

# TEMAGAMI FIRST NATION



BEAR ISLAND  
LAKE TEMAGAMI, ONTARIO P0H 1C0  
TEL 1.888.737.9884 or 705.237.8943  
FAX 705.237.8959  
www.temagamifirstnation.ca



## **TFN Enrichment Funds** **Health Policy**

### **1. PURPOSE:**

1.1 To set out guidelines for the administration of the Health policy.

### **2. GOAL:**

2.1 The goal of this program is to provide health coverage for TFN members, when the service is not covered by FNIHB or any other health insurance benefits.

### **3. ELIGIBILITY:**

- 3.1 To be eligible for Health program funding you must be a Registered Member of the Temagami First Nation.
- 3.2 For those members who are in arrears (past and present) with TFN Enrichment Funds Health, TFN will deduct 20% from all future applications until the outstanding debt is paid. Members may request a higher deduction to reduce their debt.
- 3.3 An infant who is less than one year of age and eligible to be registered as the TFN member.
- 3.4 The Health Supplement is additional funding for members who are financially challenged and/or are living on a fixed income that requires additional funds to help cover medical needs. To access the Health Supplement, members must submit proof of household income that is below \$25,000.00.

### **4. ALLOCATION:**

- 4.1 Eligible TFN members can access up to a maximum of \$750.00 per year and an additional \$500.00 maximum under Health Supplement.
- 4.2 The program year is from April 1<sup>st</sup> each year to March 31<sup>st</sup> of the next year.
- 4.3 Funding is approved on a first come first served basis, according to the date received by the Office Manager until the annual set funding has been expended.
- 4.4 Food requested for health related sensitivities, allergies and diseases will only be available for infants less than two (2) years of age

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## 5. PROCESS FOR REQUESTING FUNDS:

- 5.1 NOTE: Applicants must access First Nation and Inuit Health or any other group health insurance coverage available to them before submitting a health claim. Applicants can only apply on behalf of themselves and parent/guardian can apply on behalf of their dependents.
- 5.2 Temagami First Nation member must complete the health benefits form and/or Health Supplement form and attach **ORIGINAL RECEIPTS** and necessary documentation from Physician or specialist outlining associated costs and submit to the attention of the Doreen Potts Health Centre – Office Manager for verification and approval.
- 5.3 NOTE: Physician and/or Specialist notes need to be updated yearly for reimbursements.

## 6 HEALTH/ HEALTH SUPPLEMENT COVERAGE:

### 6.1 Travel:

- 6.1.1 Travel for family\* in case of life threatening/terminal illness or death (funeral).
- 6.1.2 Travel for parent/birthing partner and children for support and bonding purposes at childbirth.
- 6.1.3 Travel for additional parent/guardian for children's appointments covered by Health Canada.
- 6.1.4 Travel to visit family\* members who are hospitalized.
- 6.1.5 Travel for medical appointments not covered by FNIHB at the discretion of the Office Manager (Driver expenses covered out of the member's health dollars that holds the appointment). Some examples of medical appointments that are not covered are foot care, dentist, massage, optometrist, etc.

### 6.2 Rates are as follows for travel:

- |   |   |
|---|---|
| 6.2.1 Accommodation                                 | will be covered to a maximum of \$125.00/night (receipts mandatory) |
| 6.2.2 Private Accommodation                         | \$25.00/night   |
| 6.2.3 Meals   | \$15.00/meal  |
| 6.2.4 Mileage                                       | \$0.20 cents/km   |
| 6.2.5 Boat and snowmobile travel from Bear Island @ | \$40.00/trip maximum  |
| 6.2.6 Hospital parking                              | (receipts mandatory)  |
| 6.2.7 Public Transportation<br>i.e. bus/taxis/train | (receipts mandatory)  |

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6.2.8 Note: Please fill out the Health Travel Claim Form for travel expenses and attach relevant documentation (Example: Documentation from First Nations Inuit Health, proof of appointment, etc.)

## **7. Dental:**

- 7.1 Essential dental expenses (not cosmetic).
- 7.2 Medical procedures performed by Dentist.
- 7.3 Orthodontic work will be covered for children under 18 years of age.

## **8. Optometrists**

- 8.1 Prescription eye wear (Maximum \$500/fiscal year);
- 8.2 Certain eye surgery procedures; No cosmetic costs.

## **9. Physiotherapy:**

- 9.1 Treatment plan required; No insurance claims. Need to check hospital waiting lists.

## **10. Chiropodist:**

- 10.1 Treatment through certified/licensed specialist
- 10.2 Maximum 2 pairs of footwear per fiscal year

## **11. Fertility:**

- 11.1 Associated prescriptions and procedures.

## **12. Over the Counter Medical Remedies (Something that treats or prevents alleviates, the symptoms of disease):**

- 12.1 Items only covered through certified/licensed specialist or Doctor's Note.
- 12.2 OTC will be covered at the discretion of the Office Manager
- 12.3 Absolutely no beauty products will be covered i.e. masks, mirrors, nail products, beauty creams, etc.

## **13. Medications:**

- 13.1 All Prescriptions not covered by First Nation & Inuit Health.
- 13.2 NOTE: TFN Enrichment Funds Health Policy to follow Health Canada guidelines regarding narcotics. Please visit [www.healthcanada.ca](http://www.healthcanada.ca) for more information.

## **14. Equipment:**

- 14.1 Short term rental/lease or purchase of certain health equipment: TV (up to a maximum of 3 weeks rental), wheel chair, walkers, etc.

## **15. Records:**

- 15.1 Forms, Doctor's Notes, medical records

Ratified at Duly Convened Temagami First Nation Band Council Meeting: April 19, 2016  
Effective Date: April 19, 2016

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## **16. Holistic Wellness:**

- 16.1 Treatment through certified/licensed specialist *Including vitamins & supplements*
- 16.2 Treatment Plan Required

## **17. Medical Procedures:**

- 17.1 Physicals, circumcision

## **18. Translator/Escort:**

- 18.1 Translator Services
- 18.2 Escort as provided through a licensed service (Para Med)

## **19. Mental Health:**

- 19.1 Psychiatry
- 19.2 Marriage counselling
- 19.3 Psychological assessments

## **20. Health Promotion:**

- 20.1 With a doctor's referral, memberships to fitness centers such as Curves, Good life Fitness and Health Promotion programs such as Weight Watchers and Herbal Magic. These programs will be reimbursed only after it is demonstrated that there was participation as prescribed.

\*Family is defined as Spouse, Mother, Father, Brother, Sister, Mother-in Law, Father-in Law, Daughter-in-law, Son-in-law, Brother-in Law, Sister-in Law, Step-mother, Step-father, Step-brother, Step-sister, Grandparents, and Children/Step-children, Grandchildren, Aunt, Uncle, Niece and Nephew.