



First Nations Health Authority
Health through wellness

Guide to Mental Health Counselling Services

First Nations Health Benefits



First Nations Health Authority Health Benefits Contact Information

General

Toll-Free: 1.855.550.5454

Email: healthbenefits@fnha.ca

Operations (Claim Specific)

Dental

Medical Supplies & Equipment

Medical Transportation

Mental Health Crisis Intervention

Indian Residential School Resolution Health Support Program

- **Short Term Crisis Intervention Mental Health Counselling - Fax Number: 604.666.6458**
- **Indian Residential School Resolution Health Support Program - Fax Number: 604.658.2833**

MSP Coverage

Pharmacy

Vision

Toll-Free: 1.800.317.7878

Dental Toll-Free: 1.888.321.5003

Indian Residential School Resolution Health Support Program Toll-Free: 1.877.477.0775

Fax: 1.888.299.9222

Please have your Status card and CareCard ready

In-person Inquiries

1166 Alberni Street, Room 701

Vancouver, BC V6E 3Z3

Mailing Address

First Nations Health Authority

Health Benefits Program - Client Services

540 - 757 West Hastings Street

Vancouver, BC V6C 1A1

Online

www.fnha.ca/benefits



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Table of Contents

1.0 Introduction	4
1.1 Purpose of the Guide	4
1.2 Overview of Counselling Provided by First Nations Health Benefits	4
2.0 Mental Health Counselling Provider Enrolment	5
2.1 Mental Health Counselling Provider Eligibility	5
2.2 Mental Health Counselling Provider Enrolment Process	5
2.3 Provider Roles and Responsibilities	7
2.4 Provider Audits	9
2.5 Privacy	10
3.0 Short-Term Crisis Intervention Mental Health Counselling Benefit	11
3.1 Short-Term Crisis Intervention Mental Health Counselling	11
3.2 Client Eligibility	12
3.3 Benefit Coverage	12
3.4 Prior Approval Process	13
3.5 Claim Submission	14
4.0 Indian Residential School – Resolution Health Support Program	17
4.1 IRS RHSP Individual and Family Counselling	17
4.2 Client Eligibility	17
4.3 Benefit Coverage	18
4.4 Prior Approval Process	20
4.5 Claim Submission	20
5.0 Appeal Process	21
6.0 Medical Transportation Assistance	22
7.0 Mental Health Counselling Benefit Resources	23
7.1 Mental Health Programming	23
Appendix 1: Mental Health Counsellor Provider Agreement	24
Appendix 2: Mental Health Counselling Prior Approval Form	28
Appendix 3: STCIMHC and IRS RHSP Flow Chart	32
Appendix 4: Glossary	33

1.0 Introduction

1.1 Purpose of the Guide

The purpose of this Guide is to outline the general and program-specific terms and conditions, criteria, guidelines and policies under which the First Nation Health Authority (FNHA), First Nations Health Benefits (FNHB) Short-Term Crisis Intervention Mental Health Counselling (STCIMHC) Benefit and the Individual and Family Counselling component of Indian Residential School (IRS) Resolution Health Support Program (RHSP) operate.

While the STCIMHC Benefit and IRS RHSP use the same provider enrolment process, it is important to note that the benefits differ from each other in regards to benefit delivery. This guide provides information about the benefits common requirements for mental health counselling provider enrolment and an overview of the STCIMHC Benefit and IRS RHSP in regards to:

- Client eligibility;
- Client responsibilities;
- Benefit coverage;
- Prior Approval Process;
- Claims Submission Process; and
- Procedure for Appeals.

In the event that this Guide does not address questions regarding general policies, processing of payment requests, or specific conditions, the provider should contact the First Nations Health Authority Health Benefits office.

1.2 Overview of Counselling Covered by STCIMHC Benefit and IRS RHSP

The STCIMHC Benefit and IRS RHSP operate as part of a continuum of mental wellness programs provided by the First Nations Health Authority which are linked to mental wellness services that are provided by communities, and provinces and territories. An overview of other FNHA mental health programming can be found in section 7.2 of this Guide.

Note that STCIMHC Benefit and IRS RHSP have some differences with respect to policies and requirements. A flowchart to help providers understand how to access STCIMHC Benefit and IRS RHSP can be found in Appendix 3 of this Guide.

FNHB's Short-Term Crisis Intervention Mental Health Counselling (STCIMHC) Benefit

The FNHB STCIMHC Benefit is intended to provide coverage for mental health counselling to address crisis situations when no other mental health services are available and/or being provided. This benefit is intended to support the provision of immediate psychological and emotional care to individuals in significant distress to stabilize their condition, minimize potential trauma from an acute life event, and as appropriate, transition them to other mental health supports.

IRS RHSP Individual and Family Counselling

IRS RHSP provides eligible former Indian Residential School students and their families with access to mental health support services so they may safely address the broad spectrum of mental wellness issues related to the impacts of Indian Residential Schools. IRS RHSP intends to fulfill commitments made in the 2007 IRS Settlement Agreement on behalf of Canada but delivered in BC by the FNHA.

2.0 Mental Health Counselling Provider Enrolment

Enrolment of mental health counselling providers for STCIMHC Benefit and IRS RHSP are managed by FNHB. All mental health counselling providers wishing to serve clients for reimbursement by either of these two benefits must first enroll with FNHA Health Benefits. Providers will be enrolled only if they meet the eligibility requirements.

2.1 Mental Health Counselling Provider Eligibility

To be enrolled, mental health counselling providers must be registered with a legislated professional regulatory body and eligible for independent practice in the province or territory in which the service is being provided. Eligible mental health providers must have:

- Education minimum of a Master's degree in a clinical counselling discipline from an accredited institution;
- Experience as a counsellor for a period of five (5) to seven (7) years preferred
- Experience as a counsellor working with First Nations clients for three (3) to five (5) years preferred
- Knowledge of First Nations culture and traditions and/or a willingness to learn of First Nations culture and traditions in order to provide a culturally appropriate service;
- Proof of current membership with the College of Psychologists of British Columbia, the British Columbia College of Social Workers, the British Columbia Association of Clinical Counsellors, and / or the Canadian Counselling and Psychotherapy Association;
- Completed the Indigenous Cultural Competency Course hosted by Provincial Health Services Authority (PHSA)
- Completed the FNHA cultural orientation/onboarding module (to be available in June 2015)

2.2 Mental Health Counselling Provider Enrolment Process

Enrolment Process

Mental health providers wishing to deliver services reimbursed by STCIMHC Benefit and/or IRS RHSP must complete and submit a Mental Health Counsellor Provider Agreement Form to the FNHA Health Benefits office. A complete list of documents required for enrolment is included in the Form.

Please note

The mental health provider is also required to disclose any work that they do with other mental health programs or community organizations providing services to First Nations.

Upon receipt of the Mental Health Counsellor Provider Agreement Form, FNHA Health Benefits will review the application for approval of eligibility.

A copy of the Mental Health Counsellor Provider Agreement Form found in Appendix 1 may be downloaded from the FNHA website [www.fnha.ca/benefits]. Providers who do not have internet access may contact the FNHA Health Benefits office to request a copy by fax or mail.

Changes in Provider Information

In order to keep records up-to-date, avoid delays in payment requests, and ensure delivery of communication updates via e-mail, fax, or mail, mental health counselling providers must notify their FNHA Health Benefits office of any changes to the information provided in the enrolment process.

Written notice must be made by fax, email or mail to inform of a change in one of the following:

- Fax number
- Phone number
- E-mail address
- Correction to current address
- Change of ownership/practice
- Opening of a private practice
- Re-enrolment as a mental health counselling provider

Termination of Enrolment

The mental health counselling provider's enrolment may be terminated at any time by either party without cause upon providing the other party with 45 days written notice. If providers wish to terminate their enrolment, they must send written notice by fax or registered mail to the FNHA Health Benefits office.

