



MENTAL Health



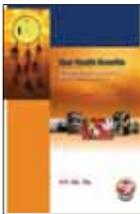
Content

Mental Health



CRISIS INTERVENTION MENTAL HEALTH COUNSELLING

Health Canada can cover the costs associated with consulting a psychologist or social worker when a person is in a crisis situation (mental health).



See the details regarding the benefits that are covered on page 27 of the NIHB information booklet.

The crisis intervention mental health counselling services must **mandatorily** be provided by a professional mental health therapist (psychologist or social worker) who is a **member of a professional order that is recognised by the provincial health network**.

The mental health professional must forward a treatment plan following the first meeting indicating the number of meetings anticipated within the context of brief therapy in order to receive authorisation from Health Canada. The travelling of a professional to a community can also be considered for isolated regions.

The authorisation of these types of treatment by the NIHB program is based on evaluations performed on a case by case basis by the mental health team of Health Canada's regional office located in Montreal.

Health Canada has also developed regional directives for this component of the program.



See these regional directives in the appendices.

HOW MUST ONE PROCEED TO ACCESS THE SERVICE?

During the first meeting with your client, the professional will suggest a treatment plan meeting your client's needs.

In all cases, the cost of the meetings required for the development of the treatment plan will be reimbursed by Health Canada, even if the treatment is denied following its analysis.

To seek reimbursement, the professional must contact Health Canada's mental health team in order to submit the treatment plan as well as the invoice for the first evaluation meeting.

The treatment plan can be submitted by fax but the invoices must be forwarded by mail.

Health Canada's mental health team

Tel: 1-877-583-2965

Fax: 514-496-2962

If your client already paid the fees associated with their first consultation, they can seek reimbursement by contacting Health Canada's mental health team at 1 887-583-2965.

If a crisis situation occurs in a community (fire, suicide, etc.), it is also possible for a professional to travel in order to provide professional support to many people. This request must be made directly to Health Canada's mental health team. The evaluation and authorisation of this service will be performed on a case by case basis.

BE CAREFUL OF EXCLUSIONS!

The fees related to evaluation services that are not considered to be associated with a mental health emergency are not eligible for reimbursement from Health Canada:

- Evaluation for Fetal Alcohol Syndrome Disorder;
- Evaluation for learning disorders;
- Evaluation for child placement and visitation rights.

It is important to verify the exclusions related to crisis intervention mental health counselling.



See page 28 of the NIHB information booklet.



Appeal Procedures

Mental Health

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APPEAL PROCEDURES

CRISIS INTERVENTION

MENTAL HEALTH COUNSELLING

It is unlikely that your client will be obligated to resort to the appeal procedures in order to receive crisis intervention mental health counselling.

If your client is denied mental health services, they are entitled to initiate appeal procedures.

There are three possible levels of appeal in order to attempt to overturn a decision made by Health Canada not to cover short-term mental health treatment.

The process is practically the same for all three levels of appeal.

In short, the appeal procedures consist of sending a letter signed by your client expressing their disagreement with the decision made by Health Canada and requesting a review of their file.

The sending of this letter will allow for initiating the appeal process. Health Canada will then review your client's file.

You can support your client in their process, but **it is necessary for it to be initiated by the patient or their legal guardian, meaning that they must sign the letter of appeal.**

In order to optimise the chances of the response being positive and decrease the delays associated with Health Canada's processing of the file, it is important for the letter to be structured properly.

PRACTICAL ADVICE IN ORDER TO PROPERLY PREPARE A LETTER OF APPEAL

It is **necessary** to properly understand the reasons why the treatment plan was denied. These reasons will be needed in order to draft the letter of appeal.

- You can call Health Canada's mental health team and ask an agent to verify the reasons for the denial that are recorded in your patient's file. Take notes on the reasons for the denial.

Mental health team: 1-877-583-2965.

- Verify the program exclusions (see page 28 in the NIHB information booklet). If the treatment being requested is excluded from the program, it cannot be appealed. An exclusion is automatically denied.

Your professional can assist you in justifying the needs of your client to Health Canada. Do not hesitate to seek their help.



You can refer to page 31 of the NIHB information booklet.



