

7. APPEALS PROCEDURES FOR: Dental, Medical Supplies & Equipment, Vision, Mental Health, & Medical Transportation Benefits

- ✚ The following information was taken from the Health Canada NIHB webpage and is intended to provide basic information only. For detailed and up-to-date information on appeals procedures, please visit the webpage at http://www.hc-sc.gc.ca/fnih-spni/nihb-ssna/benefit-prestation/appe/index_e.html.
- ✚ ***When coverage for a benefit through the Non-Insured Health Benefits (NIHB) Program has been denied, the recipient or parent/guardian of the recipient has the right to appeal the decision.***
- ✚ There are three levels of appeal available which only the recipient or parent/guardian can initiate. In order for a case to be reviewed as an appeal, a letter from the recipient or parent/guardian, accompanied by supporting information from the provider or prescriber must be submitted to the Non-Insured Health Benefits Program. This information includes:
 - The condition for which the benefit is being requested.
 - The diagnosis and prognosis, including what other alternatives have been tried.
 - Relevant diagnostic test results.
 - Justification for the proposed treatment and any additional supporting information.
- ✚ The recipient or parent/guardian should submit their letter of appeal and supporting documentation by mail, clearly marked "APPEALS-CONFIDENTIAL".
- ✚ Upon receiving the submission, the NIHB Program will arrange to have the case reviewed by an appeals committee of medical, dental or vision professionals. The decision will be made based on the specific needs of the recipient, accumulated research, the availability of alternatives and NIHB policy.
- ✚ **LEVEL 1 APPEAL:**
 - The first level of appeal for a denied dental, medical supplies and equipment, vision, mental health, or medical transportation benefit is the **NIHB Regional Manager, Pacific Region, Non-Insured Health Benefits**. Mailing Address:

NIHB Regional Manager
First Nations and Inuit Health
Health Canada
Suite 540 - 757 West Hastings Street
Vancouver, British Columbia
V6C 3E6

 **LEVEL 2 APPEAL:**

- If the recipient does not agree with the Level 1 Appeal decision and wishes to proceed further, they can apply to the **Regional Director, Pacific Region**, who may refer the appeal to an appeals committee or to dental, medical or vision consultant(s) for a recommendation. Mailing Address:


Regional DIRECTOR
First Nations and Inuit Health,
Health Canada
Suite 540 - 757 West Hastings Street
Vancouver, British Columbia
V6C 3E6

 **LEVEL 3 APPEAL:**

- If the recipient does not agree with the Level 2 Appeal decision, they may choose to have the appeal reviewed at the third and final level. The submission should be sent to the **Director General, Non-Insured Health Benefits**. The Director General may also refer the appeal to a dental, medical or vision consultant(s) for recommendation. Mailing Address:

NIHB Director General
Non-Insured Health Benefits Directorate
First Nations and Inuit Health
Health Canada
Manulife Building, 55 Metcalfe Street
Postal Locator 4006A
Ottawa, Ontario
K1A 0K9

****DON'T FORGET TO MARK THE ENVELOPE: "APPEALS-CONFIDENTIAL"*****

-  **At all levels of the appeal process, you will be provided with a written explanation of the decision taken. If you have not heard within one month of submitting your appeal and wish to enquire as to its status, please call the toll-free number for the Pacific Regional Office of Non-Insured Health Benefits at 1-800-317-7878.**