This consultation draft is intended to facilitate dialogue concerning its contents. Should the decision be made to proceed with the proposal, the comments received during consultation will be considered during the final preparation of the regulation. The content, structure, form and wording of the consultation draft are subject to change as a result of the consultation process and as a result of review, editing and correction by the Office of Legislative Counsel.

CONSULTATION DRAFT

ONTARIO REGULATION

to be made under the

INSURANCE ACT

Amending O. Reg. 403/96

(STATUTORY ACCIDENT BENEFITS SCHEDULE - ACCIDENTS ON OR AFTER NOVEMBER 1, 1996)

1. Subsection 37.1 (15) of Ontario Regulation 403/96 is amended by striking out "If a court or arbitrator determines in any dispute" at the beginning and substituting "If it is determined in any dispute".

2. Clause 37.3 (3) (b) of the Regulation is revoked and the following substituted:

(b) if there is a dispute under section 280 of the Act about whether, for the purpose of subsection 14 (2) or 15 (5), an expense described in the notice is reasonable or necessary, the insurer shall pay the expense pending resolution of the dispute.

3. Clause 38.1 (2) (c) of the Regulation is revoked and the following substituted:

(c) if there is a dispute under section 280 of the Act about whether, for the purpose of subsection 14 (2) or 15 (5), an expense described in the notice is reasonable or necessary, the insurer shall pay the expense pending resolution of the dispute.

4. Subsection 42.1 (10) of the Regulation is amended by striking out "in accordance with sections 280 to 283 of the Act" and substituting "described in subsection 280 (1) of the Act".

5. Sections 50 and 51 of the Regulation are revoked and the following substituted:

RESTRICTION ON PROCEEDINGS

50. (1) Subject to subsection (2), an insured person shall not apply to the Licence Appeal Tribunal under subsection 280 (2) of the Act if any of the following circumstances exist:

- 1. The insured person has not notified the insurer of the circumstances giving rise to a claim for a benefit or submitted an application for the benefit within the times prescribed by this Regulation.
- If the insured person was required to undergo a designated assessment under section 43, the insured person has not undergone the designated assessment or has not complied with that section.

(2) The Licence Appeal Tribunal may permit an insured person to apply despite paragraph 2 of subsection (1).

(3) The Licence Appeal Tribunal may impose terms and conditions on a permission granted under subsection (2) of this section.

TIME LIMIT FOR PROCEEDINGS

51. An application under subsection 280 (2) of the Act in respect of a benefit shall be commenced within two years after the insurer's refusal to pay the amount claimed.

6. (1) Subsection 65 (1) of the Regulation is revoked and the following substituted:

(1) Except as otherwise provided by subsection (2), the assignment of a benefit under this Regulation is void.

(2) Section 65 of the Regulation is amended by adding the following subsection:

- (3) If the assignment of a benefit to a person is void,
 - (a) subsection 280 (2) of the Act does not apply to the person; and
 - (b) subsection 280 (3) of the Act does apply to the person, but the exception in that subsection, which permits bringing a proceeding, does not apply to the person.

Commencement

7. [Commencement]