

Insurance & Billing: A Simple Guide

We work hard to make paying for care easy. Use this quick guide to understand your options and what to do next.

Quick Overview

Coverage Type	What it is	Do we direct bill?	Key limits	What you should do
Your Own Insurance (Primary)	Benefits under your personal plan	Yes — most plans	Plan-specific	Bring your benefits card; we'll bill when possible. Any remainder is paid by you.
Spousal/ Secondary Insurance	Benefits under a spouse/ partner plan used after your own	No	Plan-specific	We provide detailed receipts so you can self-submit to the secondary plan.
Motor Vehicle Accident (MVA)	Coverage after a car collision	Yes (as applicable)	10–21 visits initially (based on injury severity). After that, private insurance may apply; then Section B : up to \$350 for massage or acupuncture and \$1,000 for chiropractic if still not at pre-accident status.	Book your initial exam promptly; pre-book your first 10–21 visits to stay on track. Bring claim info and adjuster details.
WCB (Workers' Compensation Board)	Work-related injury claims	Yes (with approval)	Up to 20 visits over 6 weeks (if approved). One treatment type at a time (chiro or acupuncture or physio).	Bring your claim number and approval details. Choose one treatment stream for the approved period.

Direct billing depends on your insurer and plan. If an insurer does not accept direct billing, payment is due at the visit and you can submit the receipt.

Details by Coverage Type

1) Your Own Insurance (Primary)

- We direct bill **most** insurance companies.
- If your plan requires a co-pay, deductible, or if a claim is declined, you pay the difference at the time of service.
- Please bring your benefits card and photo ID on your first visit.

2) Spousal/Secondary Insurance

- We **do not** direct bill secondary plans.
- You'll receive **itemized receipts** for easy self-submission to your spouse/partner's plan after your primary claim is processed.

3) Motor Vehicle Accident (MVA) Coverage

- **Initial coverage:** You'll be approved for **10–21 visits** for chiropractic, massage therapy, and/or acupuncture (based on injury severity).
- **Stay on schedule:** After your initial exam, **pre-book** your 10–21 visits. Completing them on time helps maintain eligibility for next-step coverage and supports full recovery.
- **Private insurance:** If you have **not** returned to pre-accident status after the initial visits, your **private insurance** may be used next.
- **Section B (after private insurance):** If you still haven't reached pre-accident status after private insurance is exhausted, Section B may provide up to **\$350** for massage therapy **and/or** acupuncture, and up to **\$1,000** for chiropractic care.
- **Legal assignment (if needed):** If recovery remains incomplete, your lawyer may place you **on assignment** with our clinic so you can continue treatment without paying upfront; treatment costs are then settled from claim proceeds.
- **What to bring:** Claim number, insurer/adjuster contact, date of accident, and any forms you've received.

4) WCB (Workplace Injury) Coverage

- With WCB case approval, coverage is typically **up to 20 visits over 6 weeks**.
- You must select **one** treatment type at a time: **chiropractic or acupuncture or physiotherapy**.
- What to bring: Your WCB claim number and approval details.

How to Get Started (All Patients)

1. **Book your initial assessment** (online or by phone).
 2. **Bring your ID and benefits card** (and any claim details for MVA/WCB).
 3. **Arrive a few minutes early** to complete or review paperwork.
 4. **Ask us anything** — our team is happy to help you choose the right path.
-

FAQs

Do you guarantee direct billing?

We do our best with most major insurers. Some plans or insurers do not allow it, or they may decline a particular claim. In those cases, payment is due at the visit and you can submit the receipt.

Can I use both my plan and my spouse's plan?

Yes. We'll direct bill your **primary** plan when possible. For the **secondary** plan, we'll give you detailed receipts to submit yourself.

Why do I need to pre-book MVA visits?

Staying on schedule helps you complete the **10-21** approved visits within the required timeframe, supports better outcomes, and preserves access to additional coverage when needed.

What if my MVA claim moves to Section B?

If you're still not at pre-accident status after the initial visits and private insurance, Section B may cover up to **\$350** for massage/acupuncture and **\$1,000** for chiropractic.

For WCB, can I switch between treatment types?

WCB authorizes **one** treatment stream at a time. Ask us if a change might benefit your recovery—we'll help you navigate approvals.

Questions? We're here to help.

Healing Happens Here.