Enrolment will be terminated immediately if FNHA Health Benefits determines that the provider has submitted fraudulent claims or engaged in professional misconduct or incompetent practice. In such cases, FNHA Health Benefits will notify the appropriate police authority and/or professional regulatory body. FNHA Health Benefits will not process payment requests from the provider dated after the enrolment termination date.

Termination of provider enrolment does not terminate any rights or obligations of the provider or FNHA Health Benefits regarding provider audit activities.

Documentation Updates

Mental health counselling providers must adhere to all Program requirements as defined in this Guide.

The FNHA will communicate any updates to this Guide, or related policies and benefits, to clients, providers and stakeholders in a timely manner. It is important that providers retain the most current documentation to ensure that STCIMHC Benefit and/or IRS RHSP requirements are met.

2.3 Provider Roles and Responsibilities

Before initiating treatment, mental health counselling providers must confirm that any services they propose are eligible for coverage by the benefit as defined in this Guide, otherwise they will not be reimbursed. The submission of a payment request by a provider indicates understanding and acceptance of the terms and conditions for receiving payment for services through either the FNHA Health Benefits STCIMHC Benefit or IRS RHSP.

Mental health counselling providers must:

- Obtain prior approval before the initial assessment and initiating treatment;
- Confirm that the client is eligible for benefit coverage under the STCIMHC Benefit or IRS RHSP;
- Ensure that the client understands the terms, conditions, and limitations of the applicable benefit prior to starting counselling;
- Complete a client assessment and discuss the treatment and recommended counselling sessions with the client;
- Complete a treatment plan to be kept on the client's file. As part of the treatment plan, develop an aftercare plan that links the individual back to community based mental health services or culturally appropriate services during and/or after the treatment;
- Refer the client to another mental health care service or health support if he or she is not eligible for the STCIMHC Benefit or IRS RHSP;
- Report any major change in their work arrangement with another mental health program providing services to First Nations within 60 days of this new arrangement or change;
- Keep records of appointments for each client (including date and time) and client confirmation of attendance for audit purposes;
- Ensure that they do not knowingly submit a claim for payment through FNHA Health Benefits STCIMHC Benefit or IRS RHSP for the provision of mental health services that have or will be billed to another plan/program;
- Cooperate with all the FNHA Health Benefits audit activities based on generally accepted industry standards, and grant access to location and documentation required to determine compliance with policies outlined in this Guide;
- Comply with professional regulatory body requirements for security, police record checks, and client files management; and
- Inform clients of any possible or actual privacy breaches and provide the client with information regarding their right to initiate a complaint to the responsible regulatory body.
- Not represent himself/herself as an agent or representative of FNHA Health Benefits in respect of any counselling services provided to FNHA clients.

Utilization of Telehealth in Mental Health Counselling

The STCIMHC Benefit and IRS RHSP have developed guidelines and procedures for the limited provision of mental health services through telehealth (i.e. the use of information and communications technology, such as video-conferencing or telephone, to deliver mental health services). When telehealth is considered to deliver mental health counselling, the client must agree to its use and retains the right to revert to face-to-face counselling at any time.

Provider Responsibilities:

- Providers are expected to meet the standards and code of ethics of their respective legislated regulatory bodies and provincial/territorial regulations in the provision of mental health services through telehealth, including client privacy and confidentiality.
- In provinces or territories where a provider's regulatory body does not have guidelines for the provision of telehealth, providers should follow the Model Standards for Telepsychology Service Delivery adopted by the Association of Canadian Psychology Regulatory Organizations (www.acpro-aocrp.ca).¹
- Providers are responsible to ensure their ongoing competence with service delivery technologies for mental health, and to mitigate any potential negative impacts of the technologies on clients.
- Providers must determine the suitability of telehealth services for delivering mental health services to a client. This determination should be based on the provider's professional judgment that takes into consideration such factors as client safety and the accomplishment of therapeutic goals.
- Providers are expected to take steps to ensure that security measures are in place to protect client privacy and/or information from unintended access or disclosure.

Process:

- Initial client assessments should be undertaken in-person. In exceptional circumstances, assessment via telehealth may be allowable with the approval of FNHA Health Benefits.
- The technology (i.e. video conferencing or telephone) and location (i.e. nursing station, community health centre, or other) used to provide counselling services will be determined by the provider based on the client's case and in accordance with the provider's regulation related to the delivery of telehealth services.
- The provider must have a process in place to confirm the client's attendance through telephone log, attendance sheet, and/ or email confirmation, depending on the modality.
- Providers will not receive additional compensation for any costs associated with the utilization of telehealth.

Please note

Mental health counselling providers are expected to follow applicable privacy legislation, regulations and professional regulatory body requirements applicable to maintaining their records. Client files are in the control of the provider and not the FNHA. In the case of an audit, providers will grant the FNHA access to these files for audit purposes, in a manner that is permissible under the applicable legislation, regulations and the requirements of their regulatory body.

See the terms and conditions as outlined on the Mental Health Counsellor Provider Agreement Form.

¹ <http://www.acpro-aocrp.ca/documents/ACPRO%20Model%20Standards%20for%20Telepsychology%20Service%20Delivery.pdf>

2.4 Provider Audits

Audit Objectives

The objective of a provider audit is to confirm that payment requests have been submitted in compliance with the applicable Terms and Conditions of the benefits by:

- Detecting any billing irregularities and recovering payment for ineligible claims;
- Ensuring appropriate billing as defined by negotiated regional schedules;
- Ensuring that the services paid for were received by an eligible client;
- Validating active licensure of providers; and
- Ensuring compliance with the benefit policies (e.g. completed assessments and treatment plans included in client files).

The FNHA reserves the right to withhold future payments to providers, pending receipt of monies found to have been paid in error. Providers may contact the FNHA office to clarify or appeal the payment error reversal.

While the audits do not focus on professional practice issues, if a practice related issue arises during an audit or if the issue cannot be resolved directly with the service provider, the FNHA may refer the matter to the appropriate regulatory body.

Provider Responsibilities

The provider shall cooperate with the FNHA in all audit activities based on generally accepted industry practices. Upon request, the provider shall grant access to its location during regular business hours to inspect, review and reproduce a client's record maintained by the provider, as permitted by the law.

Please note that when an audit is conducted due to billing irregularities, the provider will not be allowed to provide services and/or submit claims until the situation has been resolved. A provider suspended by his or her regulatory body will also not be allowed to provide services and/or submit claims.

Provider Audit Component

To carry out the payment requests verification and on-site audit components of the benefits, the FNHA requires access to information, including, but not limited to the following:

- Client information;
- Invoices;
- First payer statement of benefits if client has additional coverage; and
- Appointment schedule.

2.5 Privacy

The personal information provided to the FNHA is managed in compliance with the *Personal Information Protection Act* (“PIPA”) in British Columbia. The FNHA only collects, uses, and discloses the information in order to administer the mental health counselling services authorized under the STCIMHC benefit or IRS RHSP program.

The FNHA requires the provider to submit business contact information, as well as personal information, such as resume, relevant work experience, and criminal records check, to process provider enrolment. In limited and specific situations, the provider’s contact information, as well as relevant personal information, may be disclosed without consent in accordance with section 18 of PIPA.

In addition to protecting personal information, PIPA gives a person the right to request access to and correction of his/her personal information. A person also has the right to file a complaint with the Office of the Information and Privacy Commissioner of British Columbia if he/she thinks that his/her personal information has been handled inappropriately. For more information about privacy, please contact the FNHA’s Privacy Office at 604-693-6844 (Toll Free 1-844-364-7748) or by email at: privacy@fnha.ca.

