



Claims Process

What happens when I make a claim?

We strive to make access to justice as simple as possible for you. Our claims process is designed to help alleviate the stress of not knowing what's next, while keeping you informed and confident, and it all starts with...



STEP 1 | Calling into the Legal Helpline

- The helpline is available between 8am and midnight, 7 days a week. In addition, you will have access to a lawyer 24/7 in emergency situations
- The helpline telephone number and your policy number can be found on your policy certificate and wallet card.
- A lawyer will provide legal assistance and identify potential next steps. Please note: the lawyer will not advise on coverage, make a claim decision or review documents

If the issue appears to be covered, the lawyer will send your information to the DAS Claims Department



STEP 2 | Information gathering

- A Claims Analyst is assigned who will contact you by email and phone, requesting further documents and information to assist in making a claim decision



STEP 3 | You are notified of our claim decision

- Your Claims Analyst will make a final coverage decision once all the required information is received, and notify you by phone and email.
- If coverage does not apply, you will still have unlimited access to the Legal Helpline for more legal information and assistance



STEP 4 | DAS will attempt to resolve the issue first

- Depending on your legal issue, our Claims Analyst will contact the other party involved to see if it can be resolved to avoid a lengthy litigation
- Any resolution brokered by our Claims Analyst will be discussed with and approved by you prior to any final settlement



STEP 5 | If DAS cannot resolve your issue, a Panel Lawyer is assigned

- You will deal directly with your assigned lawyer until the issue is resolved
- Our Claims Analyst will remain involved to answer questions and to ensure that your claim moves forward in an efficient and timely manner
- If a deductible is required, you will pay your assigned lawyer directly. Afterwards the Insurer pays all related legal expenses up to the approved budget and/or policy limits



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TO JUSTICE



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Other important information regarding our claims process to remember is...



1 | Date of Occurrence

- For civil cases: the date of the 'event or alleged incident' which leads to a claim. If there is more than one incident arising at different times from the same starting cause, the date of occurrence is the first of these events or incidents.
- For criminal cases: the date of the incident, or the earliest date in a series of related incidents, for which you are charged with a criminal offence.
- For a tax audit or appeal: when the Canada Revenue Agency ("CRA") or a provincial tax authority first contacts you in relation to commencing an audit or when they first issue a notice of assessment, reassessment or determination that the insured disagrees with



2 | Claims Notification Periods

- You must notify us within 120 days of the date of occurrence, or 120 days of the date you knew or should have reasonably known of the claim
- Notification of potential claim does not impact premium and will stop the 120 days clock



3 | Reasonable Prospects of Success Claims Criteria

- A claim will be accepted if it is more likely than not, you will recover losses, damages or make a successful defence in a civil matter.
- In layman's terms, you have a 51% or better chance of winning their case
- This only applies to civil cases and is a standard legal practice to avoid frivolous cases



4 | Your broker can be involved in the claims process, if you agree

- Further claims information sharing or status inquiries will require you to sign an Authorization to Disclose Information form



5 | Our claims handling best practices

- Transparent and timely communication
- Consistent coverage analysis and documentation
- Ongoing oversight of your litigation and financial oversight of legal expenses
- The customer is at the heart of everything we do



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