a miner.*

Henry still couldn't return to work 180 days after the accident. We determined employment for Henry as a project coordinator. The doctor said he couldn't return to this type of work at the time so, 180 days after the accident, Henry's income replacement amount was increased to reflect his employment as a project manager. A few months later, Henry was able to return to the office job (his determined employment) and his income replacement ended.

Residual earning capacity

Sometimes, an accident causes injuries that prevent you from returning to exactly the same kind of full-time work you had before the accident. However, in many instances, people are still capable of working at an entirely different type of job. The insurance industry refers to this as "residual earning capacity". This means you can still earn income, although not necessarily in the same kind of job or at the same pay level as before the accident.

We'll determine an employment for you if, two years after the accident:

- you're able to work, full or part-time
- you've recovered as much as you are likely to recover from injuries sustained in the accident
- you've explored viable employment rehabilitation options and can't return to either the kind of work you were doing at the time of the accident or the employment we determined for you 180 days after the accident

We'll use the following criteria to determine the type of employment you're able to do two years or longer after the accident:

- education
- training
- work experience
- physical abilities as they are now (after the accident and recovery)
- intellectual abilities as they are now (after the accident and recovery)
- knowledge or skills acquired during a rehabilitation program, if applicable

The determined employment will be full-time, unless you can only work part-time because of injuries sustained in the accident. It will also be based on employment normally available where you live.

We identify the type of employment that best matches your skills, training and post-accident abilities and capacity. Before we determine employment, a case manager will meet with you to answer your questions. Once we officially inform you, in writing, of the employment determination, you begin the “job search year.”

➔ Finding work

We can help you prepare to find work by providing you with job search counselling and training to improve your interview and resume writing skills. Please understand though, that getting work is mostly up to you.

Job Search Year

During the job search year, income replacement continues as long as you continue to be eligible for the benefit. We will reduce your income replacement by any income you earn during the job search year.

When the job search year is over, there are three possibilities:

1. You have work that pays the same or more than the income replacement you’ve been receiving.

Income replacement will end.

2. You’re working at a job that pays less than the income replacement you’ve been receiving and less than your determined employment.

We’ll reduce the income replacement you’ve been receiving by whichever of these is highest:

- how much your job pays
- how much your determined employment pays

This scenario may leave you with some income replacement benefits to “top up” your income.

3. You have not found work.

Income replacement will be reduced by the income set for your determined employment.

Example *Dale was a high school teacher when he was injured in a car accident. He has been receiving income replacement of \$1,250 every two weeks and has taken courses to retrain as a community counsellor. He finds a job that provides a net income of \$1,000 every two weeks. Dale will continue to receive \$250 of income replacement every two weeks to “top up” his new employment income.*

Example *Marilyn was receiving income replacement of \$1,600 based on the salary she was earning as a real estate agent at the time of the accident. After two years, we determined her employment to be a travel agent because her injuries permanently prevented her from driving a car, essential for a real estate agent, and she had previous experience in the hospitality and travel industry. Marilyn didn’t find work during her job search year. At the end of the job search year, her income replacement was reduced by \$1,500, which was the amount set for her determined employment. Marilyn will continue to receive \$100 of income replacement every two weeks to “top up” her new employment income.*

Income replacement ends when you can return to your old job or work at your determined employment

Income replacement is a substitute for income you would be earning had you not been in the accident and become unable to work. Except for the most serious and disastrous accidents, income replacement is intended to be a temporary measure to compensate for your loss of income while you recover from the effects of the accident.

You're no longer eligible for income replacement when:

- You're able to do the work you were doing at the time of the accident.
- You're able to work at the employment that we determined for you 180 days after the accident.
- You're able to do work that pays as much or more than the amount used to calculate the income replacement paid to you at the start of your claim.

Special rules apply for employed people 65 years of age or over. Please refer to the information on **seniors** later in this section.

Your gradual return to work

Because it may not be possible for you to return to full-time work right away, you can return to work gradually and still receive income replacement based on top up calculations.

Talk to your case manager about your plans for returning to work and about the effect on your income replacement.

A recurrence of a disabling condition caused by the accident

Occasionally, an injury that seems to have healed will flare up again. Income replacement can resume when a disabling condition caused by the accident comes back. This is called a relapse. PIPP provides you with a safety net in this situation.

If you return to work and the injury flares up, it's important to identify the cause. You also need to contact your case manager to explain what has happened so they can get the information required to support your relapse. In most cases, your case manager will determine when a relapse calculation is required. Your income replacement can resume, without a seven-day waiting period, at the same level you were receiving before your return to work.

Steps in calculating income replacement

To calculate your income replacement properly, we need accurate and complete information from you.

Step 1) We classify your employment status

We classify your employment status based on your employment situation at the time of the accident: full-time earner, part-time earner, temporary earner, non-earner, minor, student or someone who couldn't work because of a physical or mental condition. This classification relates to the amount of income replacement you'll receive and will help us reclassify your employment status in certain cases. Those who are ineligible for income replacement won't progress beyond Step 1.

Step 2) We establish your gross yearly employment income

Gross yearly employment income is the total of gross yearly income from salaried employment and self-employment. For the income replacement calculation, we consider all of the employment income that you lost because of injuries sustained in the accident, including Employment Insurance benefits.

2a) Salaried employment

We include all these amounts as income from salaried employment:

- wages or salary, including vacation pay
- overtime
- declared tips
- commissions
- bonuses
- value of the employer's contribution to your pension plan
- cash value of your share of a profit-sharing plan

- other benefits that are part of your employment compensation package. For example:
 - employer contributions to a health plan
 - housing provided by your employer
 - remote location bonuses

Remember, PIPP replaces income that you lost because of injuries you sustained in the accident. For example, if your company continues to pay into your pension plan while you're off work, you won't receive income replacement for that portion of your income.

2b) To establish your salaried employment income

We need a completed Employer's Verification of Earnings form to pay you income replacement. Please ask your employer to complete the form and return it to us as quickly as possible. Your case manager can help you if you're having trouble getting the necessary employment income information.

We may also ask you for other documents to verify your employment income, especially if your employer fails to return a properly completed Employer's Verification of Earnings form to us.

2c) Self-employment

Self-employed people work for themselves, not for someone else. Independent contractors, sole proprietors, unincorporated farmers and members of unincorporated partnerships are all self-employed.

Because self-employment income can vary greatly from year to year, the gross yearly employment income of a self-employed person is determined by whichever of these amounts is the highest:

- your most recent business year
- your most recent fiscal year
- an average of your income from two or three business years

- the pro-rated, average gross income for your class of employment based on Schedule C.

2d) To establish your self-employment income

- For businesses that are only a few months old, a statement listing income sources may be sufficient to establish your self-employment income.
- For businesses that have been operating for more than a few months, we need to see income tax returns, financial statements or tax assessments.

2e) Canadian-Controlled Private Corporation (CCPC)

People who work for their own incorporated companies are not self-employed. They are considered employees of their privately owned company and a shareholder of the company.

The gross yearly employment income is determined by whichever of these amounts is the highest:

- your most recent business year plus any employment income received from the corporation, reported on personal tax return.
- the pro-rated, average gross income for your class of employment based on Schedule C.

2e.1) To establish your CCPC income

For businesses that are only a few months old, documents confirming active business may be sufficient to establish your income.

For businesses that have been operating at least one year, we need to see income tax returns, financial statements or tax assessments.

2f) Other considerations

There are many details concerning the way we calculate gross yearly employment income that we can't describe here. However, your case manager can explain how we factor in things such as shift premiums, periodic overtime, seasonal fluctuations in income, and vacation time when establishing gross yearly employment income. The key is to make sure that we have all of the information we need in order to do the calculation.

Step 3) We calculate your net income

Net income approximates your actual "take home" pay before the accident. Your net income is calculated from your taxable income.

Here are the deductions from gross yearly employment income that establish taxable income.

Some of these may not apply to you:

- the basic personal credit
- the age credit (for people over 65)
- the married person's credit (regardless of your spouse's income)
- the equivalent to married credit (when you have a dependant and no spouse)
- the dependant's credit (regardless of the dependant's income)
- Employment insurance premiums
- Canada Pension Plan contributions

A case manager will complete a worksheet with information on your age, marital status, number of dependants and other tax information. We follow the income tax rules that applied during the year prior to the year in which we are making the calculations.