3.0 First Nations Health Benefits

FNHA Health Benefits provides a specific number of health related goods and services to meet medical or dental needs not covered by provincial, territorial, or other third party health insurance for BC First Nations.

The benefits provided under the FNHA Health Benefits program include Short-Term Crisis Intervention Mental Health Counselling, IRS RHSP, BC Medical Services Plan premiums, Pharmacy, Dental Care, Medical Supplies and Equipment, Vision Care, and assistance with Medical Transportation to access medical services not available at-home/on-reserve or in the community of residence.

General Principles

The principles of the FNHA Health Benefits program are as follows:

- Benefits will be provided based on professional, medical or dental judgment, consistent with the best practices of health services delivery and evidence-based standards of care.
- The program will be managed in a cost-effective manner.
- Management process will involve transparency and joint review structures.
- In cases where a benefit is covered under another plan, FNHA Health Benefits will act as the primary facilitator in coordinating payment in order to ensure that the other plan meets its obligations and that clients are not denied service.

3.1 Short-Term Crisis Intervention Mental Health Counselling

FNHA Health Benefits Short-Term Crisis Intervention Mental Health Counselling (STCIMHC) Benefit provides eligible clients with coverage for mental health counselling to address crisis situations when no other appropriate services are available.

This crisis mental health counselling benefit is intended to support the provision of immediate psychological and emotional care to individuals in significant distress in order to stabilize their condition, minimize potential trauma from an acute life event and, as appropriate, transition them to other mental health supports. A crisis may include the following:

- Distress manifested by symptoms of physical, cognitive, emotional or behavioral disturbance;
- Inability to care for self and without individual, family, and/or community support and resources to deal with the issue; and/or
- Nature of the circumstances require the individual to resolve the issue urgently

Crisis counselling is one component supporting mental wellness, and this benefit is intended to address short term crisis management only. It is not a substitute for other forms of mental health services provided by the FNHA or federal departments and levels of government. The provision of this benefit is part of FNHA's commitment to work towards the development of a coordinated and comprehensive approach to mental health and addictions programming. STCIMHC is offered in a way that:

- Recognizes FNHA Health Benefit's STCIMHC Benefit as a component of a mental wellness continuum that includes other FNHA, community-based, regional and provincial mental health programming and services; and
- Supports culturally competent service delivery.

3.2 Client Eligibility

FNHA Health Benefits offers health-related goods and services to any First Nations person (or child under 1 year of age of a First Nations person who meets all of these criteria) who:

- has a Canadian “Indian Status” number;
- is a resident of British Columbia (as defined by BC’s Medical Service Plan) and having active Medical Service Plan coverage; and
- is not covered under any other benefits provided by the Federal Government or First Nations organization through self-government or land claims agreements.

Roles and Responsibilities of Clients

Clients must access any alternate health coverage that is available to them prior to accessing FNHB. They should also contact their local community organizations (health centre, friendship centre, or primary health care provider) and/or FNHA office to determine if community mental health programs are available.

Only services delivered by a provider enrolled with FNHA Health Benefits are eligible for reimbursement. Clients can contact the FNHA Health Benefits office to obtain a list of providers already enrolled with FNHB.

Clients can make a complaint to the mental health counselling provider’s regulatory body if they have concerns about the treatment received.

Clients wishing to appeal a benefit decision by FNHA Health Benefits are required to follow the steps outlined in the appeal procedure section of this Guide. Clients are responsible to keep their information up-to-date in order to avoid delays in accessing FNHA Health Benefits.

3.3 Benefit Coverage

Benefit Coverage and Frequency Guidelines

The STCIMHC Benefit provides up to a maximum of 15 one-hour sessions (with up to five additional one hour sessions, see exceptions) per mental health crisis over a 20 week period, not including the initial assessment (see Glossary in Appendix 4 of this Guide for the definition of “session”).

Eligible billable services under the STCIMHC Benefit include:

- Initial assessment (maximum of 2 one hour sessions) performed by an enrolled provider;
- Counselling sessions on a fee-for-service basis as per Prior Approval Form (e.g. individual, couple, family, or group counselling); and

All services and modalities for the delivery of services must be prior-approved by FNHA Health Benefits

Services submitted for coverage must not already be eligible for coverage by another provincial/territorial, federal, and/or private plan or program.

Exceptions and Criteria for Approval

In addition to the initial 15 sessions, an additional five sessions may be covered in order to support a client's transition to other type of mental health services. A prior approval request must be submitted to the FNHA Health Benefits office to request an extension.

Exclusions

Exclusions are not benefits and are not covered under any circumstances; they are also not subject to the appeal process. Exclusions include, but are not limited to:

- Psychiatric emergencies for person(s) at risk of harm to self or others;
- Non-crisis counselling;
- Services funded by another program or agency;
- Psychiatric and family physician services;
- Psychoanalysis;
- Psychoeducational assessments;
- Educational and vocational counselling;
- Substance abuse counselling/therapy;
- Life skills training;
- Early intervention programs for infants with delayed development;
- Assessment services for issues such as fetal alcohol spectrum disorder, learning disabilities and child custody;
- Expressive arts therapy;
- Hypnotherapy;
- Court-ordered assessment services to clients;
- Services which are part of, or to be used for, legal actions;
- Sex therapy;
- Incarcerated clients; and
- Services provided congruently with the Indian Residential School Program.

3.4 Prior Approval Process

Mental Health Counselling providers must obtain prior approval from FNHA Health Benefits for all services. The Prior Approval Form is Appendix 2 of this Guide. Prior approval will be given when the following conditions have been met:

- The client is eligible for coverage;
- The mental health counselling provider is enrolled with FNHA Health Benefits; and
- The requested service is an FNHA Health Benefits benefit (e.g. is crisis counselling) and falls within the frequency limits.

The following information is required to process a prior approval request:

- Client identification information, as described in the Section 3.5 Claim Submission;
- Client's Personal Health Number (Care Card Number)
- Client's address
- Start and end date of the treatment;
- Proposed counselling session schedule;
- Number of sessions requested (up to a maximum of 15 one hour sessions) and the cost of the treatment proposed;
- Confirmation that the services proposed meet the definition of crisis counselling as defined in this Guide and that the crisis can be addressed within the number of sessions requested;
- Confirmation of prior involvement with the client
- Confirmation that an aftercare strategy was developed to link the individual back to community based mental health services or other local and culturally appropriate services during and/or after the treatment, when appropriate;
- Confirmation that alternate health coverage has been sought when applicable; and
- The Prior Approval Form signed by the client/guardian and the provider (and supervisor when applicable) is provided. Stamped copies of signatures are not acceptable.

Please note

If prior approval is granted, a prior approval number will be provided by FNHA Health Benefits. This number must be provided on all claims submissions. Only then should the provider proceed with the provision of service to the client. Treatment should start within two weeks following the prior approval. Mental health counselling providers may contact the FNHA Health Benefits office for additional information about the prior approval process.

3.5 Claim Submission

Coordination of Benefits

Clients are required to access any public (federal, provincial, or territorial) or private health care plan/program for which they are eligible prior to accessing FNHA Health Benefits. If the client has other coverage, the provider must submit claims to the other payer first before submitting to FNHA Health Benefits.

Where a client has other coverage, evidence in the form of an Explanation of Benefits or other written confirmation from the other carrier will be required before a claim can be processed. In the case where another carrier is unable to provide this, FNHA Health Benefits may coordinate payment in order to ensure that the other plan meets its obligations and that those clients are not denied services.

