



First Nations Health Authority
Health through wellness

Mental Wellness and Counselling: Provider Frequently Asked Questions



Program updates

What are the changes impacting Providers?

- 1) In addition to existing Provider eligibility criteria, new Providers must:
 - Have a minimum of five years' counselling experience; and
 - Have a minimum of three years' counselling experience with First Nations Peoples.
- 2) Provider rates
 - For counselling that takes place in a group format, Providers can bill 33.3% of the hourly rate listed in the Fee Supplement for each eligible Client in the group, up to a maximum of eight Clients.
 - For individual or family sessions, the hourly rate can only be billed for one eligible Client even if there are other family members attending.
- 3) Client eligibility for services
 - Must be a First Nations person with Status who meets the Medical Services Plan definition of residence in BC.
 - Current Clients who do not have Status are eligible for up to four sessions with their Provider from April 1-30, 2024 to support this transition.
- 4) Mental Wellness and Counselling (MWC) program.
 - First Nations Health Benefits and Services (FNHBS) will serve Clients under one program. This includes the following programs: Mental Wellness Counselling program, the Indian Residential School Resolution Health Support Program (IRS RHSP), Missing and Murdered Indigenous Women and Girls Health Support Services (MMIWG HSS) and the Indian Day School Health Support Services (IDS HSS).
- 5) Program administration
 - Pre-determinations will be required for any counselling that exceeds the initial 22 hours of service approval.
 - Note: For more information regarding active pre-determinations that were approved for Status First Nations Clients under the former IRS RHSP, please see this [frequently asked question](#).

Why is the First Nations Health Authority (FNHA) making these changes?

The Indian Residential Schools Settlement Agreement concluded on March 31, 2021. At that time the FNHA no longer had access to the registry of those entitled to receive benefits related to their attendance at Indian Residential School (IRS). This resulted in an inability to verify IRS counselling eligibility and which corresponded to a significant increase in costs.

After a review of current program usage and available funding, a decision was made to align MWC eligibility with the rest of the FNHBS' eligibility criteria. First Nations people living in BC with Status are eligible for FNHBS coverage under the FNHA's funding agreement with Canada. The FNHA continues to work closely with funding partners and community to develop and maintain programs to support IRS Survivors and their family members across BC.

Why isn't there a longer transition period for the changes?

The FNHA has been working to secure additional funding to support the expanded program demand and associated costs. In order to move toward a sustainable mental health and wellness service, the FNHA needed to implement these changes quickly.

Provider eligibility

How does the new MWC program Provider eligibility criteria impact currently approved Providers?

Currently approved Providers are not impacted by the new eligibility criteria. As FNHBS continues the review of the MWC program, it will be reviewing the experience levels of all current Providers beginning in May 2024. Further changes may be implemented as a result of this review and any related updates will be communicated to you.

I am a currently approved Provider- when will I know if I am able to continue working with FNHBS Clients?

FNHBS is developing the criteria for evaluating the experience level of current Providers. More information will be shared directly with Providers in May 2024.

How will the FNHA be evaluating the requirement "three years' working with First Nations Peoples"? Will non-clinical experience count?

At this time, the FNHA is still developing the assessment criteria and will review currently approved Providers on a case-by-case basis. More information will be communicated directly to Providers in May 2024.

Are Providers supposed to continue practicing while FNHA assesses them?

There is no change to service provision for currently approved Providers. Further communications will be sent out to Providers in May 2024.

If a Provider is assessed and deemed ineligible, how will their Clients be supported?

The FNHA will communicate directly with Providers about the review process in May 2024. The FNHA is also

updating our [Approved Providers List](#). The FNHA can support Clients in finding a new Provider if necessary.

How does the San'yas Indigenous Cultural Safety Training communicate with the FNHA when training is completed?

Providers are required to submit their certificates of completion to FNHA directly to: mhproviderreg@fnha.ca.

Are Providers responsible for the cost of completing San'yas training?

Providers are responsible for the cost of San'yas training.

What measures will be put in place to ensure that providers are providing good quality care.

The FNHA will be evaluating all Providers to ensure that they have the relevant experience and cultural safety training required to provide quality, culturally safe service.

Pre-determinations

Will previously approved pre-determinations for Clients that meet new eligibility be valid or do I need to submit a new pre-determination for each Client?