FIRST LEVEL OF APPEAL CRISIS INTERVENTION MENTAL HEALTH COUNSELLING

The letter of appeal signed by the client must be mailed to Health Canada in an envelope labelled **“Appeals – Confidential”** to the following address:

NIHB Regional Manager
First Nations and Inuit Health Branch
Quebec region
Guy-Favreau Complex, East Tower, Suite 404
200 René-Lévesque Boulevard West
Montreal, Quebec H2Z 1X4

You should include additional justification from the professional as well as all the other relevant documents.



SECOND LEVEL OF APPEAL CRISIS INTERVENTION MENTAL HEALTH COUNSELLING

If the client disagrees with the decision that was made by Health Canada following the first level of appeal, they can send a letter for the second level of appeal.

 See the appended example of a letter for the second level of appeal.

It is important to properly understand the reasons behind the denial during the first level of appeal and to use these reasons to modify your letter for the second level and to provide the necessary justifications.

The client can simply modify the first letter of appeal by:

- Changing the date;
- Changing the title of the letter from “first appeal” to “second appeal”;
- Adding the required justifications.

The client must send the letter for the second level of appeal labelled “**Appeals – Confidential**” as well as all of the supporting documents by mail to the following address:

Regional Director, FNIHB
Quebec region
Guy-Favreau Complex, East Tower, Suite 404
200 René-Lévesque Boulevard West
Montreal, Quebec H2Z 1X4



THIRD LEVEL OF APPEAL CRISIS INTERVENTION MENTAL HEALTH COUNSELLING

If the client disagrees with the decision made by Health Canada regarding their request in the context of the second level of appeal, they can send a last letter to the third and **final level of appeal**.

 See the appended example of a letter for the third level of appeal.

The client can simply modify the second letter of appeal by:

- Changing the date;
- Changing the title of the letter from “second appeal” to “third appeal”;
- Adding the required justifications.

The client must send the letter for the third level of appeal labelled “**Appeals – Confidential**” as well as all of the supporting documents by mail to the following address:

NIHB General Director
First Nations and Inuit Health Branch
Non-Insured Health Benefits
200, Eglantine Driveway, Jeanne Mance Building
Postal Locator 1914A
Ottawa (Ontario) K1A 0K9

If the client hasn't had any news regarding their request after a month, they can contact the mental health team at Health Canada's regional office located in Montreal.

Mental health team: 1-877-583-2965.



The FNQLHSSC can provide you with support and assistance for all of the steps you will take with your client. Our expertise in the area of health care and services allows us to provide you with guidance while helping you to develop strategies related to demonstrating your needs and resolving your clientele's access issues.

Examples:

- Support in the development of the letters of appeal;
- Contacts with the health professionals concerned by the problem and facilitation of the steps to be taken among them;
- Development of strategies in a concerted fashion with you and your client in order to access health care and services;
- Transmission of contact information for various contacts and other relevant information.

You can contact the Health Care Liaison Agent of the FNQLHSSC at any time in order to obtain support at 418-842-1540.





Letters of Appeal

Mental Health

First level of appeal

Second level of appeal

Third level of appeal

You can consult the documents for this section on the CD included with this GPS or on the website of the FNQLHSSC.

You can also modify, adapt and/or photocopy these documents.

www.cssspnql.com



FIRST LEVEL OF APPEAL

CRISIS INTERVENTION MENTAL HEALTH COUNSELLING SERVICES
CONFIDENTIAL

(Community, location)

(Date)

Regional Manager, Non-Insured Health Benefits

First Nations and Inuit Health Branch
Quebec region
Guy-Favreau Complex, East Tower, Suite 404
200 René-Lévesque Boulevard West
Montreal, Quebec H2Z 1X4

Re.: **First level of appeal for denied coverage related to Crisis Intervention Mental Health Counselling services**

Dear Sir/Madam,

The purpose of this letter is to appeal Health Canada's decision not to cover the costs related to my treatment plan developed by my treating professional.

Indeed, my request was rejected and I completely disagree with the decision that was made. I am therefore asking you to review my file and re-evaluate my request to access crisis intervention mental health counselling services.

I would like to thank you in advance for your cooperation and please accept my best regards.

Name: _____

Band number: _____ Date of birth: _____

Address: _____

Tel.: _____

Other relevant information:



SECOND LEVEL OF APPEAL

CRISIS INTERVENTION MENTAL HEALTH COUNSELLING SERVICES
CONFIDENTIAL

(Community, location)

(Date)

Regional Director

First Nations and Inuit Health Branch
Quebec region
Guy-Favreau Complex, East Tower, Suite 404
200 René-Lévesque Boulevard West
Montreal, Quebec H2Z 1X4

Re.: **Second level of appeal for denied coverage related to Crisis Intervention Mental Health
Counselling services**

Dear Sir/Madam,

The purpose of this letter is to appeal Health Canada's decision not to cover the costs related to my treatment plan developed by my treating professional.

