

SENT VIA EMAIL

Friday, September 30, 2016

Northern Physicians c/o Michael Kirlew
Sioux Lookout First Nations Health Authority
61 Queen Street, P.O. Box 1300
Sioux Lookout, ON P8T 1B8
(807) 738-2784

Dear The Honourable Jane Philpott,

Re: Medical travel from remote First Nations communities with Non Insured Health Benefits (NIHB)

We are writing to you as physicians practising in the Sioux Lookout Region in Northwestern Ontario. We are the current community physicians for remote First Nations communities.

We are writing to express serious concerns we have regarding the private patient information required by NIHB in order to approve patient travel support, in addition to the frequent refusal from NIHB Benefits Clerks to approve travel on the grounds that the medical information was deemed insufficient.

On the current NIHB form, there is a field titled "Reason for Appointment". It requires a physician to provide his or her medical diagnosis of the patient requiring funds for travel, either for their own or escort. If such a diagnosis is not provided, then a patient may be denied funds for travel for medically necessary treatment. This is a denial of access to medically necessary care. However, when the physician provides this diagnosis, we are potentially breaching patient-client confidentiality.

It should be noted that the Ontario Ministry of Health & Long Term Care's (MOHLTC) equivalent to the *NIHB Medical Transportation Application Form*, the *Application for Northern Health Travel Grant*, requires no such justification for a companion or a note from a physician or health professional. It asks only that the physician indicate whether the patient requires a consultation or a follow-up diagnostic appointment. The contrast between Health Canada's required information and the MOHLTC's, particularly that pertaining to travel escorts, is significant. NIHB clients are disclosing sensitive, confidential information with the aim of obtaining treatment and medical transportation benefits, while MOHLTC clients are required to do no such thing.

NIHB has no legitimate reason to require a reason for the care before providing access to care. Furthermore, NIHB has no legitimate reason to require a justification for the provision of an escort. Medical necessity is a judgement made by a physician, and their professional opinion should suffice as evidence of the need for both patient travel and of the need for an escort.

Given the concerns we have outlined above, effective October 11, 2016, we will no longer be providing any diagnostic information with regard to our patients. We will be including only the generic information correctly required on the provincial forms. Furthermore, we will be asking Health Transfer (Shibogama) nurses to refuse to include any patient diagnostic information. The only information provided will be that the patient urgently requires transportation, and the institution to which they must be transferred, as assessed by the community physician.

Sincerely,

Physicians of Sioux Lookout Region

Dr. Michael Kirlew
Dr David Folk
Dr Jenny Wu
Dr Wanda Klippenstein
Dr Benjamin Goldstein
Dr Theresa Heese
Dr Jonathan Fiddler
Dr Claudette Chase
Dr Lindsay Hancock
Dr Steve Coupland
Dr Robert Carlson
Dr Marilyn Koval
Dr Larry Wilms
Dr Anne Robinson
Dr Megan Bollinger
Dr Christopher Giles
Dr Devon Tilbrook
Dr Aaron Rothstein
Dr Catherine Wong
Dr Rebekah Neckoway
Dr Michael Ouellette
Dr Lisa Letkemann

cc. Grand Chief Alvin Fiddler, Nishnawbe Aski Nation
Regional Chief Isadore Day, Chiefs of Ontario
National Chief Perry Bellegarde, Assembly of First Nations
Sioux Lookout Area Chiefs
James Morris, Executive Director, Sioux Lookout First Nations Health Authority
Clifford Bull, Chair, Sioux Lookout Area Chiefs Committee of Health
Margaret Kenequanash, Executive Director, Shibogama First Nations Council
Keith Conn, Acting Associate Deputy Minister, Health Canada