

First Nations Health Benefits

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2014 / 15 Priorities

Transition		Stabilization	
Operations	Customer Service Experience	Maintain Service Standards for Processing	Medical Transportation Reviews
Benefit Management and Policy Development	Partnerships with communities and external organizations	Health Benefits Improvements Committee	New policies and guideline development
Program Analysis and Claims Adjudication	Data Analysis for program decision making	Asset and service mapping	Claims Adjudicator Selection

Transformation



Operations

- New Director of Operations
- Service Standards
 - Improvements on processing time across all benefit areas
- Health Benefits Support Representative
 - Improved customer service experience
 - Culturally competent and safe
 - 50% of calls related to benefit information
 - 36% of calls related to Medical Services Plan registration
 - 14% of calls not related to Health Benefits
 - Effective in getting clients the information they need
 - Phone: 1-855-550-5454
 - Email: healthbenefits@fnha.ca



Operations

(cont'd)

- Medical Transportation
 - Let's Talk Transformation Review process developed in consultation with Regional Directors and FNHDA
 - Project includes:
 - A review of current funding levels
 - Analysis of trends for last 5 years
 - Identification of community challenges
 - Discussion of existing provincial services
 - Project will also include an opportunity for communities to provide direction on how to transform and develop a sustainable program that fits community needs
 - Starting by July 2014
 - Completed in 6 months



Benefit Management, Policy Development and Planning

- Existing policies and frameworks being revised and improved to provide greater clarity
 - Information Package and brochure
 - Updated Website information
- Community Engagement
 - Sessions held directly with communities
 - HBIC incorporated into the Implementation Committee for greater coordination of transformation
- Dental Services Review (Dental Therapy, COHI)
 - Baseline of current state
 - Transform to better support oral health through a coordinated continuum of dental care



Program Analysis and Claims Adjudication

- Developing internal reports to monitor trends in utilization and expenditures
- Reports are developed to support Operations and Benefit Management in decision making
- Developing criteria and process for the selection of a new claims processor



'Buy Back' - Current State

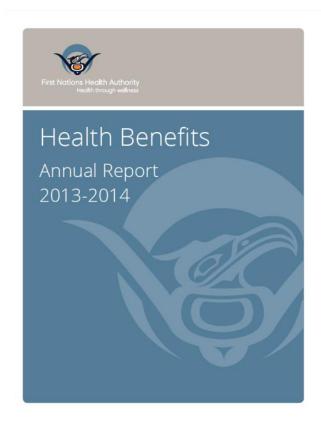
Health Benefits is using Health Canada's systems for Pharmacy, MSE, and Dental claims

- If Health Canada changes the policies and processes for these benefits, FNHA must change them as well
- This includes what is covered, what is paid, prior approvals, exceptions, appeals, and the payment of claims
- FNHA cannot change the policies and processes for these benefits until 'Buy Back' ends
- FNHA has until July 2017 to end 'Buy Back'



Transforming Health Benefits

- We have used what we have heard
- We have analyzed the numbers
 - Highlighted trends
 - Reviewed similar conditions and solutions
- We have developed opportunities
- Now we need to hear from you





Health Benefits

Opportunities

- Health Spending Account
- Wrap Around Care (Case Management)









Health Spending Account

- An annual amount for Health Benefits over and above regular coverage
- Allows greater flexibility and control for clients: you have a say in how
 Health Benefits are used to meet your health needs
- Can be used for prevention and wellness
- If the annual amount is used, you must wait until the next year for it to reset
- Eligible items commonly mirror those identified by the Canada Revenue Agency as being eligible for the Medical Tax Credit:
 - Medical certificates
 - Gluten free products
 - Corrective laser eye surgery
 - Travel vaccinations



Health Spending Account:

An Example

Rhonda is 42 years old and injured her knee last year

 The injury has healed but her knee continues to bother her

A Health Spending Account could be used to:

- Receive additional therapy to improve her mobility
- Obtain an exercise band to strengthen her knee



Wrap-Around Care:

Case Management

A Case Manager is someone who can coordinates services, advocate for the client, and direct resources and services for the client

Those with the greatest or unique needs would have access to a Case Manager

A Case Manager would help clients to:

- Navigate the Provincial Health Care System
- Connect with health care providers
- Use the Health Benefits Program



Case Management:

An Example

Walter is 68, suffered a stroke, and is now wheelchair bound. He requires mobility and lifting aides, incontinence supplies and wound care, an assortment of medications, and has to work with a number of providers. He receives home care services and sees various physicians, therapists, and counsellors in different locations.

A Case Manager would:

- Review Walter's health concerns and answer his questions
- Work with him to identify gaps in care
- Work with health care and service providers to close those gaps
- Ensure he is using the Health Benefits Plan to foster his wellbeing
- Provide guidance and support throughout this process



Summary

Our goal:

More accessible, meaningful, and usable Health Benefits

Our challenge:

End 'Buy Back' in order to transform Health Benefits

Our Opportunities:

- Health Spending Account
- Case Management





Next Steps

Hear from you today:

Table top discussion on opportunities

Conduct focus groups with

- Urban / Away from home
- Unique users

Final dialogue at Gathering Wisdom for a Shared Journey VII