

Checklist for the Applicant

Check (✓)

- Review Part A of the **Monthly Nutritional Supplement Application (SA 401)**.
- Sign the "Application Acknowledgement and Consent" statement in Part B of the application form.
- Ask your medical practitioner or nurse practitioner to complete Part C of the application.
- Mail the completed application to the First Nations Social Development Society (FNSDS) using the pre-addressed envelope.
- The FNSDS will review the application and will mail a decision letter to you and your Band Social Development Worker.

Information for Medical Practitioners & Nurse Practitioners

Information provided by you is vital to assessing the needs of the applicant. It is essential that information be provided regarding the specific medical condition of the applicant and the specific nutritional items that are needed. Incomplete applications cannot be adjudicated and may be returned for more information.

Medical Practitioner's or Nurse

Practitioner's Fee: Please invoice the \$25 fee for completing Part C of the Monthly Nutritional Supplement Application to the Administering Authority listed in Part A of the application form.

Questions? Contact the PWD/MNS — Social Development Program, First Nations Social Development Society at 604-913-4152 (Lower Mainland) or 1-877-985-5565 (toll-free).



MONTHLY NUTRITIONAL SUPPLEMENT

Application Instructions for:

- * Persons with Disabilities
- * Band Social Development Workers
- * Medical Practitioners and Nurse Practitioners



Monthly Nutritional Supplement (MNS)

The Monthly Nutritional Supplement is additional financial support for individuals with the Persons with Disabilities (PWD) designation who are receiving disability assistance and have extraordinary nutritional needs.

To be eligible for this supplement, the applicant must:

- have a Persons with Disabilities (PWD) designation
- be in receipt of disability assistance
- be receiving treatment from a medical practitioner or nurse practitioner for a chronic, progressive deterioration of health due to a severe medical condition
- require items to alleviate specific symptoms that are a direct result of the chronic, progressive deterioration of health and are necessary to prevent imminent danger to life
- have no other resources available to the family unit to pay for the items

The MNS provides up to \$205 per month to purchase one, or more of the following:

- \$165 per month for nutritional items
- \$40 per month for vitamins or minerals

Questions? Contact the PWD/MNS — Social Development Program, First Nations Social Development Society at 604-913-4152 (Lower Mainland) or 1-877-985-5565 (toll-free).

Application Checklist for the Band Social Development Worker *

Check (✓)

- Confirm the applicant has a Persons with Disabilities (PWD) designation and is receiving disability assistance.
- Confirm the applicant will use the MNS to replace currently received health supplements, as applicable.
- Fax a **Request for the Monthly Nutritional Supplement Application (SA 431)** to the First Nations Social Development Society (FNSDS) at the number listed on the form.
- The FNSDS will mail a **Monthly Nutritional Supplement Application (SA 401)** to you. The applicant will receive confirmation by mail that the application form was sent.
- Complete and sign Part A of the application.
- Give the application to the applicant so they can ask their medical practitioner or nurse practitioner to complete Part C of the form.
- Pay the \$25 invoice from the medical practitioner or nurse practitioner.
- The applicant will mail the completed application form and accompanying documentation to the FNSDS.
- The FNSDS will review the application and will mail a decision letter to you and the applicant.
- Include the decision letter from the FNSDS in the applicant's file and record practitioner fee payments and supplement expenditures on monthly reports.

* See INAC's *Social Development Policy and Procedures Manual, Volume 1, BC Region* for full details.