

Medical Service Plan and Fair PharmaCare

General Principle

Non-status income assistance recipients resident on-reserve with Medical Service Plan (MSP) and Fair PharmaCare coverage may be eligible for the health benefits that are outlined in Chapter 10, Non-Status Health Benefits of the *Social Development Policy and Procedures Manual*.

For more information on MSP or Fair PharmaCare, visit the Health Insurance BC web site at www.hibc.gov.bc.ca or call toll free at 1-800-663-7100.

Status Indians receive health benefits through the Medical Services Branch of Health Canada. These benefits include dental care, prescriptions, glasses, medical supplies and more. For more information, visit the Health Canada web site at www.hc-sc.gc.ca/fnihb/nihb or call toll free at 1-800-317-7878.

Policy

Medical Service Plan

MSP is a provincial Ministry of Health program that provides basic medical benefits to BC residents. MSP pays for medically required services from physicians and surgeons.

All BC residents are required to enrol with MSP.

Each person who is enrolled with MSP is issued a Care Card with a unique Personal Health Number that must be presented when health benefits are required.

MSP Coverage

Non-status recipients with MSP coverage may be provided with premium-free medical coverage to assist with specific individual health needs and circumstances.

Specified health benefits may be provided to non-status recipients who meet eligibility criteria for each benefit. Eligibility for health benefits is determined on an individual basis.

Note: The administering authority has no authority to meet the costs of medical services not covered by MSP.

MSP Premiums

Non-status recipients are eligible to receive premium-free assistance through MSP.

Premiums are based on an individual's net income (or a couple's combined net income) for the previous tax year, less deductions for age, family size and disability. Premium payments are due monthly and are based on the adjusted net income for the previous year.

Eligibility for MSP coverage

When applying for MSP coverage, recipients must demonstrate that they meet all of the following residency criteria:

- must be citizen of Canada or be lawfully admitted to Canada for permanent residence;
- must make his or her home in BC;
- must be physically present in BC at least 6 months in a calendar year; and
- dependents of MSP beneficiaries are eligible for coverage if they are residents of BC.

Fair PharmaCare

Fair PharmaCare is a provincial Ministry of Health program that provides financial assistance to BC residents with the costs of purchasing prescription drugs and some medical supplies.

Fair PharmaCare assistance is based on the individual's net income (or a couple's combined net income) for the previous tax year. Each year the individual's net income will automatically be verified by the income tax return information filed.

All residents of BC are encouraged to register with Fair PharmaCare.

Recipients under this plan obtain coverage by providing their Personal Health Number (PHN) or Care Card to any pharmacy within BC. Fair PharmaCare does not provide any out-of-province coverage.

Eligibility for Fair PharmaCare coverage

To be eligible for Fair PharmaCare financial assistance, the recipient must:

- be a resident of BC,
- have effective MSP coverage, and
- have filed an income tax return for the relevant taxation year.

Fair PharmaCare Plan

Fair PharmaCare provides a deductible for eligible prescription drugs and some medical supplies. The amount of the deductible is based on the financial information provided by each recipient in the family.

Once a family's contributions towards eligible costs reach the annual family maximum, Fair Pharmacare will cover 100 per cent of further eligible expenses for the remainder of the calendar year.

For prescriptions not regularly covered by Fair PharmaCare, non-status recipients must have their physician request Special Authority directly from Fair PharmaCare.

Note: The administering authority has no authority to pay for prescription drugs not regularly covered by Fair PharmaCare.

Fair PharmaCare may restrict recipients to specific pharmacies or doctors. This is a matter between the recipient and Fair PharmaCare. Non-status recipients may be advised to contact Fair PharmaCare directly.

Fair PharmaCare coverage cannot be backdated and ends immediately when a non-status recipient's file is closed or when they are no longer part of the family unit (e.g., spouse).

Procedures

Non-status recipients *without* MSP coverage should apply to Health Insurance BC for a Care Card and register with Fair PharmaCare. The band social development worker (BSDW) or community health representative (CHR) may assist the recipient in completing the proper documentation.

Non-status family members who need to obtain coverage should contact Health Insurance BC directly for information and forms.

Non-status recipients *with* MSP and Fair PharmaCare coverage are to provide the BSDW with their Care Card number and if required their monthly MSP premium payment information.

If premium payments are required, the BSDW shall arrange to pay MSP directly for the applicable premiums.

Note: Under no circumstances are premiums to be paid directly to the recipient.

Budget and Decision Form (901-25)

The *Budget and Decision Form* (901-25) is to document the expenditure of the approved payment of services for the recipient as follows:

- Comment section – indicate “Health Benefit (Non-Status)”,
- Basic Needs section – amount of expenditure,
- Temporary Allowance section – month in which the expenditure is paid, and
- Signatures of both the recipient and administering authority.

All required documentation (i.e., invoices, lab slips, and/or prescriptions) are to be attached to all required forms.

Health benefits allowances are charged to the basic needs budget.

Social Development Financial and Statistical Report

The administering authority is to include the number of people and expenditures on the monthly *Social Development Financial and Statistical Report* (SDFSR) under the Health Benefits (Non-Status) section (see the *BC First Nations Program Guide*).