Indeed, my request was rejected during the first level of appeal and I still disagree with the decision that was made. I am therefore asking you to review my file and re-evaluate my request to access crisis intervention mental health counselling services.

I would like to thank you in advance for your cooperation and please accept my best regards.

Name: _____

Band number: _____ Date of birth: _____

Address: _____

Tel.: _____

Other relevant information:



THIRD LEVEL OF APPEAL

CRISIS INTERVENTION MENTAL HEALTH COUNSELLING SERVICES
CONFIDENTIAL

(Community, location)

(Date)

Director General, Non-Insured Health Benefits

First Nations and Inuit Health Branch
200, Eglantine Driveway, Jeanne Mance building
Postal Locator 1914A
Ottawa (Ontario) K1A 0K9

Re.: **Third level of appeal for denied coverage related to Crisis Intervention Mental Health Counselling services**

Dear Sir/Madam,

The purpose of this letter is to appeal Health Canada's decision not to cover the costs related to my treatment plan developed by my treating professional.

Indeed, my request was rejected during the second level of appeal and I still disagree with the decision that was made.

I am therefore asking you to review my file and re-evaluate my request to access crisis intervention mental health counselling services.

I would like to thank you in advance for your cooperation and please accept my best regards.

Name: _____

Band number: _____ Date of birth: _____

Address: _____

Tel.: _____

Other relevant information:



Framework

Mental Health



Health
Canada

First Nations and Inuit Health Branch
Québec Region
Guy-Favreau Complex
200 René-Lévesque Blvd. West
East Tower, 2nd Floor
Montréal, Québec
H2Z 1X4

Santé
Canada

Direction générale de la santé
des Premières nations et des Inuits
Région du Québec
Complexe Guy-Favreau
200, boul. René-Lévesque Ouest
Tour Est, 2^e étage
Montréal (Québec)
H2Z 1X4

CURRENT DIRECTIVES/POLICIES CONCERNING PSYCHOLOGICAL CARE FOR REGISTERED INDIANS

NON-INSURED HEALTH BENEFITS - MENTAL HEALTH

The Non-Insured Health Benefits program can provide limited funding of last resort for professional mental health treatment for individuals in at risk crisis situations under the following conditions :

1. Patient is a registered Indian according to the Indian Act.
2. Service required is not available from another sources (CLSC, Régie de l'assurance maladie du Québec, collective or private insurance, etc...).
3. The mental health professional therapist is a psychologist or a social worker member of a Corporation.
4. The mental health professional therapist must provide us with a diagnosis and treatment plan (after the first session) for prior approval including the following information :
 - Client's name
 - Band number (10 digit number or "N" or "B" number)
 - Date of birth
 - Diagnosis and brief description of the situation
 - Objectives
 - Number of sessions required
 - Tariff
5. The client must sign for services rendered and original invoices sent by mail.

Jeffrey Drugge, Ph.D.
Psychologist
Non-Insured Health Benefits - Mental Health
Tel: 514-283-2965/7544
Toll Free : 1-877-583-2965
FAX : 514-496-2962

INTERIM PROGRAM DIRECTIVE

MENTAL HEALTH SERVICES

PREAMBLE

The Non-Insured Health Benefits program can provide limited funding of last resort for professional mental health treatment for individuals and communities in at risk, crisis situations.

To maintain quality of care and accountability of service, Medical Services Branch, through the Non-Insured Health Benefits (NIHB) program, will provide the services of mental health therapists from the disciplines of psychology, psychiatric nursing, and social work, and the services of providers under the supervision of therapists in these disciplines.

As the private therapist from these disciplines is generally working alone, without supervision or any collegial consultation, he/she must be fully qualified and currently registered/licensed with the appropriate provincial college/association to which he/she is professionally accountable. Psychologists should be registered/licensed clinical psychologists in good standing with their provincial association. Regions are encouraged to develop and maintain a list of professional mental health therapists from these allied health disciplines who are knowledgeable of the native culture and who are acceptable to the native community.

