

The Sibley Report

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An Overview of Catastrophic Impairment Determination

As insurance professionals, over the last few months we have been adjusting to the recent SABS amendments; specifically the elimination of the DAC system. As you know, when applying for benefits, clients can now obtain assessments from their own healthcare providers. If challenged by the insurer, the client is requested to attend a separate independent Insurer Examination (IE) from a healthcare provider of the insurer's choice prior to determination of benefit entitlement.

What you may not realize is that even for determination of catastrophic impairment, the insurer can now request a **Catastrophic Insurer Examination** from a professional/facility of his/her choice, rather than a DAC Centre.

What is the Application Process?

- To apply for catastrophic impairment determination, the client is required to submit an Application for Determination of Catastrophic Impairment (OCF 19).

- The insurer must then either notify the client that the application has been accepted or request that the client attend a Catastrophic IE under Section 42 of the SABS.
- The insurer cannot refuse to pay any benefits that are payable unless the client fails to attend the Section 42 examination.

What is the timeline?

- Catastrophic IE must be scheduled at least 5 days, but not more than 20 days, after the client receives notice from the insurer.
- Insurer must receive the Catastrophic IE report within 30 days.
- Within 5 days of receiving the report, the insurer must communicate the decision regarding entitlement and provide a copy of the report to the client and his/her healthcare professional.

For an overview of the process, please see the attached chart.

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