Step 4) We calculate income replacement

Income replacement is 90 per cent of net income (the amount calculated in Step 3).

This amount will be paid to you every two weeks, until:

- you return to work
- your income replacement is adjusted for reasons discussed in other parts of this guide
- you're eligible for a Retirement Income Benefit
- you're no longer eligible for income replacement

However, there are certain situations in which amounts you're paid from other programs will be subtracted from your income replacement.

For example, if you receive a disability benefit from the Canada Pension Plan because of the accident, your income replacement will be reduced accordingly.

Maximum amount of gross yearly employment income for PIPP calculations

We'll never use an amount higher than the maximum insurable Gross Yearly Employment Income amount when calculating your income replacement (unless you purchased an extension insurance prior to the accident).

You'll find this year's maximum on the sheet at the back of this guide.

Example *Ben is a highly skilled heavy equipment operator who regularly works overtime. For the last three years, his income has been over \$110,000 a year. In April 2017, Ben was hit by a car. He was off work for four months. During this time, he received income replacement based on a yearly income of \$94,500, the maximum coverage in 2017.*

Workers Compensation payments

Employees covered by Workers Compensation are entitled to Workers Compensation benefits for lost income if they can't work because of a job-related injury. If the job-related injury happened in a motor vehicle accident in Manitoba, the employee also qualifies for income replacement coverage and other benefits under PIPP. Employees, therefore, can choose between collecting benefits under the Workers Compensation Plan or PIPP.

Benefits under Workers Compensation and PIPP are not identical. It's in your interests to contact both the Workers Compensation Board (WCB) and Manitoba Public Insurance to get information about the coverage to which you are entitled. You can then make a decision about which plan to receive benefits from.

The telephone number for the WCB is at the end of this guide.

Minors: children under the age of 18

PIPP pays a minor:

- A lump sum indemnity for each school year the minor doesn't complete because of injuries sustained in the accident.
- Income replacement for any income the minor would have been earning but can't earn because of the injuries from the accident.

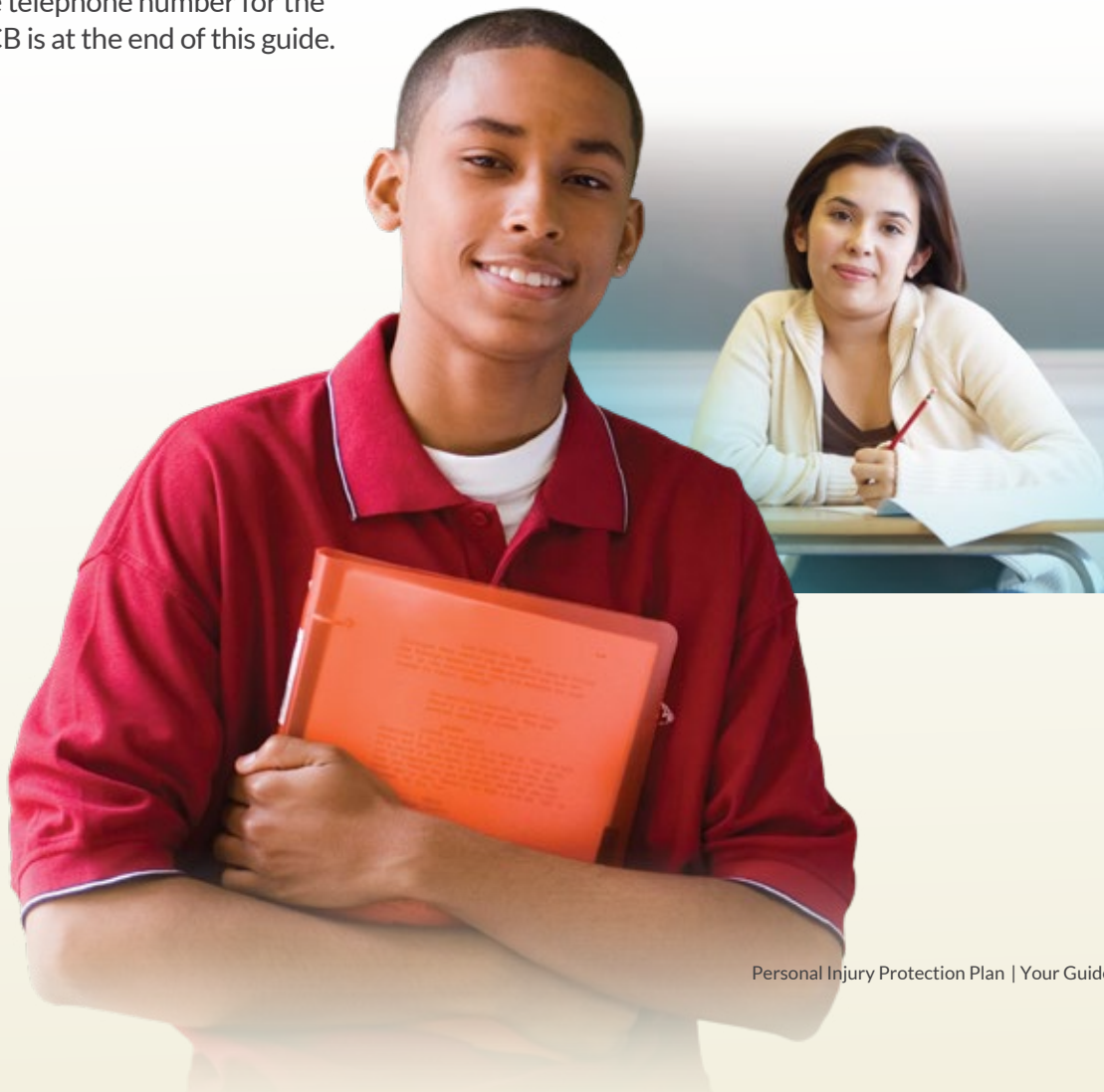
PIPP definitions:

Minor: Child under the age of 18

Elementary school: Kindergarten to Grade 8

Secondary school: Grade 9 to Grade 12

A school year begins: For the purposes of calculations under PIPP, a school year begins on July 1 and ends on June 30.



A lump sum indemnity is only payable when a minor would have completed the school year if not for the accident. The indemnity becomes payable on July 1 for the loss of the preceding school year. The indemnity amounts for this year are on the sheet at the back of this guide.

Example *Josh is 15 and in Grade 10. He also works in a fast-food restaurant on Friday nights and weekends. He's injured in a car accident in August and misses the whole year of school and has to quit his job while he recovers from his injuries and works at his rehabilitation.*

Josh will receive income replacement to cover the lost income from his part-time restaurant job and a lump sum payment (See PIPP Benefits Chart for the amount) for his missed year of schooling.

Entitlement to a lump sum indemnity stops at the end of the school year in which the minor turned 18. If a minor reaches 18 and is still unable to work and begin or resume their studies because of injuries sustained in the accident, income replacement begins based on the Industrial Average Wage for Manitoba. The Industrial Average Wage is set using Statistics Canada data for the earnings of all employees in Manitoba.

This year's Industrial Average Wage for Manitoba is on the PIPP Benefits Chart. Income replacement continues according to the eligibility criteria described in this section.

We may also determine employment for minors who are able to work.

Students

PIPP pays a student:

- A lump sum indemnity for each school term the student doesn't complete because of injuries sustained in the accident.
- Income replacement for any income the student would have been earning but is unable to because of injuries sustained in the accident.

Under PIPP, a student must be at least 18 and enrolled full-time in a secondary or post-secondary school at the time of the accident.

PIPP provides a lump sum indemnity to students for each term not completed because of injuries sustained in an accident.

Students (18 or older) who miss a full year of secondary school or post-secondary school because of injuries sustained in the accident receive a maximum lump sum indemnity. This year's amount is on the PIPP Benefits Chart.

If the student misses one term of school, the lump sum is pro-rated. For example, if there are three terms in the student's secondary school year and the student misses one term, PIPP will pay the student one-third of the lump sum indemnity.

When the student loses a full school year, the lump sum indemnity becomes payable on July 1, following the lost school year. When the student loses a term or semester of the school year, the lump sum indemnity is paid at the beginning of the next term or semester.

These lump sum payments continue until the scheduled end date for the student's current level of studies. For example, the end date would be the end of high school if the student was in high school. If the student was in college or university, the end date would be the completion of a degree. If the student is still unable to work or return to studies once the end date is reached, PIPP pays income replacement based on the Industrial Average Wage. This income replacement will continue for as long as the claimant meets the eligibility criteria.

