

Automobile Injury Compensation Appeal Commission

IN THE MATTER OF an appeal by [the Appellant]

AICAC File No.: AC-98-35

PANEL: **Mr. J. F. Reeh Taylor, Q.C. (Chairperson)**
Mr. Charles T. Birt, Q.C.
Mr. F. Les Cox

APPEARANCES: **Manitoba Public Insurance Corporation ('MPIC') represented**
by
Ms Joan McKelvey
[Text deleted], the Appellant, appeared on his own behalf

HEARING DATE: **October 2nd, 1998**

ISSUE: **Whether Appellant entitled to further chiropractic care.**

RELEVANT SECTIONS: **Section 136(1)(a) of the MPIC Act and Section 5 of Manitoba Regulation 40/94**

AICAC NOTE: THIS DECISION HAS BEEN EDITED TO PROTECT THE APPELLANT'S PRIVACY AND TO KEEP PERSONAL INFORMATION CONFIDENTIAL. REFERENCES TO THE APPELLANT'S PERSONAL HEALTH INFORMATION AND OTHER PERSONAL IDENTIFYING INFORMATION HAVE BEEN REMOVED.

REASONS FOR DECISION

[The Appellant], who was injured in a motor vehicle accident on the 20th of April 1996, received chiropractic care from [Appellant's chiropractor] until the end of September 1997, at which point MPIC discontinued paying for those treatments. [The Appellant] has, in fact, received about fourteen further chiropractic adjustments from October 1st to the end of 1997, and approximately another eighteen such treatments in 1998 to date. He seeks reimbursement for the cost of those

treatments.

[Appellant's chiropractor's] first health care report, dated April 29th, 1996, sets out a management plan of three adjustments per week for a period of from three to five months; his next report of December 30th, 1996 speaks of the need for adjustments once or twice weekly for a period of one to two months, to be followed by re-evaluation; on April 22nd, 1997. He reports that [the Appellant] is receiving two to three treatments per month and may need a further six months of care, with an estimated discharge date in October,1997, yet, on October 22nd, 1997, [Appellant's chiropractor] is still estimating a further six months of treatments at a frequency of three times per month.

In his report at the end of January 1998, [Appellant's chiropractor] notes, with respect to [the Appellant], that:

He states that he gets help here, however temporary. He rarely makes an appointment, just shows up approximately three times monthly.....He may benefit from an independent examination.....He attends approx. three times per month and I can only guess that he needs a further six month duration of care. I don't see much change in his symptoms in last six months but am not able to discourage his continued attendance, since he finds it helps and he feels he is not better yet.

In response to the questions "identify any risk factors for chronic pain or delayed recovery", [Appellant's chiropractor] simply responds "I don't know".

[The Appellant's] family physician, [text deleted], referred him to [Appellant's rehab specialist] of the section of [text deleted]. A copy of [Appellant's rehab specialist's] report is annexed to these Reasons.

We have no hesitation in agreeing with the decision of MPIC's Internal Review Officer, of which a copy is also annexed hereto and intended to form part of these Reasons. We note, only, that by following all of [Appellant's chiropractor's] recommendations for extended treatment, [the Appellant] would have received approximately 112 spinal adjustments and other treatments - a number far in excess of anything contemplated by the clinical guidelines for chiropractic practice in Canada and well beyond what might normally have been expected for injuries of the type apparently sustained by [the Appellant].

However, in confirming MPIC's decision and dismissing [the Appellant's] appeal, we nevertheless wish to draw to the attention of MPIC the recommendations contained on the last page of [Appellant's rehab specialist's] report and we refer back to the adjusting team the specific recommendation that [the Appellant] be sent for physiotherapy. It is our understanding that [Appellant's rehab specialist] has referred the Appellant to the [hospital] Physiotherapy Department, but we recommend that this be followed up in light of the diminishing role apparently assigned by the hospital authority to the [hospital]. If that Physiotherapy Department is going to be phased out, then it will patently be necessary for [the Appellant] to be referred to yet another physiotherapy clinic for treatment. That would have to be done in further cooperation with [Appellant's rehab specialist].

Dated at Winnipeg this 5th day of October 1998.

J. F. REEH TAYLOR, Q.C.

CHARLES T. BIRT, Q.C.

F. LES COX