Client Identification

To facilitate reimbursement, in addition to the Prior Approval Number, the following information must be provided for each payment request:

- Surname (under which the client is registered);
- Given names (under which the client is registered);
- Date of birth (date format YYYY-MM-DD);
- Client Identification Number/ Status Card;
- Personal Health Number (Care Card Number); and
- Physical Address

It is recommended that clients who have a Status Card be asked to present their card to the provider to ensure that the client information is entered correctly, and to protect against any mistaken identity.

Mental Health Counselling Provider Reimbursement

Please note that FNHA Health Benefits will reimburse providers when the following criteria are met:

- Claim has been submitted to any alternate health plans (public or private) to which a client is eligible prior to being submitted to FNHA Health Benefits;
- Claim has not been submitted for any amount or for work which has already been covered by any other federal or provincial program, for which the provider has received alternate payment via salary or contract;
- Prior approval has been obtained;
- Fees charged are in accordance with those set by the regional fee schedules. Under no circumstances are individual counselling fees to be charged when a client has received counselling as part of group, couple or family counselling;
- Confirmation of attendance signed by the client or parent/legal guardian and/or in the case of telehealth, other appropriate confirmation (e.g. telephone log, client signature obtained at a nursing centre at the time of the call) along with the invoice is sent to the FNHA Health Benefits office in order to demonstrate that the client has received the service.

Please note that there will be no reimbursement for missed appointments and the FNHA reserves the right to withhold payment if attendance cannot be confirmed; and

- A signed copy of the mental health “Fee for Service” invoice has been submitted to the FNHA in order to prove that services have been rendered.

Payment requests older than one (1) year from the service provision date will not be accepted and will be returned to the provider.

Client Reimbursement

Mental health counselling providers are strongly encouraged to submit invoices directly to FNHA Health Benefits so that clients do not face charges at the point of service.

Requests for direct client reimbursement for STCIMHC Benefit should be submitted to the FNHA within one year of the date of service.

The service must be an eligible benefit under FNHA Health Benefits, and the client must demonstrate that they meet all FNHA Health Benefits eligibility criteria, including that the service was provided by a provider enrolled with FNHB (see section 2.2).

All requests for reimbursement of eligible benefits must include a completed FNHA Health Benefits Client Reimbursement Form and original receipts. The FNHA Health Benefits Client Reimbursement Request Form is located on the FNHA website: www.fnha.ca/benefits

4.0 Indian Residential School - Resolution Health Support Program

The Indian Residential School – Resolution Health Support Program (IRS RHSP) is administered by FNHA Health Benefits in order to provide health support services directly to former students and their families (“clients”) to safely address a broad spectrum of wellness issues related to the impacts of Indian Residential Schools (IRS).

The IRS RHSP objectives are to:

- Provide mental health, emotional and cultural supports during all stages of the IRS Settlement Agreement process; and
- Provide emotional and cultural support services to those in attendance at Truth and Reconciliation Commission (“TRC”) events or Settlement Agreement commemoration events.

General Principles

The IRS RHSP operates according to a number of guiding principles:

- There is national consistency in available services and equitable access to services across Canada;
- All services are provided in a non-judgmental, sensitive and compassionate manner that meets the needs of eligible clients;
- The IRS RHSP is managed in a sustainable and cost-effective manner; and
- Administrative processes involve transparency and stakeholder input whenever agreed to with First Nations organizations.

4.1 IRS RHSP Individual and Family Counselling

Individual and family counselling is one component of RHSP, and this component is intended to have enrolled FNHA Health Benefits providers provide counselling services to assist clients to find ways of healing from IRS experiences. These services are offered individually or in family sessions as required by needs of the eligible clients for the duration of the Settlement Agreement process. Maintaining active enrolment as a RHSP counsellor (see section 2.0, Mental Health Counselling Provider Enrolment) is required before providing counselling services to clients.

4.2 Client Eligibility

A client is eligible for IRS RHSP health support services if they meet the one of the following criteria:

- **Former IRS Student:** A former IRS student regardless of the individual’s status (First Nations, Inuit, Métis, non-status, non-Aboriginal) or place of residence within Canada (on or off-reserve) who have received or are eligible to receive the Common Experience Payments (CEP) or who are resolving their claim against Canada through the Independent Assessment Process (IAP), or are participating in Truth and Reconciliation Commission (TRC) or commemoration events;
- **Family Members:** The family of former IRS students is defined as spouse/partner, those raised by or raised in the household of a former IRS student and any relations who have experienced effects of intergenerational trauma associated with an eligible family member’s time at an IRS;

- **Incarcerated Person:** Former IRS students or their family members who are incarcerated;
- **TRC Event Participants (National and Community Events):** Anyone who is in attendance at a TRC event is eligible to access IRS RHSP services during the event; and
- **Commemoration Event Participants:** Anyone in attendance at an IRS Settlement Agreement funded Commemoration event is eligible to access RHSP services during the event.

Please note that individuals who are *ineligible* to receive IRS RHSP counselling services include those who:

- Attended a school that is not recognized in the 2007 IRS Settlement Agreement, such as former IRS day school students; and
- Have opted out of the IRS Settlement Agreement.

4.3 Benefit Coverage

To access IRS RHSP counselling services, the client or their representative must contact FNHA Health Benefits to confirm client eligibility. Every new client must be verified for eligibility before receiving IRS RHSP services.

All counselling services must be provided by an eligible FNHA Health Benefits mental health counselling provider and receive prior approval by FNHA Health Benefits before treatment is initiated.

Up to 20 one-hour sessions per Prior Approval Form may be covered over a 12 month period, not including the initial assessment (see Glossary in Appendix 4 of this Guide for the definition of session). All services and modalities for the delivery of services must be prior-approved by the FNHA Health Benefits. Eligible billable services under the IRS RHSP Counselling services include:

- Initial Assessments on a fee-for-service basis for up to two hours in order to meet the client and complete a treatment. Please note prior approval is required for the initial assessment;
- Individual counselling sessions on a fee-for-service basis as per approved prior approval request; and Family counselling as included in the prior approval request and only billed at a pre-approved rate and not a per person rate.

Please note that clients must not already be eligible for coverage by another provincial/territorial, federal, and/or private plan or program.

Clients can make a complaint to the mental health counselling provider's regulatory body if they have concerns about the treatment received.

Exceptions and Criteria for Approval

Certain types of counselling services are provided on an exception basis and may be considered for coverage by IRS RHSP. These include, but are not limited to:

- Extension to the number of sessions required to provide on-going support to clients.
 - Should the counsellor and the client identify the need for additional counselling sessions after the expiry of the initial or subsequent Prior Approval Form; a new Prior Approval Form can be submitted for approval.
- Clients must access counselling services in their home province or territory, with the following exceptions:
 - Should the demand for counsellors go beyond regional capacity;
 - Should the service not be available in the home province; or
 - Should a neighbouring province/territory's service provider be the closest.

Please note

When services are provided outside a client's region of residence, counselling arrangements and travel costs are to be submitted, approved and reimbursed by the client's home region in partnership with outside region.

Mental health counselling providers are required to seek prior approval from FNHA Health Benefits for any exceptions. Additional information may be sought as to why additional sessions are required.

All exceptions are reviewed on a case by case basis.

Exclusions

Certain types of counselling services will not be provided under IRS RHSP under any circumstances and are therefore not subject to the appeal process.

Exclusions include, but are not limited to:

- Psychiatric emergencies for person(s) at risk of harm to self or others;
- Services funded by another program or agency;
- Psychiatric and family physician services;
- Psychoeducational assessments;
- Educational and vocational counselling;
- Early intervention programs for infants with delayed development;
- Assessment services such as fetal alcohol spectrum disorder, learning disabilities and child custody which are unrelated to IRS ;
- Court-ordered assessment/therapy services to clients; and
- Counselling services for children under the age of six, unless part of family therapy.