We may also determine employment for students who are able to work.

People 65 and older

This applies to people in one of these three categories:

- Someone 65 years of age or over who is not employed at the time of a car accident.
- Someone 65 years of age or over who is employed at the time of a car accident.
- Someone being paid income replacement who subsequently turns 65.

People 65 years of age or over who are not employed at the time of an accident are not eligible for income replacement or the Retirement Income Benefit unless they can establish reasonable expectation of employment (for example, a written job offers, history of seasonal, casual or temporary work), they may be deemed a non-earner and may be entitled to IRI and 180 day determination.

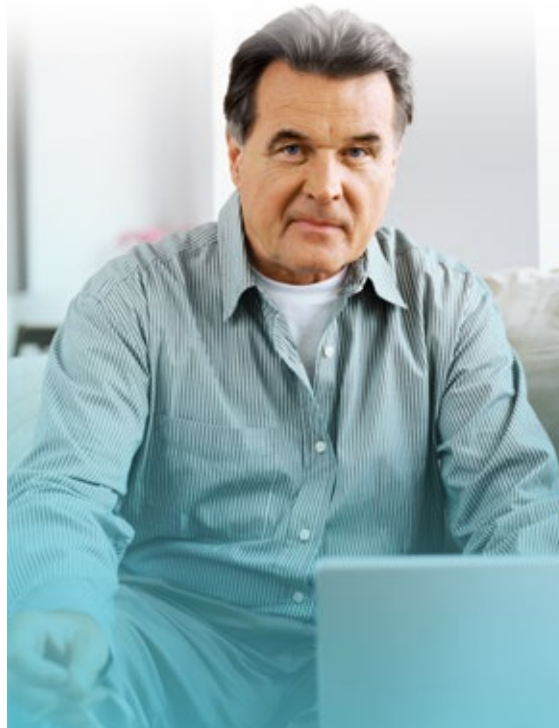
Example *Walter is a 66-year-old retired factory worker. He's in a car accident and has injuries affecting his ability to sit or stand for long periods of time. Walter doesn't qualify for income replacement or the Retirement Income Benefit because he's over 65 and wasn't working at the time of the accident. There's no income to replace. Walter will receive the other PIPP benefits to which he's entitled. However, if after retirement, Walter has a history of working a seasonal job at a garden centre, Walter may be eligible for Income Replacement Indemnity.*

People 65 years of age or over who are employed at the time of an accident are entitled to income replacement if injuries sustained prevent them from working. We calculate the income replacement for an employed person who's over 65 in the same way as for other claimants. On the first June 30 five years after the date of the accident, if the person still can't work because of injuries sustained in the accident, their entitlement to income replacement ends and they become eligible to apply for the Retirement Income Benefit.

Example *Martha is 67 and still working as a secretary in a lawyer's office, a job she's had for 35 years. She's in a car accident in May 2012. Her injuries include a serious brain injury that will prevent her from ever returning to work. Martha will receive income replacement based on her salary until June 30, 2017 (on the first June 30 five years after the accident). Then, as of July 1, 2017, she'll be eligible for the Retirement Income Benefit.*

For claimants 65 years or older, who are employed at the time of an accident, income replacement ends when:

- the claimant is no longer disabled
- the claimant has received income replacement to the first June 30 five years after the accident



If a person became eligible for income replacement before they turned 60, income replacement ends when they can return to work or turn 65. In this situation, someone receiving income replacement at the age of 65 will have their entitlement to income replacement end on the first June 30 after they turn 65 and become eligible for the Retirement Income Benefit.

If a person became eligible for income replacement after they turned 60, income replacement continues until the first June 30 five years after the accident, assuming they continue to be unable to return to work because of injuries sustained in the accident. At that point, the person will be eligible for the Retirement Income Benefit.

The Retirement Income Benefit

The Retirement Income Benefit took effect on March 1, 1999. It's meant to provide a retirement income, for life, for people who have an ongoing disability because of injuries sustained in an accident and can't save adequately for their retirement years.

To receive the Retirement Income Benefit, you first need to complete an application. The information you give us on your application will help us confirm if you qualify.

The Retirement Income Benefit is based on 70 per cent of your net income minus any other pension income you receive, including Canada Pension Plan and Old Age Security payments. If your pension income is more than 70 per cent of the net income used in our calculation, you won't receive the Retirement Income Benefit unless they can establish reasonable expectation of employment (for example, a written job offers, history of seasonal, casual or temporary work), they may be deemed a non-earner and may be entitled to IRI and 180 day determination.

The Retirement Income Benefit is adjusted on each anniversary after you became entitled to it, according to the Consumer Price Index.

People who receive the Retirement Income Benefit must:

- Inform us of any changes in their pension income.
- Provide us with a certified copy of their income tax return every year.

People who are receiving income replacement become eligible to receive the Retirement Income Benefit on the first July 1 following the latter of:

- The day the claimant reaches their 65th birthday.
- The day that is five years after the day on which their entitlement to receive income replacement commenced.

For example, a person who began receiving income replacement at age 63 will continue to be eligible for a period until the first June 30 five years after the accident. If their entitlement to income replacement continues until the 5th anniversary, that entitlement will then end and they will become eligible for the Retirement Income Benefit on the first July 1 five years after the accident.

A person whose income replacement entitlement ends prior to the date they become eligible for the Retirement Income Benefit will not receive it.

Criminal Code convictions and income replacement

In general, PIPP covers injuries from an accident no matter who caused it or how it happened. But if the person is convicted of certain Criminal Code offences related to the accident, all benefits for that individual will be terminated.

This applies to individuals who, under the Canadian Criminal Code, are convicted of:

- auto theft
- flight from a peace officer
- theft where the property stolen is a motor vehicle
- taking a motor vehicle without consent

In all of the above instances, both the driver and the passengers who are convicted for such offences would have their benefits terminated.

There are other Criminal Code offences for which income replacement will be reduced for the first 12 months following the accident.

This applies to individuals who, under the Canadian Criminal Code, are convicted of:

- cause death by criminal negligence
- cause bodily harm by criminal negligence
- manslaughter
- dangerous operation
- operation while impaired
- impairment offence – bodily harm or death
- failure or refusal to comply with demand
- failure to stop after accident

In these cases, two factors will affect how much less the income replacement will be:

- fault
- number of dependents

If a person is convicted in the United States for a crime related to the accident, it will have the same impact on income replacement as if the offence occurred in Canada.

No income replacement will be paid to a person who is in prison.

To speed up your claim

Here are some things you can do to speed up your claim for income replacement:

- Make sure we have all the information we need about your employment income at the time of the accident.
- Provide our requests for information as quickly as you can. We can't begin regular income replacement payments until we have all the required documents.

Questions and Answers

- Q** *Why don't I receive income replacement for the first seven days I missed work after the accident?*
- A** The seven-day waiting period is similar to a deductible in other insurance policies — you share a small part of the loss. However, if you're off work for more than a week, you're covered for the more substantial loss. This protects seriously injured people who need income replacement long-term and keeps the overall cost of coverage down.
- Q** *I was collecting Employment Insurance at the time of my accident. My injuries are serious enough to prevent me from looking for work at this time so I'm no longer eligible for Employment Insurance. Do I qualify for income replacement?*
- A** Yes. Income replacement will replace 90 per cent of the net benefit you were receiving from Employment Insurance for the first 180 days. At that point, if the disability persists, we will do a 180 day determination to reassess your situation.
- Q** *I have been collecting income replacement since March 2005. I turned 65 in April of this year. Am I eligible for the Retirement Income Benefit?*
- A** Yes. You were receiving income replacement when the Retirement Income Benefit came into effect so you are eligible for it. Contact your case manager.
- Q** *My car flipped over on an icy road and I was in the hospital for two months, then in rehab for six months. I'm now able to return to work. When I contacted my employer, I was told that my full-time job had been taken by someone else and that there was no work for me. Can I still get income replacement?*
- A** Yes. Income replacement continues temporarily for full-time or part-time earners and temporary earners who have lost a job because of the accident. Ordinarily, income replacement would end as soon as you were able to return to work at your old job. However, income replacement, following the loss of your job, will continue as follows:
- For 30 days, if you were eligible for income replacement for 90 to 180 days.
 - For 90 days, if you were eligible for income replacement for 181 to 365 days.
 - For 180 days, if you were eligible for income replacement for more than one year but less than two years.
 - For one year, if you were eligible for income replacement for more than two years.
- Q** *I have been doing the bookkeeping for my husband's greenhouse business for the last five years. I don't get paid. Last week, I was in a car accident and my injuries are preventing me from doing the bookkeeping work at this time. Are the costs of hiring someone to do this work until I'm able to do it again covered?*
- A** Yes. PIPP covers the cost of hiring someone else to do your work in this situation, up to a maximum weekly amount. Please refer to the PIPP Benefits Chart (under Hired Help for a family business). The coverage can continue for 180 days while you're unable to do the bookkeeping because of injuries sustained in the accident. After 180 days, the compensation will end, even if you still can't do the work. However, if you're still disabled at that time, you'll be entitled to income replacement based on a determined employment.

