



MÉTIS HEALTH BENEFITS PROGRAM



INTRODUCTION

The Government of the Northwest Territories (GNWT) sponsors the *Métis Health Benefits* program to provide eligible Métis residents of the Northwest Territories access to a range of benefits not covered by hospital and medical care insurance.

Through this program, you receive coverage for eligible prescription drugs, dental services, vision care, medical supplies and equipment. You also receive benefits related to medical travel such as meals, accommodation and emergency ambulance services.

ELIGIBILITY

- Valid Northwest Territories Health Care Plan Card
- Sign a declaration that you are not registered under the Indian Act (commonly referred to as 'status Indian') or an Inuk recognized by an Inuit Land Claim organization;
- · Indicate self-identification as Métis; and,
- Provide a letter from one of the Indigenous governments or Indigenous organizations listed below confirming you are a member of one of the following Indigenous government or Indigenous organization whose members hold or asserts to hold Aboriginal rights in the Northwest Territories as affirmed by section 35 of the Constitution Act, 1982:
 - Dehcho First Nations as the regional government representing the Fort Providence Métis Council and Fort Simpson Métis Local #52
 - · Gwich'in Tribal Council
 - Northwest Territory Métis Nation as the regional government representing the Fort Resolution Métis Government, Fort Smith Métis Council and Hav River Métis Government Council
 - North Slave Métis Alliance
 - Sahtu Secretariat Incorporated
 - · Tłıcho Government

You must apply for the *Métis Health Benefits* program to be eligible for benefits. A *Métis Health Benefits*

application form may be obtained from https://www.hss.gov.nt.ca/sites/hss/files/metis-health-benefits-application.pdf or from your local health centre, public health unit, medical clinic, or from the Health Services Administration office of the Department of Health and Social Services.

BENEFITS

Alberta Blue Cross administers the following benefits for the *Métis Health Benefits* program on behalf of the GNWT.

PRESCRIPTION DRUGS

This program provides you with coverage for eligible prescription drug products as defined by Indigenous Services Canada Non-Insured Health Benefit (NIHB) Drug Benefit List, when the drug is prescribed by a recognized health care professional and dispensed by a licensed pharmacist. There are a few cases when the program will not cover the full cost of the claim and you may need to pay out of pocket:

- If the drug that is prescribed is not listed on the *NIHB Drug Benefit List*, or
- If you want a drug that is not the lowest cost equivalent (generic)

To avoid surprises, ask your pharmacist about the cost of your prescription before it is filled.

If a drug that has been prescribed for you is not on the NIHB Drug Benefit List, your health care professional or pharmacist may submit a Request for Exception Drug Form to Alberta Blue Cross on your behalf for prior authorization. The exception drug coverage is for a period not exceeding 12 months after which a request may be resubmitted for approval or you may pay the cost.

DENTAL SERVICES

You are eligible for 100 per cent coverage of the cost of eligible dental services, as defined by Indigenous Services Canada *NIHB Schedule of Dental Benefits*, and subject to plan limitations and exclusions.

Covered services may include check-ups, cleanings, fillings, extractions, root canals, crowns, dentures and orthodontics. **Prior approval is recommended for all dental services.** Speak with your dental provider

regarding eligible benefits. If your dental provider is outside the Northwest Territories, contact Alberta Blue Cross or Health Services Administration.

VISION CARE

This program provides a flat rate of up to \$300 for a standard prescription or \$440 for a high index prescription. Persons 18 years of age and older are eligible for vision care benefits every two years. Persons under 18 years of age are eligible for vision care benefits every year.

Covered services may include frames, lenses, and contact lenses. **Prior approval is recommended for all vision care benefits.** Speak with your optical provider regarding eligible benefits.

Major repairs to frames or lenses may be considered up to \$125, and minor repairs up to \$25.

Services not listed in the NIHB fee guide may be considered on an exception basis. Medical justification must be provided by an ophthalmologist.

MEDICAL SUPPLIES AND EQUIPMENT

The program will pay reasonable and customary charges for medically necessary supplies and equipment as follows:

- Audiology equipment (e.g. hearing aids)
- Diabetic supplies and equipment (e.g. blood testing strips and injection supplies)
- Incontinence products for adults and disabled children only
- Medical equipment (e.g. wheelchairs and walkers)
- Medical supplies (e.g. bandages and dressings)
- · Orthotics and custom-made footwear
- Oxygen and respiratory supplies and equipment
- Pressure garments and
- Prosthetics

To make a claim for these supplies, you will need a prescription or written order from a recognized health care professional.

