

Personal Injury Accidents: Recovering Health Care Costs

If a person is injured in an accident caused by someone else's negligence or wrongdoing, and makes a claim for damages or initiates a lawsuit, the Ministry of Health and Long-Term Care can recover its costs for health care and treatment.

Each year, the ministry recovers over \$12 million from insurance companies through *subrogation*. Subrogation is a legal term unique to Insurance Law. It means "the right to recover costs for an injury caused by the fault or negligence of another person." The ministry's right to subrogation is enforced through legislation.

By being familiar with the principle of subrogation, those representing an injured person can ensure costs for appropriate health care and treatment are included in claims for damages.

Providers of health care services should read the fact sheet, [Who Pays for Health Care: Injuries from Motor Vehicle Accidents](#) to ensure costs for services are billed appropriately.

The most common examples of personal injury accidents for which the ministry recovers health care and treatment costs are:

- slip and falls
- boating, air and rail accidents
- product liability or manufacturing defects
- medical malpractice or professional negligence
- dog bites
- municipal liability
- assaults
- some motor vehicle accidents
- class actions

The ministry is notified by the injured person, their legal counsel or by the at-fault party's liability insurer.

The ministry's right of recovery applies to any incident regardless of the location. This includes other provinces, and foreign jurisdictions that allow subrogation or other reimbursement rights.

The ministry can recover costs for:

- OHIP insured services including:
 - physician services;
 - hospital services including in/out patient, acute and chronic care
 - air ambulance; out-of-country/ out-of-province medical and hospital services;
- Extended care services typically arranged or provided through Community Care Access Centres (CCACs) in the home, school or community including:
 - professional services such as nursing, physiotherapy, occupational therapy, speech-language pathology, social work or nutritional services

- non-professional services:
 - personal support including assistance with personal hygiene and homemaking services such as house cleaning, laundry, banking, shopping, preparing meals;
 - attendant care services such as assistance with personal hygiene and activities for daily living;
 - long-term care accommodation and services in nursing homes, charitable homes and homes for the aged (accommodation costs cannot be claimed in other facilities such as supportive housing).
 - community support services such as meals and transportation, caregiver support, adult day programs, home maintenance and repair, social or recreational services.

For More Information

If you have questions about subrogation or would like more information about how it affects your client, please call 613-548-6663.

The information on this fact sheet is not intended as legal advice. It is based on Legislation in the Health Insurance Act, Section 30-36 and Regulation 552, Section 39, and in the Long Term Care Act, Section 59 (ss1-13). The contents are current as of today's date but are subject to change. Readers should satisfy themselves as to the currency/accuracy of the material at any particular time.

Recovering Past and Future Health Care Costs

The ministry recovers the cost from insurance companies (or at-fault parties) for all OHIP insured health services provided up to the time of settlement or judgment. It also claims the costs for **future** insured health care services that an injured person may need.

Where an injured person has been assessed for long-term care services and benefits, funding is provided on a bridge or interim basis until settlement funds have been received. The ministry's claim includes these costs, and the subrogation unit endeavours to contact CCAC or other funding agencies upon settlement.

Subrogation does not apply for future non-professional health care services or benefits (such as attendant care, personal support and homemaking). The injured person must include a claim for the cost of these services in his or her personal claim for damages. Once settlement funds are received, he or she can then purchase these services directly.