Section 3

Caregiver Expenses

Your Coverage

PIPP covers people injured in accidents who, at the time of the accident, were caring for children under the age of 16 or adults who can't work. There are two different types of coverage: Caregiver Weekly Indemnity and Reimbursement of Expenses for Care of Other Person.

Key points

Caregiver Weekly Indemnity

For full-time caregivers:

- The weekly amount depends on how many children under the age of 16 and adults who can't work that you were caring for at the time of the accident. The indemnity will be adjusted when circumstances change, such as when a 15-year-old turns 16 or you were able to resume care.
- If, at 180 days after the accident, your injuries continue to prevent you from caring for children under the age of 16 and adults who can't work, you have a choice. You can receive income replacement based on your determined employment, or you can continue to receive the Caregiver Weekly Indemnity. After 180 days, you cannot receive both income replacement and the Caregiver Weekly Indemnity. Your case manager will explain this choice to you. Also, see Section 2: Income Replacement of this guide for more information on determining employment.

Reimbursement of Expenses for Care of Other Person

For part-time caregivers:

- An actual expense must be incurred, and receipts are required for reimbursement.
- Expenses will not be reimbursed when you have a spouse that can provide the care.

Caregiver Weekly Indemnity

This applies to Full-time caregivers

You're eligible for a Caregiver Weekly Indemnity when:

- You were unemployed or working part-time (less than 28 hours a week)
- Your main job before the accident was caring for a child or children under the age of 16 or an adult who couldn't hold employment because of poor physical or mental health
- Your injuries rendered you entirely or substantially (50% or more) unable to provide care

Talk to your case manager if this situation applies to you. An assessment will be required to determine if you qualify (you score 50% or more).

Coverage for Caregiver Weekly Indemnity

Coverage for caregiver weekly indemnity helps pay for the hiring of someone to take over your caregiving duties when the injuries you sustained in the accident entirely or substantially prevent you from performing them. The expenses must be related to the injuries sustained in the accident and not routine expenses you were paying before the accident.

Maximum weekly amount of caregiver weekly indemnity

We reimburse the actual caregiving expenses you have up to a weekly maximum. Please refer to the sheet at the back of this guide under Caregiver Weekly Indemnity for the maximum amounts payable this year.

Example *At the time of the car accident, Martine was a full-time mother, taking care of her three children, all of whom were under the age of five. She broke her leg and wrist in the accident and couldn't clothe, feed, bathe or supervise her children for four months. Martine received the maximum amount of Caregiver Weekly Indemnity for \$542 (2017 maximum) so she could hire someone to care for her children during the four months it took for the injuries to heal and for her to again be able to care for her children unassisted.*

Reimbursement of Expenses for Care of Other Person

This applies to part-time caregivers

You're eligible for Reimbursement of Expenses for Care of Other Person when:

- At the time of the accident, part of your daily activities — not necessarily your main occupation — involved caring for a child under the age of 16 or an adult who can't work
- You were either:
 - working full-time
 - working at a temporary job
 - working more than 28 hours a week at a part-time job
 - a student
 - were receiving Income Replacement Indemnity based on determined employment 180 days after the accident
- You can no longer continue to provide this care because of your injuries, OR you were required to attend rehabilitation, OR you require an escort to your medical appointment and your escort incurred this expense

Talk to your case manager if this situation applies to you prior to incurring the cost to determine if the expense qualifies for reimbursement.



Example *Martin is a computer programmer who, at the time of the car accident, was working four days a week and staying at home to care for his three-year-old son, Trevor, one day a week. During the four days Martin worked, Trevor was in day care. Martin's wife, Becky, works five days a week.*

Because of the accident, Martin can't work or care for Trevor. PIPP will pay the expense of having Trevor in day care one extra day a week until Martin can care for his son again.

In addition, one night a week, Becky takes a management-training course at the local community college. On that night, Martin needs help bathing Trevor and putting him to bed. We'll cover the costs of having someone care for Trevor, provided the total caregiving costs are below the weekly maximum allowed. We cover this cost because Becky can't care for Trevor when she's in school. If Becky were to go out in the evening for social reasons, we wouldn't pay the cost of caregiver help for that night.

Coverage for care of other person expenses

Coverage for care of other person expenses helps pay for the hiring of someone to take over your caregiving duties. The expenses incurred must be related to the motor vehicle accident and not routine expenses you were paying before the accident. You're only eligible for the coverage if you don't have a spouse or if your spouse can't take over your caregiving duties because of work, studies, disability or illness.

Maximum weekly amount of care of other person expenses

We reimburse the actual caregiving expenses you have up to a weekly maximum. Please refer to the sheet at the back of this guide under Care expense reimbursement for the maximum amounts payable this year.

Speeding up your claim

We need legible copies of your receipts to reimburse you for caregiving expenses. Make sure they are dated and identify the care provided and the person or company who provided it.

Please remember to send us legible copies and not the original receipts which, if submitted, will not be returned.

Example *At the time of the car accident in which he injured his back, Stephan worked full-time and took care of his father, who lived with him. Stephan's father uses a wheelchair and needs help getting in and out of bed. While Stephan's back healed, he had to hire someone to help his father in the morning and in the evening. Stephan provided legible copies of the receipts to his case manager in the amount of \$150 but can only get reimbursement up to the maximum amount of \$115 (2017 maximum).*

Children under 16

The Caregiver Weekly Indemnity and the Reimbursement of Expenses for Care of Other Person are available when you can't care for a child under 16 years of age because of injuries sustained in the accident. When a child turns 16, coverage relating to that child ends, unless they require care because of a mental or physical disability.

Adults who can't work

The Caregiver Weekly Indemnity and the Reimbursement of Expenses for Care of Other Person are available if you can't care for a person over 16 years of age who is regularly unable to work for whatever reason— such as a mental or physical disability — when you were already caring for that person at the time of the accident. We consider the answers to the following questions to determine if an adult is unemployable and relies on your care:

- Is the person unable to hold employment?
- What type of care were you providing to this person?
- How do the injuries sustained in the accident prevent you from providing this care?

Example *Laura's mother has Alzheimer's disease and has been living with Laura for the past year. Laura is able to hold employment outside the home but chooses to provide care for her mother instead. She has been preparing meals for her mother and going with her whenever she needs to leave the house for fresh air or appointments. Laura was injured in a car accident and now can't care for her mother because of the injuries. Laura is eligible for the Caregiver Weekly Indemnity.*

Questions and Answers

- Q** *Before my accident, I was working night shifts and was home for my seven-year-old son after school. While I'm in the hospital and in rehabilitation, there's no one at home to care for him and he has to stay at the school's after-school program until his dad picks him up. Will you pay for this after-school care?*
- A** Yes. We'll reimburse you the costs of after-school care for your son. However, there's a weekly maximum amount for this type of caregiver expense.
- Q** *At the time of my accident, I was working 10 hours a week at a fast-food restaurant and taking care of my 18-month-old daughter the rest of the time. Because of injuries I sustained in the accident, I'm entirely or substantially (50% or more) unable to provide care to my daughter and am unable to work for three months. Will I get both income replacement and the Caregiver Weekly Indemnity?*
- A** You are eligible for both the Caregiver Weekly Indemnity and income replacement, which will be calculated based on your part-time gross yearly employment income for the first 180 days.

Section 4

Personal Care Assistance

Your Coverage

PIPP covers the expense of hiring someone to care for you when injuries sustained in the accident prevent you from caring for yourself. The level of coverage depends on the extent of your disability.