Many of the medical supplies and equipment items require prior approval in order for the product to be covered by the program.

MEDICAL TRAVEL

This program may reimburse accommodations, meals and transportation expenses incurred when you are required to travel to access medical treatment not available in your home community. For travel related to dental services, expenses **must** be approved in advance by Alberta Blue Cross.

Expenses eligible for reimbursement may include the following, **subject to prior approval:**

- Private Accommodations
- Commercial Accommodations
- Boarding Facilities
- Meals
- Escorts and/or interpreter services
- Travel (air and ground) to the nearest health clinic or hospital to receive health services not available in your home community or not covered by provincial or territorial travel assistance programs
- Emergency Ambulance Services that originate in the Northwest Territories may be considered in some circumstances

Claims will be paid according to the current Indigenous Services Canada NIHB schedule of prices.

For more information and links to claim or prior approval forms, visit www.hss.gov.nt.ca.

HOW TO CLAIM

Each person registered on this program is provided with an Alberta Blue Cross identification card. Please carry this card with you at all times to access services.

Most providers directly bill Alberta Blue Cross, so you can avoid paying out of pocket for services. If your provider does not accept direct billing, you will need to submit your claim with original receipts

- on the Alberta Blue Cross member site at ab.bluecross.ca,
- through the Alberta Blue Cross My Benefits app, or
- mail a completed Alberta Blue Cross Health Services Claim Form (available from your provider or online at ab.bluecross.ca/forms.html).

If you submit your claim online, you can sign up to receive your reimbursement through direct deposit; otherwise, your reimbursement will be mailed to your home address.

You are only able to claim eligible benefits in the Indigenous Services Canada NIHB schedule.
All claims for reimbursement must be submitted within 12 months of the date on the receipt.

COORDINATION OF BENEFITS

In addition to your *Métis Health Benefits* sponsored by the GNWT, you also might have coverage for prescription drugs, dental services or other benefits through another supplementary health benefit plan. For example, you might qualify under another plan because you or your spouse work for an employer that provides such benefits, or you have coverage through the Workers Safety and Compensation Commission or a private insurance plan.

In such cases, the *Métis Health Benefits* program is considered **payor of last resort**.

Therefore, you must:

- 1. Claim through your other plan first.
- 2. If the full cost is not covered by your other plan, complete the relevant Alberta Blue Cross Claim form and submit it for reimbursement after you have claimed through your other plan. Be sure to attach your confirmation of payment from the other insurance plan. You will then be reimbursed for eligible amounts up to the limits of the Métis Health Benefits program.

*This brochure is intended to provide an overview of this program for your convenience. It is not a legal document nor a complete listing of benefits.

If there are any changes to your coordination of benefits, please contact Health Services Administration in Inuvik.

At the date of publication, the information contained in this brochure is considered to be true and correct. Changes after the publication date may impact the accuracy of the information. Please contact Health Services Administration at 1-800-661-0830 or healthcarecard@gov.nt.ca for the most up-to-date information.

CLAIMING AND BENEFIT INQUIRIES

If you have questions about your benefits or require any assistance with claiming, please contact Alberta Blue Cross toll free at 1-800-661-6995.



Please have your Alberta Blue Cross identification card on hand when you call.

PROGRAM INFORMATION

For an application for this program or information regarding eligibility for the *Métis Health Benefits* program, please contact:

Health Benefits Program

Health Services Administration
Department of Health and Social Services
Government of the Northwest Territories
Bag #9, Inuvik, NWT X0E 0T0

Phone toll free 1-800-661-0830 Phone 867-777-7400 Fax 867-777-3197 Email healthcarecard@gov.nt.ca

Website www.hss.gov.nt.ca

Individuals who are First Nations or Inuit need to access benefits through Indigenous Services Canada Non-Insured Health Benefits (NIHB) program administered by Health Services Administration at the above address.

If you would like this information in another official language, contact us at 1-855-846-9601.