For Status First Nations Clients under the former IRS-RHSP program:

Active pre-determinations that were approved for Status First Nations Clients under the former IRSRHSP, will continue to be valid for services provided up to June 30, 2024. These claims must be submitted by July 31, 2024. Claims for these services will not be accepted after July 31, 2024. Any services provided after June 30, 2024 must have a new pre-determination (22 hours) submitted for the MWC program. Please log into [PROVIDERNET](#) and refer to the Message Centre for more information.

For Status First Nations Clients under one of the other former programs:

Pre-determinations will remain active and have been updated under the MWC program.

What happens after a Client completes the 22 hours of counselling and needs more?

Pre-determinations must be submitted for every 22 hours of MWC services. Pre-determinations are submitted directly to FNHBS and reviewed on a case-by-case basis.

Why do I have to submit another pre-determination after the initial 22 hours of service is provided?

Effective treatment includes monitoring progress and taking time to revisit the Client's treatment plan. Each Client will have a unique treatment plan and some may not require 22 hours of service to achieve the goals they have set for themselves. Others may require more time on their healing journeys.

Creating a check-in point after 22 service hours will support effective service delivery.

Is the new requirement for a pre-determination after each 22 hours of service provision for new Clients only?

A subsequent pre-determination process after 22 hours of service is provided will be required for all Clients who require further counselling support beyond the initial 22 hours. This is inclusive of Status First Nations

people who are new to counselling and existing Status First Nations Clients.

Is there a maximum number of hours that a Client can receive in one year?

Eligible Clients can receive up to 22 hours of counselling through an initial pre-determination. If the Provider and the Client determine that additional counselling hours are needed, the provider may submit a new pre-determination following the initial 22 hours, which will be considered on an exceptional basis. The submission of a treatment plan may also be required to determine the need for additional counseling hours.

Will the pre-determination require submission of a treatment plan?

It is a program expectation that treatment plans are being created for all clients who receive services and are updated as necessary. Treatment plans do not need to be submitted along with pre-determinations; however, they may be requested as part of any Provider audits.

Will pre-determinations continue to be submitted on the Pacific Blue Cross Provider website?

Yes, predeterminations will continue to be submitted through [PROVIDERNET](#).

For non-Status clients who are not eligible for service beyond April 30, how long do I have to bill for the services rendered?

Billing for services provided to clients who are not First Nations with Status are required to be submitted by May 31, 2024.

As you continue to evaluate the MWC program, will you be reassessing the differences in Provider fees?

As part of the review process FNHBS will be reviewing the current Provider fees.

How will Clients' Medical Transportation (MT) benefits be affected by these changes?

Effective April 15, 2024, Clients accessing FNHBS Mental Health benefits should access travel assistance through their local PT Clerk in accordance with the community/organization Funding Agreement. Clients who have always accessed MT benefits through the FNHA MT Operations team for all medical travel should continue to do so.

Client eligibility and information

How will these changes affect Non-Status partners of Status individuals?

Non-Status partners of Status First Nations people will no longer be eligible. In the circumstance where an eligible Status First Nations Client attends a session with a non-Status family member this service can be billed at the individual/family hourly rate for the eligible Client.

How are Nisga'a Nation Clients impacted?

Nisga'a Clients will not be eligible under the new criteria as they are provided mental health coverage through

a self-governing agreement for health services. IRS survivors and their family members from Nisga'a Nation can still access the FNHA funded IRS cultural support services from providers referenced on this [resource list](#). Please review the [Mental Wellness Counseling Benefit Schedule](#) for more information on which Clients will continue to be eligible for services after April 30, 2024.

Where can I direct Clients that are no longer eligible? There do not seem to be any culturally relevant referral resources provided in my area.

A mental health and supports resource list is available [here](#). The FNHA has also developed a list of Client frequently asked questions available [here](#).

Is it the responsibility of counsellors to inform Clients without status that they will no longer be receiving service, or will FNHA reach out to Clients?

The FNHA has communicated this information out to clients through our social media channels, health benefits news, the FNHA news page and on the FNHA website. A letter is also being sent out directly to community leaders. We would appreciate your support in raising awareness about these program updates while we continue our communication efforts.

Can I still register new non-Status Clients so they can receive service in April 2024?

As of April 1, 2024, any new Clients must meet the new eligibility criteria in order to receive coverage under the MWC program. Only previously approved non-Status Clients will receive coverage for up to four hours of sessions from April 1-30, 2024.

Other questions

What is being done about Providers who submit \$90 and then make their Clients pay what they feel is the "difference" in their hourly rate?