Key points

- PIPP reimburses you, up to a monthly limit, for personal care assistance when:
 - You can't care for yourself. This includes things like bathing and eating.
 - You can't do the essential tasks of daily life by yourself. This includes preparing meals, housekeeping and shopping. This coverage is only available for personal needs and daily living tasks that **you were doing yourself** before the accident.
- Whether you qualify for Personal Care Assistance depends on what you can and can't do for yourself. To qualify, your need for assistance must reach a minimum level. Your case manager will arrange to have your needs assessed.
- Coverage, up to a maximum amount, depends on how much assistance you need.
- You can hire whomever you want to help you. We will reimburse you once we have approved the expenses and you have provided a legible copy of a receipt with details about the service and the person who performed it. PIPP reimburses you based on your actual expenses for the care provided.
- Usually, your ability to care for yourself and your daily needs will improve as you recover. We re-evaluate personal care assistance needs at regular intervals.

Your need for personal care assistance

Coverage depends on how many of your regular activities you're now prevented from doing. These activities include:

- getting into and out of bed
- dressing and undressing
- eating
- washing
- using the toilet
- using facilities in your home and community, such as the telephone, television and local library
- preparing breakfast, lunch and dinner and clean up afterwards
- light housekeeping, such as dusting
- heavy housekeeping, such as washing floors, vacuuming, cleaning the fridge and stove
- doing laundry
- shopping for food, household supplies and other necessities

If someone else was doing a task for you before the accident, you're not eligible for assistance with the task after the accident.



Payment of personal care assistance expenses

To calculate your maximum entitlement to personal care assistance, we assess your personal care needs. The greater your needs are, the greater your entitlement is, up to the monthly maximum.

Your case manager will meet with you to talk about your need for personal care assistance and the coverage available to you. We'll also send you a letter stating the maximum amount we'll reimburse for your personal care expenses each month. The full amount is only available to someone who is seriously disabled and was completely self-sufficient before the accident.

We can pay the service provider directly

If you prefer, we can pay the person or company assisting you directly.

You choose who assists you

You can choose who helps you with your personal care and daily living needs. You can pay family members, friends and neighbours to help you, or you can hire a professional.

We review all claims to make sure the expense is reasonable, the time required to perform the service is realistic and the amount paid for the service is within the normal range for similar services.

Keep in mind that you employ the person or company who assists you. Manitoba Public Insurance isn't responsible for their work in any way.

Speeding up your claim

We can reimburse you for personal care assistance expenses more quickly when the documents you submit are complete, including all the necessary information about the service provider — who, what, when and how much.



Questions and Answers

Q *My personal care assistance entitlement was calculated at \$1,436.85 last year. I actually only spend \$1,000 a month to have someone help me with some of the things I can't do myself. When the maximum amount available for personal assistance expenses is adjusted to reflect increases in the cost of living on April 1 this year, will I get more money?*

A No. We reimburse you for your actual expenses, so the readjustment of the maximum amount of eligible expenses won't change the amount you're reimbursed.

Q *I've been submitting receipts for personal care assistance expenses for three months since the accident. My case manager phoned to arrange an appointment with me. She said that an occupational therapist would be with her. What's this all about?*

A We ask an occupational therapist or other health care specialist to reassess your needs regularly. In most cases, injuries heal after a few weeks or months and, over time, you can probably take on more personal tasks. You can't be reimbursed for personal expenses when you no longer need someone to help you.

Section 5

Impairment

Your Coverage

You're entitled to a lump sum payment when, because of a motor vehicle accident, you permanently lose normal physical or mental function or are permanently scarred or disfigured.

Key points

- An impairment is defined as permanent damage to a part of your body. Examples of impairment include scarring, facial disfigurement, loss of mobility in a limb, amputation of a part of the body and removal of an organ.
- The law describes different types of impairments and assigns a percentage value to them. The most serious and disabling impairments are assigned the highest percentages.
- We assign your permanent impairment a percentage of up to 100 per cent. That percentage is your portion of the maximum indemnity payable at the time of accident. For example, if your permanent impairment is 50 per cent, we pay you half the maximum indemnity.
- The lump sum impairment payment is made after treatment has been completed, the injury has healed as much as possible and the extent of the impairment can be properly assessed. This may take a year or more, depending on the injury.

Permanent impairments

PIPP provides a one-time payment when the accident caused impairment that will last throughout your lifetime. “Impairment” means you’ve lost a normal physical or mental function or that you’re scarred or disfigured from the injuries sustained in the accident.

Here are a few examples of permanent impairments:

- permanent scarring from burns
- loss of hearing
- disfiguring facial injuries
- amputation of a finger
- removal of a kidney
- permanent paralysis
- brain damage causing permanent short-term memory loss

Whiplash is not a permanent impairment

Soft tissue injuries which will eventually heal do not result in a payment as there has not been a permanent loss of function that will last for the duration of your life. The permanent impairment payment depends on the extent of your impairment. The type of work you did before the accident or your need for help with personal care after the accident doesn’t affect the permanent impairment payment. However, these factors could affect other benefits you receive under PIPP, such as income replacement and personal care assistance expenses.

Example *Bob is a carpenter who earns \$30,000 a year and Pete is a store manager who earns \$45,000 a year. They’re in a motorcycle accident and both of them lose the use of their right arms as a result. Bob and Pete will receive exactly the same permanent impairment payment.*

Types of impairments

We have a long list of different types of impairments, including everything from the loss of part of a finger to the loss of body movement from a spinal cord injury.

We base the amount of the permanent impairment payment on the per cent that the list assigns to the impairment. For example, the amputation of an index finger is listed at eight per cent. If the accident didn’t cause you any other impairments and you didn’t have any pre-accident impairments, that’s the figure we’ll use to calculate the impairment payment.

If your impairment isn’t specifically listed, we’ll use the listed impairments as a guideline.

Your case manager will consult with your doctor and the Manitoba Public Insurance medical services team to establish the type and degree of impairment resulting from the accident.





Multiple impairments and impairments from before the accident

If you have more than one impairment from the accident, we will factor together the percentages for the different impairments to establish the amount of the payment. This is more complicated than simply adding the percentages together.

Example *George was in a serious car accident. His injuries healed within a few months but he has permanent deep scars on his left leg and loss of mobility in his left shoulder. He also has a permanent scar above his left eye. We take the per cent for each impairment and then determine the adjusted per cent to use to establish the permanent impairment payment.*

When you had a pre-existing impairment before the accident, an additional impairment might have more serious consequences for you. We take this into account when calculating the permanent impairment payment.

Example *Anne broke her right ankle in a workplace accident, resulting in a permanent loss of mobility in that ankle. A year later, she suffered serious damage to her left knee in a car accident, resulting in permanent impairment to her knee. Anne will receive an enhanced permanent impairment payment to compensate her fairly for the impact of the accident on her mobility.*

The amount of the permanent impairment payment

The formula for calculating the permanent impairment payment is set out by Manitoba Legislation. We multiply the per cent for the impairment by the maximum lump sum amount for the year in which the accident occurred. The maximum amount is adjusted by the Consumer Price Index on March 1 each year.

Please refer to the sheet at the back of this guide for the lump sum payment amounts that apply this year.

Example *Paul broke his baby toe when the bicycle he was riding was clipped by a truck on March 31, 2017. As a result, he can no longer bend his toe. This impairment is set at .25 per cent, which when multiplied by \$154,261 (2017 maximum) equals \$385. Paul will receive \$770, the minimum permanent impairment payment (2017).*

Timing of the permanent impairment payment

In most cases, we must wait until your injuries have had a chance to heal so that your doctor can assess the exact extent of the permanent impairment. Depending on the injury, it can take a year or more to establish the extent of the impairment and therefore the amount of the permanent impairment payment.

If a person survives 90 days beyond the date of the accident and then dies as a result of injuries sustained in the accident, there are payments for the impairment and also for the death. Please refer to the Fatality Claim Guide for additional details.

Speeding up your claim

Please speak to your case manager if your doctor tells you that you'll have a permanent impairment from injuries sustained in the accident. Your case manager will tell you what documents Manitoba Public Insurance needs in order to process your claim. In some cases, we may ask you for photographs of your scars along with a doctor's report.

