

A Closer Look Into Our *Claims Process*



What happens when your customer makes a claim?

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

● **Step 1: Calling the Legal Helpline**

The first step in submitting a claim is placing a call to the Legal Helpline. If the issue appears to be covered, the helpline lawyer will submit the details of the claim to the ARAG Claims Department, who will notify your customer of receipt and timelines for their claim.

- Your customer has unlimited 24/7 access to the Legal Helpline. Helpline lawyers provide general legal information and assistance for any legal question they may have, even if it is not covered under the policy.
- The Helpline number and policy number can be found on your customer's policy certificate and wallet card.
- Please note: the lawyer will not advise on coverage, make a claim decision or review documents.

● **Step 2: Assignment and Information Gathering**

Once the details of the claim have been submitted to the ARAG Claims Department, the claim is then assigned to one of our Claims Analysts.

The Claims Analyst will review the file documentation on hand, review the policy details and then contact your customer by email and phone.

There may be need for additional clarification, documents or other information required to determine if the claim is covered.

● **Step 4: A Panel Lawyer Is Assigned**

Once your customer's claim is accepted, we will then assign it to one of our Panel Lawyers in their jurisdiction.

Your customer will deal directly with their assigned lawyer until the issue is resolved. The ARAG Claims Analyst will remain involved to answer questions and to ensure their claim moves forward in an efficient and timely manner.

If a deductible is required, your customer will pay the assigned lawyer directly. Afterwards, the Insurer pays all related legal expenses up to the approved budget and/or policy limits.

● **Step 3: Your Customer Is Notified if They Are Covered or Not**

Once we receive all the information required to assess your customer's claim for coverage, the Analyst will finalize their coverage decision and notify them on next steps.

If we are not able to cover your customer's claim, they will still have unlimited access to the Legal Helpline for more legal information and assistance.

Other important information regarding our claims process

- **Notification Period:** Your customer must notify us within 120 days of the date of occurrence (the date of the event or alleged incident which lead to a claim), or 120 days of the date they knew or should have reasonably known of the claim.
- **Reasonable Prospects of Success:** A claim is accepted if it is more likely than not, your customer will recover losses, damages or make a successful defence in a civil matter. That is a 51% or better chance of winning in layman's terms.
- **After the Claim Is Received by ARAG:** Your customer should directly call the assigned Claims Analyst or the ARAG Head Office for an update, not the Legal Helpline.
- **Fees Incurred:** ARAG reimburses the lawyer directly for fees incurred. Fees incurred without the prior consent of ARAG will not be covered.

A seamless process that ensures your customer's legal risks are **Well Managed.** ● [ARAG.ca](https://www.arag.ca)

Please note that from a claims perspective, Legal Expense Insurance (LEI) is a bit different than typical commercial policies with regards to time required. This is due to the complex nature of legal disputes and the slow speed at which our legal system operates.