
How to Choose Your Outpatient Rehab Provider After a Motor Vehicle Collision

After an injury from a motor vehicle collision (MVC), participating in rehabilitation is an important part of your recovery. Be involved in choosing your health-care provider so you can find one that will best meet your needs. Here are six questions to consider when looking at your option:

What are my rehab goals?

Whether it is going back to work, starting to drive again, or returning to other daily activities, it is important to think about what you would like to accomplish in rehab. This can sometimes be difficult, so you may want to talk about your goals with your current health-care team before choosing your rehab provider.

Does the provider have experience with my health condition(s)?

Ask about the qualifications of providers and ensure that the facility has experience providing care for people with condition(s) similar to yours. For example, if you have a burn or an amputation as a result of your motor-vehicle collision, or have complex cognitive needs, you should choose a rehab provider that has experience in providing treatment for these conditions.

What services are available at the clinic?

Find out if the clinic offers services that fit your rehab goals and needs, and what to expect from a typical appointment. You may want to ask about:

- **The different types of services offered at the clinic:** Usually, treatment services available for people who have had an MVC includes: physiotherapy, occupational therapy, massage therapy, social work, and/or psychology
- **How the treatment will be provided:** How long are your appointments? How much individual time will you have with your therapist? Group-based treatment options can help give you social support as you work on your recovery. Some providers can offer treatment virtually, depending on your needs.
- **Other services available at the clinic that are important to you:** Does the clinic have other services such as pool therapy, chiropractic, or acupuncture? Talk to your current health-care team about which services and therapies can help you.

How does the clinic communicate with my insurance adjuster?

Your rehabilitation care costs are covered under your insurance accident benefit claim. There is a limit to the amount of money available for rehab and you will need to keep track of how much you are using for your therapy services. You can ask about the clinic's process for submitting information about your rehab services to your adjuster. Never sign a blank treatment plan and always make sure that you will have the chance to review and ask questions before the clinic submits your treatment plan.

How will my care be coordinated?

Do you have someone that can help you coordinate your rehab services? Does the clinic have a team that works together with you to achieve your rehab goals? How does the clinic regularly communicate with insurance adjusters, lawyers, and others involved in your care? Communication between everyone on your team is important in helping to make sure you are getting the care you need.

How far am I willing to travel for my rehab care?

You might need to go for your appointments for a few weeks or months. It is important that you go to all your appointments so that you reach your rehab goals. Don't let distance or transportation be a barrier and plan accordingly. Think about other ways to get to your appointments, such as a family member, public transit or insurance-funded taxis.

Visit gtarehabfinder.ca to find a facility that's right for you. You could also go to professional regulatory websites – such as the College of Physiotherapists of Ontario or the College of Occupational Therapists of Ontario – to find licensed health-care professionals near you.