4.4 Prior Approval Process

Mental health counselling providers must obtain prior approval from FNHA Health Benefits. The Prior Approval Form is Appendix 2 of this Guide. Prior approval will be given when the following conditions have been met:

- The client is eligible for coverage;
- The mental health counselling provider is registered with FNHA Health Benefits; and
- The requested service is an IRS RHSP benefit (i.e. individual or family counselling) and falls within the frequency limits.

The following information is required to process a prior approval request:

- Client identification information;
- Start and end date of treatment;
- Number of sessions requested (up to 20) and the cost of treatment proposed;
- The Mental Health Counselling Prior Approval Form signed by the client and the provider (and supervisor when applicable) is provided. Stamped copies of signatures are not acceptable.

To minimize the potential for the client's health status deteriorating over time, prior approval requests are assessed within two weeks of being submitted. Once the assessment is complete, FNHA Health Benefits will advise the counsellor of the approval or denial of the treatment.

4.5 Claim Submission

Provider Reimbursement

Please note that FNHA Health Benefits will reimburse providers only when the following criteria are met:

- Prior approval has been obtained;
- The number of counselling sessions is reimbursed based on the regional payment guidelines;
- Fees charged are in accordance with those set by FNHA Health Benefits for individual counseling. Under no circumstances are individual counseling fees to be charged when a client has received counseling as part of family counseling;
- Mental health providers submit a signed copy of the mental health "Fee for Service" invoice to FNHA Health Benefits;
- An attendance form signed by the client along with the invoice is sent to FNHA Health Benefits in order to demonstrate that the client has received the mental health service. In cases of clients under the age of majority, a parent or legal guardian may sign the attendance form.
Please note that FNHA reserves the right to withhold payment if attendance cannot be confirmed; and
- There will be no reimbursement for missed appointments.

Providers must submit all invoices for payment every two months. Payment requests older than one year from the service provision date will not be accepted and will be returned to the provider.

5.0 Appeal Process

Eligible First Nations clients, their parent, legal guardian, and/or representative may initiate an appeal process when counselling services have been denied through FNHA Health Benefits according to circumstances. A client may have someone act on their behalf to initiate an appeal process as long as written authorization is obtained from the person seeking coverage.

For a case to be reviewed as an appeal, a signed note or letter from the client, parent or legal guardian, accompanied by supporting information from the mental health counselling provider must be submitted to FNHA Health Benefits according to circumstances. In many cases, the mental health counselling provider is required to provide part of the information being requested. The usual information requested by FNHA Health Benefits is:

- Reason for which the service is being requested;
- Confirmation that client accessed other services for which he/she may be eligible (e.g. provincial/territorial services, community services, friendship centres, etc.);
- How the proposed mental health counselling treatment will help the client deal with the current situation; and
- Any additional supporting information.

The client, parent, legal guardian or representative should submit their letter of appeal and supporting documentation by mail, clearly marked "APPEAL-CONFIDENTIAL". Services that are identified as exclusions will not be considered for appeal.

Upon receiving the appeal submission, the case will be reviewed by a health professional for a decision by FNHA Health Benefits as the case may be. The decision will be made based on the specific needs of the client, the justification, the availability of alternatives, and the respective FNHA Health Benefits policies.

The client or parent/legal guardian will receive a written explanation of the decision within 30 days of FNHA Health Benefits receiving the complete appeal documentation. The client, parent or legal guardian may also contact FNHA Health Benefits for an update if he/she has received contact within one month of submitting the appeal.

STCIMHC Benefit and IRS RHSP – Levels of Appeal

To initiate an appeal, the client should submit their documentation to the appropriate program:

Level 1

Clients can appeal to the Director of Operations, Health Benefits. The appeal should be clearly marked as "APPEALS-CONFIDENTIAL" and mailed to:

Director of Operations, Health Benefits
First Nations Health Authority
540-757 West Hastings Street
Vancouver, British Columbia
V6C 3E6

Level 2

If the client does not agree with the Level 1 Appeal decision, the client may choose to have the appeal reviewed at the second level to the FNHA Health Benefits Appeal Review Committee. The appeal should be clearly marked as “APPEALS-CONFIDENTIAL” and mailed to:

Health Benefits Appeal Review Committee
Attention: Vice-President, Health Benefits
First Nations Health Authority
540-757 West Hastings Street
Vancouver, British Columbia
V6C 3E6

Level 3

If the client does not agree with the Level 2 Appeal decision, the client may choose to have the appeal reviewed at the third and final level. The appeal should be clearly marked as “APPEALS-CONFIDENTIAL” and mailed to the FNHA CEO’s office:

CEO
First Nation Health Authority
#501 – 100 Park Royal South
West Vancouver, British Columbia
V7T 1A2

6.0 Medical Transportation Assistance

Medical transportation assistance may be provided for clients to the nearest appropriate mental health counselling provider. This assistance may include the provision of transportation, meals, and accommodations. Where economical, the counsellor may travel to the community in accordance with FNHA Health Benefit’s policies and based on prior approval from FNHA Health Benefits.

A maximum number of sessions should be arranged in order to minimize costs. All travel must be pre-approved by the respective program and be in line with the FNHA Health Benefits Medical Transportation Policy Framework which can be accessed on the FNHA website.

When required, medical transportation assistance may be covered for an escort to accompany the client to access mental health counselling services. Escort travel must be pre-authorized by FNHA Health Benefits, community or regional office according to the Medical Transportation Policy Framework policies for client escorts.

7.0 Mental Health Counselling Benefits Resources

7.1 Mental Health Support Programs

Many municipalities or other local governments, and provincial or territorial governments offer mental health programming, for example through non-profit organizations such as the Canadian Mental Health Association or local Aboriginal Friendship Centres. Please find below a list of some long-term mental health counselling or support programs offered to registered First Nations by the FNHA with one addition from Aboriginal Affairs and Northern Development Canada (AANDC). In many communities, the following programs are available and funded by the FNHA. Please consult with your Health Centre, Health Director or Band Administrator.

National Native Alcohol and Drug Abuse Program (FNHA)

The National Native Alcohol and Drug Abuse Program (NNADAP) seeks to help First Nations communities set up and operate programs aimed at reducing high levels of alcohol, drug, and solvent abuse among on-reserve populations. NNADAP supports a national network of 52 residential treatment centres, with some 700 treatment beds.

National Aboriginal Youth Suicide Prevention Strategy (FNHA)

The National Aboriginal Youth Suicide Prevention Strategy targets resources that support a range of community-based solutions and activities that contribute to improved mental health and wellness, increased resiliency and protective factors, and reduced risk factors associated with youth suicide among First Nations and Aboriginal youth between the ages of 10 and 30 years, their families and communities.

Building Healthy Communities (FNHA)

The Building Healthy Communities initiative is designed to assist First Nations communities to develop community-based approaches to youth solvent abuse and mental health crises, the two components of the initiative. First Nations communities have the flexibility to determine which component(s) to provide community-based programs, services and/or activities in.

Brighter Futures (FNHA)

The Brighter Futures initiative is a community-based health promotion and illness prevention program that offers learning-related activities that strive to increase awareness, change attitudes, build knowledge and enhance skills.

Family Violence Prevention Program (AANDC)

The Family Violence Prevention Program provides funding to assist First Nations in providing access to family violence shelter services and prevention activities to women, children and families ordinarily resident on-reserve.