Criminal Code convictions and impairments

If you are convicted of certain Criminal Code offences, you'll lose all of your impairment payment. For some other Criminal Code offences, you may lose all or part of your impairment payment based on your degree of accident responsibility. For more information, please see page 17 of this guide.

Questions and Answers

- Q** *I was in a car accident and my face was badly cut. My doctor is recommending plastic surgery. How will this affect my permanent impairment indemnity?*
- A** The permanent impairment payment is made after treatment for the injuries has been completed and there's been adequate time for healing. We'll assess the permanent impairment when treatment is complete. The decision to have plastic surgery is yours, with the advice of your doctor. It is important to contact your case manager prior to your surgery so they can discuss the process and the information they need as well as how this may affect your permanent impairment.
- Q** *I lost three of my permanent teeth when my bicycle was hit by a car. Is that a permanent impairment?*
- A** Yes. Losing permanent teeth in an accident is a permanent impairment. There's a percent value assigned according to the tooth's location in the mouth and its state of health before the accident — healthy or already in poor condition.
- Q** *I have a whiplash injury from a car accident and have been off work for several weeks because of the pain and discomfort. Will I receive a permanent impairment payment?*
- A** No. The permanent impairment payment is paid when there is lasting, measurable damage to a part of your body. Whiplash injuries are soft-tissue injuries and are not covered.

Section 6

Rehabilitation

Your Coverage

PIPP aims to help you get back to your normal activities as soon as possible after the accident. If your injuries are too severe to do so, PIPP helps you find alternatives.

Key points

- Our goal is to help you resume your normal pre-accident activities as much as possible. To assist your recovery and offset economic hardship, we provide compensation for treatment costs and a range of economic losses.
- Rehabilitation coverage includes, where appropriate:
 - home renovations
 - transportation assistance and vehicle modifications
 - services such as assessments and treatment by specialized health care practitioners
 - equipment such as specialized kitchen aids
- The type of rehabilitation assistance you receive depends on many factors, including your medical condition, employment options, retraining possibilities and progress towards recovery.
- If you can't return to your pre-accident job, we'll help you identify other employment options. Again, the kind of help we'll provide depends on the circumstances. The options include job search assistance, on-the-job training or other training.
- The medical/rehabilitation team recommends appropriate rehabilitation strategies in a Rehabilitation Plan. The team includes you, your health care practitioner and your case manager. Manitoba Public Insurance makes decisions about rehabilitation funding.

Rehabilitation – getting to where you want to be

As your insurer, our goal is helping you return to the situation you were in before the accident. Sometimes, this goal is easily met within a few weeks. Sometimes, it takes longer. In the most serious cases, it's not possible for you to be exactly as you were before the accident. Rehabilitation coverage provides you with various types of support to assist your recovery and return to normal activities, to the greatest extent possible.

Rehabilitation coverage is flexible and depends on each claimant's personal situation and needs. Unlike other parts of PIPP coverage where the entitlement to a benefit or indemnity is precisely set in the law, rehabilitation expenses are considered extraordinary expenses that depend on individual circumstances.

We ask the following types of questions when deciding on coverage for a rehabilitation expense:

- Is this rehabilitation strategy necessary for this person?
- Is it advisable?
- Is this rehabilitation strategy likely to help this person lead a more independent and productive life?

We look at the Rehabilitation Plan and the recommendations of the medical/rehabilitation team when making our decision.



The role of the medical/rehabilitation team

The composition of your medical/rehabilitation team depends on the type of injuries you have and the type of treatment you're receiving. Your medical/rehabilitation team usually includes the health care practitioners who are working most closely with you, such as your doctor, chiropractor, physiotherapist, occupational therapist, rehabilitation counselor and nurse practitioner, as well as your case manager, other Manitoba Public Insurance employees, members of your family and yourself.

You are the most important person on the medical/rehabilitation team. It's your commitment to recovery and to your Rehabilitation Plan that will be a deciding factor in whether or not a rehabilitation expense seems necessary and advisable.

The medical/rehabilitation team prepares a Rehabilitation Plan and recommends strategies that it believes will facilitate your independence and employment. Manitoba Public Insurance employees make the final decision on rehabilitation funding.

Employment and training support

PIPP coverage helps you get back to work. The financial help available depends on the type of injuries sustained in the accident and your post-accident skills and abilities.

The goal, if possible, is for you to return to the same employer to do the same work you were doing before the accident. If returning to your previous employment is not possible and you don't have the skills for other employment that will recapture your lost income, we can help retrain you. For example, we might provide vocational counselling or training courses. We can also assist you with resume writing and your job search.

Example *Ray was injured in a car accident and, as a result, was unable to properly unload his vehicle at work. PIPP paid for a specialized power-operated lift that provided the assistance he needed and enabled him to continue his job with minimal disruption.*

Example *Gloria worked as a shipping clerk. After the car accident, she couldn't manage the physical demands of the job, which required a lot of walking and bending. Her employer offered her an office job but she needed computer skills that she didn't have. PIPP paid for Gloria's computer training so that she could return to work for her pre-accident employer.*

Alterations to your home

When a serious disability requires it, we may pay for alterations to your home so that you can better manage your daily needs independently. For example, PIPP might cover the cost of installing special bathroom fixtures or more easily accessible kitchen counters. PIPP may also cover moving costs if your home is no longer suitable for your needs.

Example *Danny suffered a spinal cord injury in a car accident and now uses a wheelchair. At the time of the accident, he was living in a third floor apartment in a building without an elevator. PIPP paid the costs related to moving to a ground floor apartment and adapting it to accommodate his wheelchair.*

Alterations to your vehicle

In some serious situations when the injuries you sustained in the accident are permanent, we'll pay to adapt one or more of your vehicles so that you can continue to drive, despite your injuries. PIPP also covers alterations to vehicles owned by you or your immediate family so that you can travel in the vehicle as a passenger.

Example *Stephanie, age 11, was hit by a car. She was paralyzed from the waist down and forced to use a specialized wheelchair. PIPP paid for alterations to the family van so that Stephanie could get in and out of it easily and safely.*

Special equipment

Your medical/rehabilitation team may determine that special equipment would assist you with daily living or workplace tasks. For example, PIPP might pay for a hospital-type bed or an orthopedic insert for your office chair. Depending on the situation, we'll either rent or purchase the equipment for you.



Leisure and recreational activities

If you have been seriously injured in a motor vehicle accident, you may be eligible for assistance to help you participate in leisure and/or recreational activities.

For example, if you were an athlete prior to your accident, PIPP will pay for a specialized sport wheelchair that will allow you to continue to be active in sports. If you are a theatre fan and now require an assistant to accompany you, PIPP will pay for a ticket for your assistant to attend the event with you.

The amount you will be reimbursed is dependent upon the severity of your injury. Your case manager will be able to discuss this with you in greater detail.

Meal allowances

Meal allowances can be claimed when you are required to travel for the purpose of receiving treatment, participating in rehabilitation or undergoing a medical examination at the request of Manitoba Public Insurance. The allowance may also be claimed for a companion or assistant when required due to your age or health status.

Please see the PIPP Benefits Chart for a list of maximum daily meal allowances.

Your rehabilitation plan

Your medical/rehabilitation team will work with you to develop a Rehabilitation Plan. The plan will set out the expected length and goals of treatment. It may also include milestones and a schedule of times to re-evaluate the plan.

The Rehabilitation Plan is personal to you and your situation. It should realistically reflect what you can achieve through treatment, effort and time. It can also identify expenditures that could help you to achieve these goals. Your commitment to the plan and your ongoing efforts to follow it are the keys to your recovery.

Questions and Answers

- Q** *I was in a car accident five years ago. At that time, PIPP paid for changes to my car so that I could drive it without using my legs, which were seriously injured in the accident. Having the car makes it possible for me to get to and from work. Will the costs of adapting a replacement car be covered?*
- A** Yes. Because you need to adapt your car as a result of the injuries you sustained in the accident, PIPP will cover the costs. When it's safe and economical to do so, we'll pay for transferring the special equipment from your current car to your new one. When that's not possible, we'll pay the costs of installing new equipment in your new car. We won't, however, pay the costs of returning your used car to the condition it was in before the adaptations were added.
- Q** *I work in the movie projection business. I was in a car accident and off work for several weeks. Now that I'm ready to go back to work, I've been told there's no job for me. The industry is moving away from film projection to video and I'm unlikely to find more work as a projectionist. Will PIPP pay for me to get retraining for another type of employment?*
- A** No. Your loss of employment is not related to the accident so PIPP can't pay for retraining.