Providers can bill the FNHA Health Benefits program for counselling services up to the maximum rates outlined in the Fee Supplement. These fees are determined based on the Provider's membership in their respective professional body. The FNHA Clients should not be directly charged any additional fees.

The FNHA may terminate a Provider's enrollment if billing irregularities are detected or reported. Please refer to Section 2.2 Termination of Provider Agreements in the [Mental Wellness and Counselling Benefit Schedule](#) for more information.

Why is the billing policy changing for group counselling?

The FNHA is aligning the billing policy with federal guidelines. Federal mental wellness counselling guidelines provide for a counsellor to bill 33.3% of the individual fee schedule and this change aligns with what is happening across the country.

While Providers can still have as many people as is safe in their groups, the maximum number of eligible FNHBS MWC Clients a Provider can bill the FNHBS MWC program for is eight at one time. This is a change that

supports the long-term sustainability of the program.

I live outside of BC but provide counselling to Clients virtually who live in BC. How do I get an exception to provide services from a location other than BC?

The FNHA recognizes that virtual counselling can improve equitable access to quality mental health supports for First Nations people in BC, including for those who live in rural and remote areas.

Providers may be approved to provide services from a province or territory outside of BC if the following conditions are met:

- 1) Their professional body has the capacity to perform its functions in the province or territory where the services are taking place; **and**
- 2) FNHBS approves an exception prior to services being provided. Exception requests will be considered should the demand for Providers go beyond regional capacity; should the appropriate service not be available in the home province and should a neighbouring province/territory be the closest point of delivery. The exception request process is detailed in the Mental Wellness and Counselling Benefit Schedule can be found [here](#).

When will Clients who do not meet the new eligibility criteria lose access to the Mental Wellness and Counselling services?

Clients who no longer meet the eligibility criteria as of April 15, 2024 can access up to four hours of sessions from April 1-30, 2024. After April 30, 2024 only individuals that meet the new eligibility criteria will be covered under FNHBS.

What options do my current Clients have to continue counselling after April 15, 2024?

Non-Status Clients receiving treatment through FNHBS prior to April 15, 2024 are eligible for a maximum of four hours of counselling in the month of April 2024.

A resource listing of provincial supports for First Nations, Inuit and Métis people is available [here](#). In addition, Indian Residential School (IRS) survivors and impacted family members can continue to access health and cultural supports directly from the IRS contribution agreement holders listed under the "Indian Residential School supports" heading" on the above resource. Clients can also reach out directly to their local health authority to learn more about the regional supports.

Do I need special approval to get funding for up to four more hours with Clients between now and April 30, 2024 when coverage stops for non-Status First Nations people?

Pre-approval for up to an additional four hours of service in April 2024 is not required.

All of my current Clients have Status. Will anything change for these Clients?

There is no change to service for First Nations people with Status.

Will the First Nations Health Authority (FNHA) communicate these changes to Clients?

A Client frequently asked questions resource is available [here](#). The FNHA has also shared the announcement

across social media, the FNHA website, Health Benefits News and has included a Client information resource in the Provider emails. The FNHA also has a dedicated phone line and email for Clients to contact FNHBS to discuss the program update.

If a Client has a Métis Membership number, is that considered Status under the new eligibility requirements?

A Métis membership number does not meet the eligibility criteria for the MWC program. The MWC eligibility requires that Clients have a Status number as defined by the Indian Act. You can learn more about registering for Status [here](#).

For further information about Client eligibility, please visit the Health Benefits [website](#).

Contact information

If you have any other questions please contact the relevant resource below.

FNHA contacts

FNHBS phone: 1-855-550-5454

Email: mhproviderreg@fnha.ca

Regional health authority mental health support contact

The following regional health authority supports are available to all BC residents.

Fraser Health

Phone: [1-866-766-6960](tel:1-866-766-6960)

Website: <https://www.fraserhealth.ca/health-topics-a-to-z/indigenous-health/indigenous-mental-health-and-wellness>

Interior Health Region

Phone: 310-MHSU (6478)

Website: <https://www.interiorhealth.ca/health-and-wellness/mental-health-and-substance-use/mental-health/adult-mental-health-services-and-resources>

Island Health

Phone: 1-888-885-8824

Website: <https://www.islandhealth.ca/our-services/mental-health-substance-use-services>

Northern Health

Phone: 310-6789

Website: <https://www.northernhealth.ca/services/mental-health-substance-use/get-help-now>

Vancouver Coastal

Phone: 8-1-1

Website: <https://www.vch.ca/en/health-topics/mental-health-substance-us>