Appendix 1:
Mental Health Counsellor Provider Agreement



First Nations Health Authority
Health through wellness

Mental Health Counselling Provider Agreement Form

Short Term Crisis Intervention Mental Health Crisis (STCIMHC) Benefits and Indian Residential Schools Resolution Health Support Program (IRS-RHSP)

This Provider Agreement sets the terms and conditions for submitting invoices to First Nations Health Authority for mental health counselling services provided to clients who are eligible for First Nations Health Benefits Short Term Crisis Intervention Mental Health Crisis (STCIMHC) benefits and Indian Residential Schools Resolution Health Support Program (IRS-RHSP) coverage. Mental health counselling service shall only be provided by Psychologists, Social Workers, and Psychological Associates with clinical or counselling designation who are licensed/certified, authorized, and in good standing with the regulatory body of the British Columbia and has entered into a Provider Agreement with First Nations Health Authority.

Please complete the form and fax back to the following numbers:

- Short Term Crisis Intervention Mental Health Counselling - Fax Number: 604.666.6458
- Indian Residential School Resolution Health Support Program (IRS RHSP) - Fax Number: 604.658.2833

Provider Application

- New Provider Agreement Update Existing Provider Information

Mental Health Provider Information

NAME OF COMPANY, ORGANIZATION OR SOLE PROPRIETOR

Provider Address

STREET NUMBER AND STREET NAME

CITY	PROVINCE/TERRITORY	POSTAL CODE
------	--------------------	-------------

PHONE NUMBER	FAX NUMBER	EMAIL
--------------	------------	-------

Preferred means of communication:

- Mail Fax E-mail

Professional Information

Type of Professional

- Psychologist Social Worker
 Psychological Associate Masters of Arts or Education

Class _____

*If you have checked "Social Worker," please indicate what class of registration you fall under within **BCCSW***

NAME	NAME OF REGULATORY BODY AND REGISTRATION NUMBER
------	---

Additional Information

Please attach any information regarding the following in appendix:

Professional Registration

Please attach a copy of your current Professional Registration with the Provincial Regulatory Body. Your professional registration must permit independent clinical practice.

Resume

Please attach a copy of your current resume and any other document outlining your relevant work experience.

Professional Liability Insurance

Please attach a copy of your current Professional Liability Insurance (liability insurance must meet regulatory body requirements, with a minimum of \$2 million annually).

Criminal Records Check

I have submitted a criminal record check to my regulatory body as part of my professional registration. YES NO

Where your regulatory body does not require a criminal record check, FNHA may request the submission of a criminal record check.

Current Mental Health Counselling Work Commitments

Please attach details of other federal, provincial, territorial and community based mental health programs with which you currently have a financial relationship, including any in-kind arrangements.

Cultural Competency and Experience with First Nations

The information in the next two sections may be shared with clients or communities on request.

The reality of intergenerational mental health and cultural trauma suffered by First Nations peoples has led to a significant need for cultural safety amongst members of these communities. Therefore, many First Nations peoples may seek options for treatment that is provided in a culturally competent manner in order to achieve mental wellness.

Please attach a page providing any previous experience you have working with First Nations individuals or communities, and with cultural competency, including any training in this area. You may be asked to provide additional evidence in support.

I have completed the **Indigenous Cultural Competency (ICC) Mental Health Core Training** hosted by Provincial Health Services Authority in BC

The ICC Mental Health Core Training is a mandatory requirement to be a provider for STCIMHC and IRS-RHSP. Please note that FNHA will not be responsible for payment or funding of the mandatory ICC training. You have one year to ensure that you have completed this new requirement as part of the enrolment process with the FNHA.

Current Areas of Clinical Expertise (Min. 2 years clinical experience)

- | | |
|--|---|
| <input type="checkbox"/> Abuse: Sexual, Physical Emotion | <input type="checkbox"/> Panic Attacks |
| <input type="checkbox"/> Addiction | <input type="checkbox"/> Self-Esteem/Confidence |
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Self-Harm or Self Injury |
| <input type="checkbox"/> Childhood Abuse/Trauma | <input type="checkbox"/> Stress |
| <input type="checkbox"/> Crisis Intervention | <input type="checkbox"/> Telehealth |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Trauma |
| <input type="checkbox"/> Grief | <input type="checkbox"/> Traumatic Loss |
| <input type="checkbox"/> Indian Residential Schools | <input type="checkbox"/> Violence: Witnessing |
| <input type="checkbox"/> Loss | |

Provider Agreement Terms and Conditions

1. The Mental Health Counselling Provider shall adhere to the terms and conditions in the FNHB Guide to Mental Health Counselling Services and related communications from FNHA.
2. The Mental Health Counselling Provider agrees that, in cases when a Client has any alternate health plan (public or private) for which a benefit is payable, the claim should be submitted to the other plan prior to submitting it to the FNHA Program.
3. The Mental Health Counselling Provider shall only provide service to FNHA clients by Psychologists, Psychological Associates, Social Workers and, in exceptional circumstances, by professionals with a Masters of Arts or Education in compliance with all applicable laws and regulations governing their profession, including the possession of all required licenses, certificates, permits, clinical record keeping and liability insurance that are necessary to allow it to lawfully provide mental health counselling services.
4. The Mental Health Counselling Provider shall ensure that the information in this Agreement is accurate, complete and up-to-date. The Mental Health Counselling Provider agrees that FNHA may validate registration with the applicable professional association at any time. The Mental Health Counselling Provider ensure enrollment in good standing with the respective Mental Health Provider Provincial Licensing Body as well as other eligibility requirements.
5. The Mental Health Counselling Provider agrees that the FNHA may request supporting documentation to audit or review any invoices submitted to FNHA for payment to ensure compliance with the terms and conditions of the STCIMHC benefit and IRS RHSP. The Mental Health Counselling Provider agrees to cooperate with the FNHA in any such audit or review and to provide information as required, in accordance with applicable laws, regulations and professional standards.
6. The Mental Health Counselling Provider understands that the FNHA may take action to recover amounts determined to have been inappropriately paid and/or overpaid.
7. The Mental Health Counselling Provider is not providing services to FNHA and it is not a service contractor to FNHA. The Mental Health Counselling Provider shall not represent itself as an agent or representative of the FNHA in any publicity or marketing.
8. Either the Mental Health Counselling Provider or the FNHA may terminate this billing agreement at any time without cause.
9. The Mental Health Counselling Provider agrees to the collection of your name, address and telephone number (or other necessary personal information) and use it to confirm your identity and professional registration, establish your eligibility for the STCIMHC benefit and IRS RHSP, and to be disclosed to FNHA clients who are requesting access to the STCIMHC benefit and IRS RHSP.

Upon submission of a claim as a Provider, you will be subject to the Terms and Conditions of the FNHA STCIMHC benefit and IRS RHSP as outlined in the FNHA Guide to FNHB Mental Health Counselling Services. It is the Provider's responsibility to be familiar with the terms and conditions of the FNHA Program. Providers will be advised of changes to the FNHA Short-Term Crisis Intervention Mental Health Counselling Benefit and IRS RHSP.

CONTACT NAME

PROVIDER SIGNATURE (NO STAMPS)

(MUST BE AN OWNER OR DIRECTOR WITH AUTHORITY TO BIND THE CORPORATION)

PREPARED BY

PHONE NUMBER

I agree to provide the following service(s):

Indian Residential School Counselling

Short-Term Crisis Intervention Mental Health Counselling

Both

Please complete this Provider Agreement in its entirety and return it to the First Nations Health Authority office as noted below. Incomplete or unsigned forms will be returned unprocessed.