Section 7

Catastrophic Injuries

Your Coverage

PIPP provides enhanced coverage for the people who need it most. If you have been catastrophically injured* in an accident, PIPP offers you enhanced income replacement, permanent impairment payments and money for personal care.

Key points

- People who are catastrophically injured in an accident are eligible for enhanced coverage under PIPP:
 - The minimum amount you're eligible to receive to replace lost income is based on the Industrial Average Wage (IAW) and indexed annually on April 1.
 - For permanent impairment, the maximum amount that is payable is based on the date of your accident.
 - We may provide additional support for those who have already used their monthly limit for approved personal care under PIPP.
- PIPP may allow payments of up to \$1,132,934 (in 2017) to claimants under the following circumstances. This is a lifetime maximum which is indexed annually.
 - To provide temporary benefits when you're waiting for funds from a government program.
 - To cover an expense not normally paid under PIPP or another government program that will lead to less PIPP benefits being needed in the longer term.

*Please refer to the definition of catastrophic injuries on the next page.

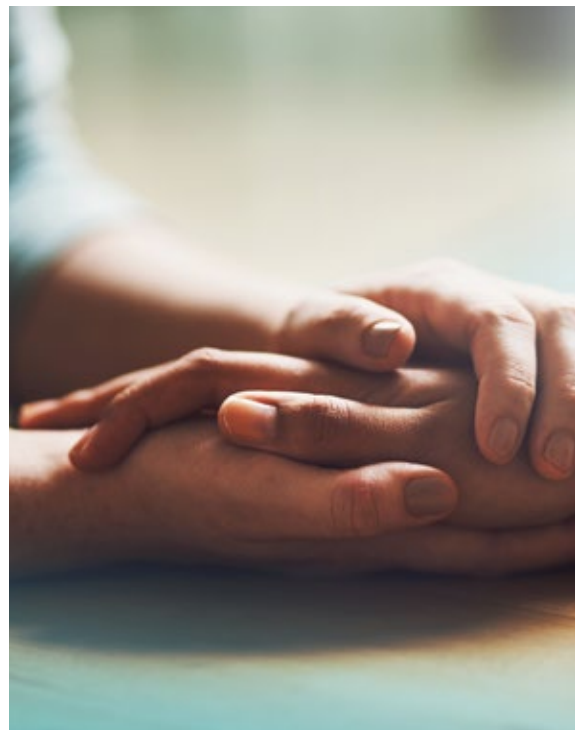
Catastrophic injuries

Broadly speaking, Schedule 4, Section 70(1) of *The Manitoba Public Insurance Corporation Act* states that a person is catastrophically injured if they suffer:

- Quadriplegia or paraplegia – complete or incomplete, that meets the criteria for classification as Grade A or B on the American Spinal Injury Association (ASIA) scale and results in an impairment of 65 per cent or more.
- Two or more amputations, such as shoulder/arm or pelvis/hip/thigh, including disfigurement.
- Loss of functional vision (impairment of 80 per cent or more).
- Functional alteration of the brain resulting in a determined impairment of 50 per cent or more.
- Psychiatric injury requiring supervision in an institutional or confined setting for 50 per cent or more of the time and with a determined impairment of 70 per cent or more.
- Severe burns, resulting in consequential impairments, excluding scarring or disfigurement to all surface areas of the body other than the face, that are determined to result in a degree of permanent impairment of 75 per cent or more.
- A combination of any of the following impairments totaling 80 per cent or more:
 - Single amputation, such as shoulder, arm, elbow, forearm, wrist, pelvis, hip, thigh, knee or below the knee.
 - Quadriplegia or paraplegia – complete or incomplete, that meets the criteria for classification as Grade C or D on the ASIA scale with partial preservation of motor power.
 - Loss of functional vision impairment between 50 and 80 per cent.
 - Functional alteration of the brain resulting in a determined impairment of 30 per cent or more.

- Severe brachial plexus injuries.
- Psychiatric injury requiring supervision in an institutional or confined setting for 50 per cent or more of the time and with a determined impairment of 35 per cent.
- Severe burns, resulting in consequential impairments, excluding scarring or disfigurement to all surface areas other than the face, that are determined to result in a degree of permanent impairment of 40 per cent or more.
- Another injury that is prescribed in the regulations as being catastrophic.

Please be advised that the above list does not outline all of the specific qualifiers for the Catastrophic Injury designation. Your case manager can review the impairment schedule with you to determine whether you meet the requirements specified in the legislation.



➔ The American Spinal Injury Association (ASIA) scale

Spinal cord injuries must be classified according to the ASIA scale as follows:

ASIA Grade A = Complete: No sensory or motor function is preserved below the neurological level of the lesion (including the sacral segments).

ASIA Grade B = Incomplete: There is preservation of sensation only with no motor preservation below the neurological level of the lesion.

ASIA Grade C = Incomplete: There is preservation of some motor function below the neurological level of the lesion, and the majority of key muscles below the neurological level have a muscle grade less than 3.

ASIA Grade D = Incomplete: There is preservation of some motor function below the neurological level of the lesion, and the majority of key muscles below the neurological level have a muscle grade greater than or equal to 3.

ASIA Grade E = Normal: Motor and sensory function is normal.

Increased minimum income replacement

We believe in providing enhanced coverage for people who need it most. That's why the minimum amount a catastrophically injured person receives to replace lost income has been significantly increased.

We use the Industrial Average Wage (IAW), rather than provincial minimum wage, to calculate lost income. The IAW is set using Statistics Canada data about Manitobans' salaries and is substantially higher than the minimum wage. As a result, the new income replacement minimum is calculated based on the IAW of \$46,412 (in 2017), compared to a calculation based on the provincial minimum wage of \$22,880 (Oct 1, 2017).

Permanent impairment payments increase

Manitoba Public Insurance recognizes the serious and lasting impact that catastrophic injuries have on people. The maximum amount someone receives for a permanent impairment has increased from \$154,261 (in 2017) for non-catastrophic to \$243,580 (in 2017) for catastrophic injury.

Example *Jessica was in a serious car accident on April 10, 2017, and as a result is a quadriplegic. Her type of quadriplegia is set at 100 per cent and is considered a catastrophic injury, so she will receive a permanent impairment payment of \$243,580 (2017 maximum, includes maximum lump sum indemnity for non-catastrophic injury of \$154,261).*

More for personal care

PIPP already covers the expense of hiring someone to care for you if your injuries prevent you from caring for yourself. There is a monthly limit of \$4,626 (in 2017) for approved personal care under the current guidelines. However, for those who are catastrophically injured and exceed their monthly maximum, we cover up to an additional \$906 (in 2017) per month.

Payment for special circumstances (Transitional Expense Coverage)

PIPP allows payments of up to \$1,132,934 (in 2017) to catastrophically-injured claimants under the following special circumstances:

- To provide temporary benefits while you are waiting for funds from a government program.
- To cover an expense not normally paid under PIPP or another government program that will lead to less PIPP benefits being needed in the longer term.

These payments are made at the discretion of Manitoba Public Insurance.

Travel and accommodation

To ensure you are still able to enjoy many of your pre-accident activities, PIPP will help pay for any extraordinary accommodation expenses you may have as a result of the catastrophic injuries sustained. For example, if you require an aide to travel with you to visit an out-of-town relative, PIPP would cover their expenses.



New life events

PIPP covers any new events you choose to participate in as a result of life events such as marriage or the birth of a child.

For example, if, after you are catastrophically injured in an accident, you marry and your spouse owns a cottage, PIPP will pay for renovations to make it accessible to you.

Indexed benefits

Each year, Manitoba Public Insurance will increase the benefits listed in this section, based on the Consumer Price Index (CPI.)

Questions and Answers

Q *I suffered extensive burns and had my left arm amputated following an accident several months ago. Do I qualify for enhanced coverage under PIPP?*

A Under Schedule 4, Section 70(1) of *The Manitoba Public Insurance Corporation Act*, people may qualify as being catastrophically injured if they suffer extensive full thickness burns resulting in consequential impairments and the amputation of a single major limb. Your case manager will be able to provide additional clarification.

