



Memorandum

Date: November 26, 2001

To: Directors
Employment and Income
Assistance

From: Pam Goulet and John Petersen
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Employment and Income
Assistance
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Subject: **Section 22.1.5 - Participants with Alternative Health Coverage – Amendment**

Please note that the Section #22.1.5 of the EIA Administrative Manual which reads:

At enrollment or re-enrollment, staff must ask participants if they have coverage for drug, dental and optical benefits. If all family members have the same or greater coverage than provided by the Program, a Health Services card should not be issued. If participants have other coverage, but the coverage is not available for all family members, then a Health Services card should be issued.

will be replaced by the following:

Participants who have health services coverage from an alternate source are expected to access health services from that source. Typically, the alternate source would be either a private health plan or coverage through the federal government First Nations and Inuit peoples. Health Services cards are not issued in these cases. If a service is covered by Health Services, but not by the alternate health coverage, Health Services staff will review the request and approve as appropriate.

The purpose of this amendment is to provide further direction regarding any requests for health services that are made by individuals who are eligible to access health services from an alternate program.

As an example, Directive #2001-01 “*Residency Statements – Determining Federal/Provincial Responsibility*”, advises that Health Services cards are not to be issued to applicants who have treaty status as they are eligible to access non-insured health services through the First Nations and Inuit Non-Insured Health Services Program (formerly the Medical Services Branch of the Federal government).

If you have any questions or concerns about this policy amendment, please contact Pam Goulet or John Petersen.

Original Signed by P. Goulet
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cc: Distribution List