Privacy Notice:

The personal information you provide to FNHA is governed in accordance with the Personal Information Protection Act ("PIPA") in British Columbia. We only collect the information we need to administer the Mental Health Counselling services authorized under the Health Benefits Program or Indian Residential Schools Resolution Health Support Programs. Purpose of collection: We require your personal information to consider you for enrollment as a provider of these services. Other uses or disclosures: In limited and specific situations, your personal information may be disclosed without your consent in accordance with section 18 of the Personal Information Protection Act ("PIPA") in British Columbia. Your rights under PIPA: In addition to protecting your personal information, PIPA gives you the right to request access to and correction of your personal information. You also have the right to file a complaint with the Office of the Information and Privacy Commissioner of B.C. if you think your personal information has been handled inappropriately. For more information about privacy, please contact the Privacy Office in FNHA at privacy@fnha.ca.

Appendix 2:
Mental Health Counselling Prior Approval Form



First Nations Health Authority
Health through wellness

Mental Health Counselling Prior Approval Form

First Nations Health Authority use
Prior Approval #:
Date:

Complete this form to apply for prior approval before commencing counselling funded through First Nations Health Benefits (FNHB). Please note that the initial client assessment *(maximum of two sessions for Crisis Intervention and Indian Residential School counselling) requires prior approval. Counselling services must be provided in accordance with the terms and conditions in the Guide to Mental Health Counselling Services – First Nations Health Benefits and treatment should start within two weeks following the prior approval.

Please complete the form and fax back to the following numbers:

- Short Term Crisis Intervention Mental Health Counselling - Fax Number: 604.666.6458
- Indian Residential School Resolution Health Support Program (IRS RHSP) - Fax Number: 604.658.2833

**In order to be eligible for payment for services you must be currently registered as a provider under First Nations Health Benefits prior to providing any services to clients. Incomplete forms will be returned unprocessed.*

This form is to request (check one):

FNHB Short-Term Crisis Intervention Mental Health Counselling Benefit Complete Sections

- Initial assessment request **A** Treatment request **A, B, D & E** Application for extension **A, B, D & E**

Indian Residential Schools Resolution Health Support Program Complete Sections

- Initial assessment request **A, C** Treatment request **A, C, D & E** Application for extension **A, C, D & E**

SECTION A - Client and Provider Information (please print)

NAME OF CLIENT _____ DATE OF BIRTH (YYYY / MM / DD) _____

ADDRESS _____

- On Reserve Off Reserve

INDIAN STATUS NUMBER FOR FIRST NATIONS _____ PHONE NUMBER _____

PERSONAL HEALTH NUMBER (PHN) _____

Provider Information

NAME OF COUNSELLOR _____ PHONE NUMBER _____

I CARRIED OUT A CLINICAL ASSESSMENT OF THIS CLIENT ON: DATE (YYYY / MM / DD) FOR TREATMENT REQUEST ONLY.

SECTION B – FNHB Short-Term Crisis Intervention Mental Health Counselling Benefits

1. Is the client in significant distress and showing signs of being in a mental health crisis in accordance with the criteria in the Guide?

- YES NO

2. Is crisis counselling available for this client from any other service/program?

- YES, I will immediately refer the client to the other service NO

3. Is this the first time you have provided counselling to this client?

- YES
 NO (select) Request for an extension of counselling previously approved under the FNHB program
 Counselling relating to another crisis under the FNHB program on: Date _____
 Counselling relating to another mental health issue not funded by FNHA

4. Can the crisis be addressed and client transitioned to other mental health support services (if required) within 15 sessions in 20 weeks?

- YES NO, I have developed an aftercare plan to link the client to other services for longer term treatment

5. If services will be required after this counselling is completed, have you identified community-based or other local mental health and culturally competent services for referral?

- YES NO (please describe why not)

SECTION C – Indian Residential Schools Resolution Health Support Program

The client is a:

- Former Indian residential school student Family Member of a former Indian residential school student

Note: If the client is a family member, please provide the full name of the former student.

Name of former student and relationship: _____ Date of Birth (YYYY/MM/DD): _____

Name of school attended: _____

SECTION D - Proposed Counselling Sessions Schedule

A session is defined in the Guide as a one (1) hour period of counselling, ten (10) minutes of which are for preparation and fifty (50) minutes for counselling.

	Number of sessions	Frequency	Hourly Rate
Face-to-face (individual, couple, or family counselling):			
Telehealth Name & Address of Facility for provider & client: _____ _____			
Group counselling Nature of the group: _____			
Total number of sessions requested • Crisis Intervention (max 15 over 20 weeks plus 5 sessions for extension) • IRS RHSP (max 20 sessions per prior approval plus extension)			

Planned start date (YYYY/MM/DD): _____ **Planned end date** (YYYY/MM/DD): _____

For the extension of NIHB counselling sessions over 15, or IRS RHSP counselling sessions over 20, a new Prior Approval Form must be submitted.

Complete for an extension of benefits covered under FNHB:

1. Please explain briefly why additional sessions are required:

- There is a delay for the client to access provincial/territorial or community based mental health services
- The client's condition is not yet stabilized
- Other – Please specify:

2. I have referred this client to provincial/territorial mental health services or community based services on:

Date: (YYYY/MM/DD): _____ Expected start date: (YYYY/MM/DD): _____

SECTION E – Acknowledgements

Client Acknowledgment:

- I contacted (provider name) _____ in order to access mental health counselling;
- I have been assessed by this counsellor and he/she has discussed the details of my assessment and the recommended counselling sessions and treatment with me;
- I confirm that my information in this form is correct, and I understand that it will be shared with First Nations Health Authority's FNHB for program administration purposes including prior approval of treatment, claims processing and administrative audit;
- My counsellor has explained to me and I understand the terms and conditions of the benefits provided under FNHB, including that I will be responsible for the payment of any fees for missed appointments; and
- I am aware that I can make a complaint to my counsellor's regulatory body if I have concerns.

SIGNATURE OF CLIENT (OR PARENT/GUARDIAN)

DATE

IF PARENT/GUARDIAN IS SIGNING, PLEASE PRINT YOUR NAME

Provider Acknowledgement:

- I have developed a treatment plan for this client in accordance with the requirements of my professional regulatory body and I have discussed the treatment and recommended counselling sessions with my client;
- I understand the terms and conditions of FNHA Health Benefits;
- I have explained the terms and conditions of FNHA Health Benefits to the client, and he/she understand them;
- I will submit claims for these services from FNHA Health Benefits;
- I will not charge any fees to the client for services provided;
- I will only submit claims in accordance with the Guide; and
- I will co-operate with the First Nation Health Authority's administrative audit activity and provide any requested supporting documentation to the First Nation Health Authority, if required.