Q *I was in an accident last year, which has left me a quadriplegic and unable to work. Prior to the accident, I was making \$31,000 annually as an office assistant. How much income replacement will I receive?*

A The minimum amount on which income replacement is calculated will be \$46,412 (in 2017), based on the Industrial Average Wage. Since your gross yearly income was less than the Industrial Average Wage at the time of the accident, you will receive an income replacement payment calculated starting at \$46,412 (in 2017) less deductions, and at 90 per cent of your overall net income. Your case manager will be able to go over this with you in greater detail.

Section 8

Appeals

Your Coverage

It's your right to ask for a review of our decision if you disagree with it. If you're not satisfied with the review decision, you have the right to appeal that decision to the Automobile Injury Compensation Appeal Commission.

Key points

- When there are changes to your situation, you can provide us with additional information and ask us to reconsider decisions we've made.
- If you disagree with a decision, you can ask for it to be reviewed. The office that handles the review is separate from our claims department.
- You have 60 days from the date you received a letter informing you of our decision to ask for it to be reviewed.
- You can appeal a review decision to the Automobile Injury Compensation Appeal Commission. The Commission is completely separate and independent from Manitoba Public Insurance.
- You have 90 days from the date you receive a review decision to file an appeal with the Automobile Injury Compensation Appeal Commission.

Changes in your circumstances

Something may happen that changes how much compensation you should receive. If circumstances affecting your compensation change, please bring it to our attention. We'll reassess coverage, recalculate compensation based on new information and make the necessary adjustments to ensure that you receive the correct compensation.

If you don't agree with a decision

Occasionally, disputes about compensation arise. If you can't resolve a dispute with your case manager, the next step is to ask Manitoba Public Insurance to review the decision. You have 60 days from the time you receive a decision letter to ask for a review.

If you're not satisfied with the results of the review, you can appeal to the Automobile Injury Compensation Appeal Commission (AICAC).

Step 1) Discuss the matter with your case manager

If you have a dispute about your compensation, the first step is to discuss it with your case manager and ensure that all pertinent information has been provided. Allow your case manager to answer any remaining questions you may have with respect to the decision.

Step 2) A Manitoba Public Insurance internal review of the decision

Manitoba Public Insurance's Internal Review Office handles these reviews. It operates independently of the Claims Department.

You'll need to put your request for a review in writing. You can get a copy of the Application for Review of Injury Claim Decision form from your case manager or you can call the Review Office directly. The telephone numbers are at the back of this guide.

On the form, describe the decision you want to have reviewed and the reasons why you believe it's wrong. You can include documents, such as a doctor's report, to support your position. If you don't have the documents to attach to the form, list the documents that you'll be sending later. The review officer won't start the review until your documents have been received. Remember, though, that you must ask for the review within 60 days of receiving your case manager's decision.

If you'd like to meet with the review officer to explain your situation, check the box marked "hearing" on the Application for Review form. The review officer will contact you to set up a time to meet. You can bring someone with you to this meeting or ask someone to represent you at it. You can also arrange a time to talk to the review officer on the telephone.

Whether or not you choose to speak to the review officer, they will thoroughly examine your file. The review officer can also conduct an investigation to get more information.

The review officer can overrule your case manager's decision, change it, or decide that it's right. You'll receive the review officer's decision by registered mail. If you don't want to accept this decision, you can appeal it to AICAC. You have 90 days from the time you receive the review officer's decision to write to AICAC and request an appeal.

Step 3) An appeal to the Automobile Injury Compensation Appeal Commission

The AICAC is a special tribunal whose operation is completely separate from Manitoba Public Insurance. Commissioners are appointed by the Manitoba government and the AICAC as part of the provincial Consumer Protection Division.

You can appeal a Manitoba Public Insurance decision regarding your entitlement under PIPP or the amount of that entitlement.

To file an appeal with the AICAC, phone their office directly. The phone number is in the telephone directory at the back of this guide. The AICAC staff will explain how to complete the Notice of Appeal form. Please note that you are required to send the form back to them within 90 days from the time you received the review officer's decision.

After the Notice of Appeal has been filed, you will be given an option for independent mediation before proceeding with the appeal with AICAC.

Mediation

An independent mediator, who is contracted through the Automobile Injury Mediation (AIM) office, will work with you and an MPI representative to resolve issues in dispute. If your matter is resolved, you will not need to proceed with a hearing at AICAC. However, if you are unable to resolve the matter through mediation, your file is referred back to AICAC so that you can proceed with your appeal. An Appeals Officer from AICAC will then contact you to review the AICAC guidelines and schedule a hearing.

Step 4) An appeal of the AICAC's decision

The AICAC's decision on your case is final. However, if your case involves jurisdiction or law, you may be able to appeal the AICAC's decision to the Court of Appeal. To do so, you'll need approval from a judge of the Court of Appeal.

Other options

Manitoba Public Insurance Fair Practices Office

Although this office is part of Manitoba Public Insurance, it's at an arm's length from your claim. The Fair Practices Office helps ensure that Manitoba Public Insurance handles claims ethically, honestly and impartially.

This office can review any customer concern about legislation and policy. It can also review individual claims to ensure customers are being treated properly.

You can reach the Fair Practices and Customer Relations team at 204-985-8117.

The Provincial Ombudsman

The Manitoba Ombudsman is an independent officer of the Legislative Assembly, who assists people and public sector organizations with their concerns by conducting impartial investigations, making recommendations, and providing guidance to ensure people are treated in a consistent, fair and reasonable manner and that their rights to information and privacy are protected. The Ombudsman is not an appeal body and cannot substitute their opinion for that of the Corporation. They do not have the power to overturn decisions. In its investigations, the Ombudsman identifies problems with a particular process, decision or systemic issue and may make recommendations to the Corporation to address the issue. They can be reached at 204-982-9130, 1-800-665-0531 (toll free) or by email to ombudsman@ombudsman.mb.ca.

The Claimant Adviser Office

If you're appealing our decision about your PIPP claim, the Claimant Adviser Office can help you. It operates independently of both Manitoba Public Insurance and AICAC and its services are free.

The Claimant Adviser Office's phone number is in the telephone directory at the back of this guide.

Reasons we refuse, reduce, suspend or end compensation

Our role is to compensate you for economic losses resulting from injuries you sustained in the accident and to provide you with the benefits that you are entitled to under PIPP. We share the objective of getting you back to the way you were before the accident, as much as possible.

We also have a financial responsibility to everyone in Manitoba. We must be good managers of the money Manitobans have paid for their insurance premiums. We do our best to only pay claims that are honest and valid.

As noted earlier, Manitoba Public Insurance will terminate or reduce payment to individuals who are convicted of certain Criminal Code offences arising from the accident. This can depend on numerous factors, including your percentage at-fault, how many dependents you have and the type of offence for which you were convicted.

We also may refuse to pay a claim or reduce or suspend the amount we are paying when:

- A person knowingly provides false or inaccurate information.
- A person does not go to a medical examination arranged by us or interferes with the examination, without a valid reason.
- A person does not follow the rehabilitation program made available by us, without a valid reason.
- A person refuses or does not follow medical treatment recommended by a medical practitioner, without a valid reason.
- A person refuses to return to former employment, leaves employment that they could continue to hold, or refuses a new employment, without a valid reason.
- A person refuses to provide us with information requested or to sign the necessary forms so that we can get the information, without a valid reason.
- A person acts in such a way as to delay or prevent recovery from injuries sustained in the accident, without a valid reason.

Telephone Directory

Manitoba Public Insurance Contact Centre

WINNIPEG 204-985-7000

TOLL-FREE 1-800-665-2410

DEAF ACCESS LINE (TTY) 204-985-8832

Manitoba Public Insurance Review Office – Special Assistants

WINNIPEG 204-985-8770, ext. 7088

Manitoba Public Insurance Fair Practices Office

WINNIPEG 204-985-8117

Automobile Injury Compensation Appeal Commission

WINNIPEG 204-945-4155

Statutory Publications

WINNIPEG 204-945-3101

Workers Compensation Board

WINNIPEG 204-954-4321

TOLL-FREE 1-800-362-3340

Manitoba Ombudsman

WINNIPEG 204-982-9130

TOLL-FREE 1-800-665-0531

Claimant Advisor Office

WINNIPEG 204-945-7413

TOLL-FREE 1-800-282-8069, ext. 7413

DEAF ACCESS LINE (TTY) 1-800-855-0511

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03/25
FBR0079
25-018-5787

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