It is recognized the provincial system funds professional mental health assessment and therapy services through hospital clinics. NIHB funds should be used only for professional mental health therapy services for those situations in which early intervention, short-term therapy for at-risk, crisis situations is recommended and is not available through other MSB programs or provincially funded facilities.

The service is provided on the basis of a diagnosis and treatment plan which must be prior approved by a mental health professional, preferably a registered/licensed clinical psychologist, designated by the region.

Regions are to develop a system to prior approve treatment plans and to monitor the outcome of therapy so that they can be accountable for cost effectiveness and quality of care. It is recommended that this be done in consultation with a mental health professional.

March 1994

INTERIM PROGRAM DIRECTIVE

No. 7

MENTAL HEALTH SERVICES

1.7.1 PURPOSE

PURPOSE

To provide professional mental health treatment required on an early intervention, short-term basis, to address at-risk, crisis situations when such treatment is not available elsewhere, for example through provincially insured services, other MSB programs or other insured plans. This treatment may be provided to:

1. individuals in a private practice setting
2. individuals in their community

1.7.2 BENEFITS

BENEFITS

1. Fees for professional mental health therapists for the initial assessment and development of a treatment plan as necessary.
2. Mental health treatment by, or supervised by, professional mental health therapists from the disciplines of psychology, psychiatric nursing, or social work.
3. Individual, conjoint (with a couple), family, or group (with unrelated individuals) therapy sessions can be provided.
4. Sessional fees when it is deemed cost effective to transport a professional mental health therapist to a remote community.
5. Benefits are provided under the following conditions:
 - (a) there is a crisis, at-risk situation and there is no other source of funds for treatment;
 - (b) the therapist(s) providing service, or supervising it, are registered/licensed with their professional college/association in the province in which the service is provided, according to the provincial legislation and current practice;

- (c) there is a diagnosis and a treatment plan for the individual or the community describing estimated duration of treatment and estimated costs per the service provider(s);
- (d) that all treatment plans are prior approved by a mental health therapist, preferably a registered/licensed clinical psychologist. Prior approval is required for the initial treatment plan as well as a renewal of a treatment plan.

1.7.3 NON BENEFITS

NON BENEFITS

The following will not be covered:

1. Psychiatric services, psychoanalysis, educational and vocational counselling, substance abuse counselling/therapy, lifeskills training, or early intervention programs for infants with delayed development.
2. Services which are part of, or to be used for, legal actions.

1.7.4 MANAGEMENT PRACTICES

MANAGEMENT PRACTICES

1. The methods of service delivery can include:
 - (a) service to individuals by therapists in a private practice setting;
 - (b) MSB contracts with mental health therapists;
 - (c) MSB Contribution Agreement with First Nations.
2. MSB and First Nations must ensure that mental health therapists providing service are aware of the terms and conditions for the provision of mental health services and that they advise their clients of these terms and conditions.
3. It will be the responsibility of the service provider to verify with MSB that a patient is eligible for the NIHB coverage and to obtain the necessary prior approval from MSB prior to commencement of therapy or renewal of a treatment plan.

4. Questions that arise during the prior approval process about the levels and types of service should be resolved by the regions in consultation with the designated mental health professional(s) authorized by the Region to carry out prior approvals.
5. Fees charged must be in accordance with those set by the provincial payment schedules for individual, conjoint, family or group therapy. Under no circumstances are individual therapy fees to be charged when a client has received group, conjoint or family therapy.
6. Each Region should maintain a current list of the professional mental health therapists with knowledge of native culture and with previous experience treating the native population. Regions are encouraged to utilize the resources of both the professional colleges/associations and the provincial registry in this regard.
7. Where services are provided under the supervision of professional mental health therapists, the supervision should be direct and the expectations of the supervisor and supervisee clearly outlined.
8. Medical confidentiality of patient records is respected and maintained.



Forms

Mental Health

INFORMATION YOU NEED TO INCLUDE WITH YOUR COMPLETED CLIENT REIMBURSEMENT FORM

FOR ALL BENEFITS:

- Original receipt(s) for proof of payment. Credit card/Debit (Interac) slips are not acceptable forms for proof of payment.
- Sign and complete all applicable parts of this NIHB Client Reimbursement Request Form. Forms that are not signed will be returned to the client for signature. **Please see exceptions to the Dental /Orthodontic and Medical Transportation Benefits below.**
- If applicable, submit your detailed statement or explanation of benefits form from all other health plan(s)/program(s). Note: Original receipts are not required when submitting the detailed statement or explanation of benefits form as the primary insurer requires them. In such cases, a copy of the original receipt is acceptable.