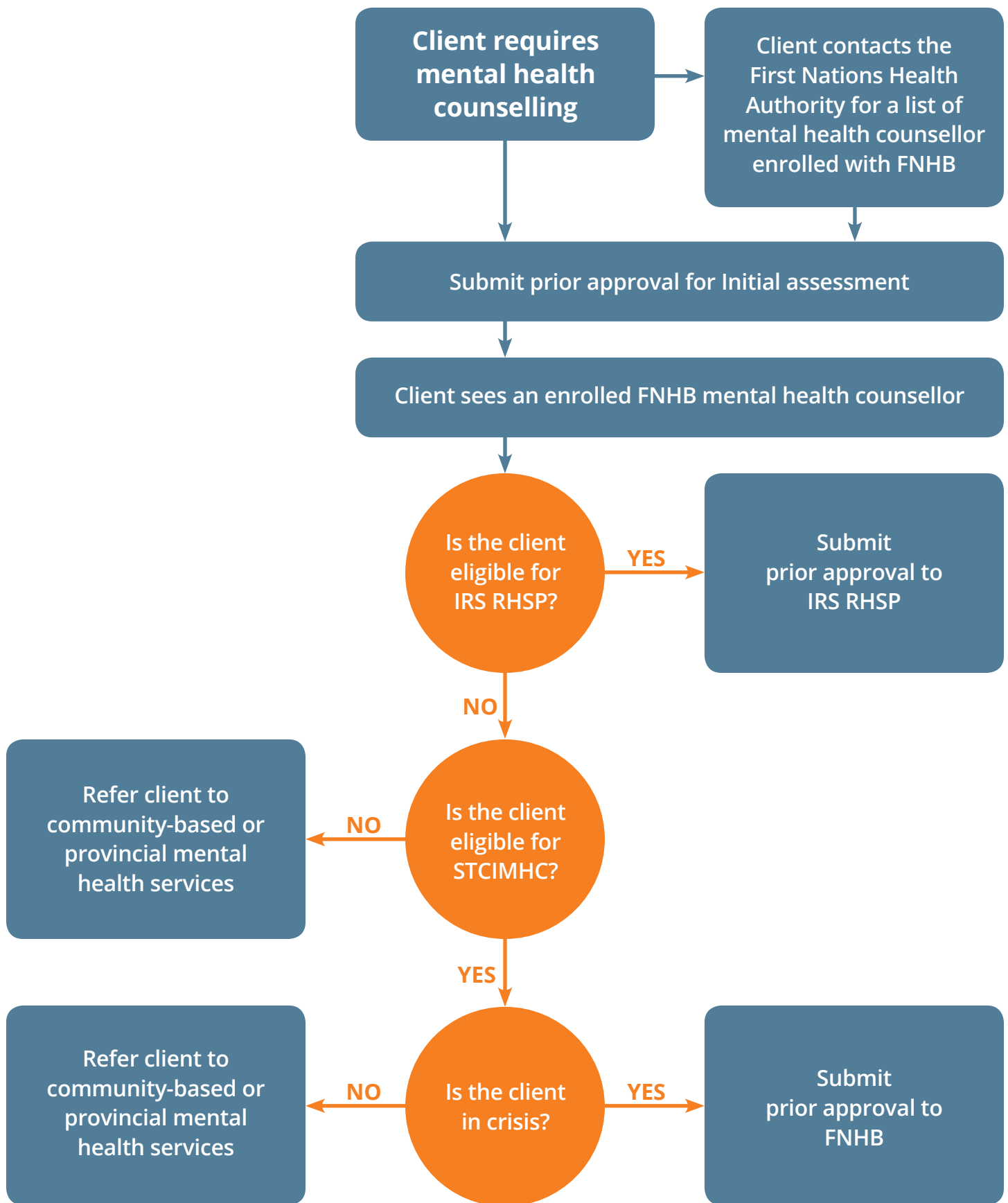
SIGNATURE OF PROVIDER

DATE

Privacy Notice:

The personal information you provide to FNHA is governed in accordance with the Personal Information Protection Act ("PIPA") in British Columbia. We only collect the information we need to administer the Mental Health Counselling services authorized under the Health Benefits Program or Indian Residential Schools Resolution Health Support Programs. Purpose of collection: We require your personal information to consider you for enrollment as a provider of these services. Other uses or disclosures: In limited and specific situations, your personal information may be disclosed without your consent in accordance with section 18 of the Personal Information Protection Act ("PIPA") in British Columbia. Your rights under PIPA: In addition to protecting your personal information, PIPA gives you the right to request access to and correction of your personal information. You also have the right to file a complaint with the Office of the Information and Privacy Commissioner of B.C. if you think your personal information has been handled inappropriately. For more information about privacy, please contact the Privacy Office in FNHA at privacy@fnha.ca.

Appendix 3: STCIMHC Benefit and IRS RHSP Flow Chart



Appendix 4: Glossary

The following list defines the terms and definitions that are used in this Guide for background information on these Programs.

Alternate Coverage

Benefits available to clients, in whole or in part, from any provincial, territorial health plan or social program, private health care plan, and community based services. See Coordination of Benefits.

Appeal Process

Client-initiated process seeking reconsideration of a denied request under the FNHA Health Benefits program. Please note that exclusions are not considered for appeal.

Client

An individual who is eligible to receive FNHA Health Benefits services in accordance with eligibility criteria.

Common Experience Payment (CEP)

The Common Experience Payment (CEP) is a component of the Indian Residential Schools Settlement Agreement. The CEP recognizes the experience of residing at an Indian Residential School and its impacts.

Coordination of Benefits (COB)

Coordination of benefits between two or more benefit plans, whether public, private or a combination of both coverage.

Crisis Intervention

Crisis intervention consists of the provision of immediate short-term psychological care to individuals in significant distress in order to stabilize them and minimize potential psychological trauma.

Delisted

A mental health professional who is no longer eligible through FNHA Health Benefits provider.

Exceptions

Services not explicitly listed as exclusions under FNHA Health Benefits and which may be considered on an exception basis pending a prior approval from FNHA Health Benefits office.

Exclusions

Exclusions are those services that are not benefits under FNHA Health Benefits under any circumstances and are not subject to the appeal process.

Frequency Limitations

Mental health services are subject to frequency limitations as to the number of counselling sessions that will be covered.

Independent Assessment Process (IAP)

IAP is one element of the Indian Residential Schools Settlement Agreement. It is an out-of-court process to resolve claims of wrongful acts suffered at an Indian Residential School. IAP provides money to people who experienced serious abuse at Indian Residential Schools. IAP is administered by the Indian Residential Schools Adjudication Secretariat.

Inter-Regional Therapy

IRS RHSP services that are provided outside client's region of residence.

Indian Residential Schools Adjudication Secretariat (IRSAS)

The IRSAS does the paper work and support work to make the Independent Assessment Process go smoothly. Their role is to receive the claims; assesses them to see if they are eligible for the process; and work with claimants and their lawyers to prepare claims for a hearing.

Indian Residential Schools Settlement Agreement (IRSSA)

Implemented on September 19, 2007, IRSSA is a class action settlement for former students of IRS approved by survivor representatives, the Assembly of First Nations and Inuit representatives, church representatives, legal counsel for former students, and the Government of Canada.

Mental Health Benefits

Mental health services eligible for coverage under FNHA Health Benefits.

Mental Health Counsellor

Mental health counsellors provide services to assist clients in finding ways of healing from a crisis situation or IRS related experiences, and meet the eligibility criteria of FNHA Health Benefits.

Mental Health Counsellor Provider Enrolment Form

Form submitted to the FNHA Health Benefits office by the Provider in order to register.

Prior Approval (PA)

Final confirmation issued by FNHA Health Benefits to a Provider to confirm that the client is eligible for the mental health services requested.

PIPA

Personal Information Protection Act

Session

A session is defined as a one (1) hour period of counselling, ten (10) minutes of which are for preparation and fifty (50) minutes for counselling.

First Nations Health Authority Health Benefits Contact Information

General

Toll-Free: 1.855.550.5454

Email: healthbenefits@fnha.ca

Operations (Claim Specific)

Dental

Medical Supplies & Equipment

Medical Transportation

Mental Health Crisis Intervention

Indian Residential School Resolution Health Support Program

- **Short Term Crisis Intervention Mental Health Counselling - Fax Number: 604.666.6458**
- **Indian Residential School Resolution Health Support Program - Fax Number: 604.658.2833**

MSP Coverage

Pharmacy

Vision

Toll-Free: 1.800.317.7878

Dental Toll-Free: 1.888.321.5003

Indian Residential School Resolution Health Support Program Toll-Free: 1.877.477.0775

Fax: 1.888.299.9222

Please have your Status card and CareCard ready

In-person Inquiries

1166 Alberni Street, Room 701

Vancouver, BC V6E 3Z3

Mailing Address

First Nations Health Authority
Health Benefits Program - Client Services
540 - 757 West Hastings Street
Vancouver, BC V6C 1A1

Online

www.fnha.ca/benefits



First Nations Health Authority
Health through wellness