Prescription Drugs

- No additional information other than what is listed above is required.

In addition to the items listed above, please submit the specific requirements for the benefits listed below:

Medical Supplies and Equipment, Vision & Eye Care

- A copy of your prescription.

Dental or Orthodontic Services (Please note: When submitting for reimbursement specifically for **Dental or Orthodontic Services only**, you may use the NIHB Client Reimbursement Request Form OR a Dent-29 Form).

- A completed claim form provided by the dental or orthodontic service provider. Only need **one** of the following:
 - Association des Chirurgiens Dentistes du Québec Dental Claim and Treatment Plan Form
 - Standard Dental Claim Form
 - Canadian Association of Orthodontics Information Form

Medical Transportation (Please note: When submitting for reimbursement specifically for medical transportation **only**, you may use the NIHB Client Reimbursement Request Form OR a regional specific medical transportation form provided by the Health Canada regional office).

- Proof of your medical appointment attendance.

MAILING INSTRUCTIONS

For all reimbursements (other than Orthodontics), please mail your completed form(s) and receipt(s) to the Health Canada Regional Office where service was provided.

BC Region

Non-Insured Health Benefits
First Nations and Inuit Health
Health Canada
757 West Hastings Street, Suite 540
Vancouver, British Columbia V6C 3E6
Telephone (toll-free): 1-800-317-7878
Dental (toll-free): 1-888-321-5003

Alberta Region

Non-Insured Health Benefits
First Nations and Inuit Health
Health Canada
9700 Jasper Avenue, Suite 730
Edmonton, Alberta T5J 4C3
Telephone (toll-free): 1-800-232-7301
Dental (toll-free): 1-800-232-7301

Saskatchewan Region

Non-Insured Health Benefits
First Nations and Inuit Health
Health Canada
2045 Broad Street, 4th Floor
Regina, Saskatchewan S4P 3T7
Telephone (toll-free): 1-800-667-3515
Dental (toll-free): 1-877-780-5458

Manitoba Region

Non-Insured Health Benefits
First Nations and Inuit Health
Health Canada
391 York Avenue, Suite 300
Winnipeg, Manitoba R3C 4W1
Telephone (toll-free): 1-800-665-8507
Dental (toll-free): 1-877-505-0835

Ontario Region

Non-Insured Health Benefits
First Nations and Inuit Health
Health Canada
1547 Merivale Road, 3rd floor
Postal Locator 6103A
Nepean, Ontario K1A 0L3
Telephone (toll-free): 1-800-640-0642
Dental (toll-free): 1-800-640-0642

Quebec Region

Non-Insured Health Benefits
First Nations and Inuit Health
Health Canada
200 René-Lévesque Boulevard West
Guy-Favreau Complex, 4th floor
Montréal, Québec H2Z 1X4
Telephone (toll-free): 1-877-483-1575
Dental (toll-free): 1-877-483-5501

Atlantic Region

Non-Insured Health Benefits
First Nations and Inuit Health
Health Canada
1505 Barrington Street
Suite 1525, 15th Floor, Maritime Centre
Halifax, Nova Scotia B3J 3Y6
Telephone (toll-free): 1-800-565-3294
Dental (toll-free): 1-800-565-3294

Northern Region (NWT & Nunavut)

Non-Insured Health Benefits
First Nations and Inuit Health
Health Canada
Qualicum Building
2936 Baseline Rd., Tower A – 4th Floor
Ottawa, Ontario K1A 0K9
Telephone (toll-free): 1-888-332-9222
Dental (toll-free): 1-888-332-9222

Northern Region (Yukon)

Non-Insured Health Benefits
First Nations and Inuit Health
Health Canada
300 Main Street, Suite 100
Whitehorse, Yukon Y1A 2B5
Telephone (toll-free): 1-867-667-3942
Dental (toll-free): 1-888-332-9222

FOR ORTHODONTIC SERVICES

Please mail your completed orthodontic forms and receipt(s) to the Orthodontic Review Centre.

Orthodontic Review Centre

Non-Insured Health Benefits
First Nations and Inuit Health Branch
Health Canada
55 Metcalfe Street, 5th Floor
Postal Locator 4005A
Ottawa, Ontario K1A 0K9
Telephone: 1-866-227-0943