NOVA SCOTIA
Health

Policy:	**Elective Out-of-Country Health Services: Prior-Approval**

Originating Branch:	Physician & Pharmaceutical Services	
Original Approval Date:	Sept 21, 2007	***Effective Date:*** Sept 1, 2007
Revised Date:	Nov 20, 2007	
Original Approved by:	Frank Lussing, Executive Director, Physician & Pharmaceutical Services	
Signed:	Dec 4, 2007	

Amended:	Feb 11, 2010	***Next Review:*** TBD
Amended Approved by:	Kevin McNamara, Deputy Minister of Health	17/08/2010
	Eleanor Hubbard, A/Executive Director, Physician & Pharmaceutical Services	12/08/10

I. POLICY STATEMENT

Individuals requiring elective, insured health services that are not available within Canada must be authorized by the Department of Health (DoH) prior to making any medical and/or travel arrangements to ensure the service will be insured and in order for the DoH/MSI to negotiate a reasonable and fair compensation with out-of-country providers prior to the provision of service.

II. DEFINITIONS

Appropriate specialist is defined as a medical professional whose name is on the Specialist Register of the College of Physicians and Surgeons of Nova Scotia and actively involved in the eligible resident's care with expert knowledge in the proposed service and/or specialty that will deliver the out-of-country service;

DoH is defined as the Department of Health;

Elective Services is defined as any service that is non-urgent.

Eligible Resident(s) is defined as a person who is insured within the meaning of the Health Services and Insurance Act, RSNS, 1989, c. 197 or any successor legislation thereto.;

Insured health services means both the in-patient and out-patient hospital services and insured professional services to which a resident is entitled under the provisions of the *Health Services and Insurance Act* and the regulations;

MBC is defined as Medavie Blue Cross, administrator of the MSI program;

MSI is defined as the Medical Services Insurance Plan of the Department of Health;

Urgent Services is defined as health services required as a result of accident or sudden illness.

III. POLICY OBJECTIVES

This policy is established to ensure that:

1. eligible residents of Nova Scotia who are referred outside of Canada for insured health services not available in Canada are covered provided the services are pre-approved by DoH/MSI; and
2. the DoH/MSI are able to negotiate a reasonable and fair compensation with out-of-country providers prior to the provision of service.

IV. APPLICATION

This policy applies to residents of Nova Scotia who require elective insured health services unavailable in Canada.

This policy **does not** apply to:

1. members of the Department of Veterans Affairs, Canadian Forces, the Royal Canadian Mounted Police or such others who are covered under other federal statutes;
2. persons who are injured while working and covered under the Workers Compensation Board;
3. any persons not falling within the category of Eligible Resident i.e., non-residents of Nova Scotia or such others who do not qualify for health care coverage.

V. POLICY DIRECTIVES

i. Application for Prior Approval

a. Applications for prior approval of elective out-of-country insured health services must be submitted to the Medical Consultant at MSI by an appropriate specialist actively involved in the eligible resident's care in Nova Scotia.
b. It is the responsibility of the appropriate specialist making the application on behalf of the eligible resident to submit all necessary supporting documentation (see item ii below)
c. Only complete applications will be considered.
d. Patient generated requests will not be considered.

ii. Documentation requirements

The application from the appropriate specialist must include:

a. A description of the eligible resident's relevant medical history.
b. A description of the health services requested as well as an estimation of the expected benefit to the patient.
c. A description of any follow up requirements.
d. Information on the available health services in Canada and an explanation of why these are not sufficient for the resident's needs.
e. Documentation of reputable clinical trials beyond Phase III, published in peer reviewed medical literature when the proposed health service is a new or emerging health service.
f. A written recommendation in support of the out-of-country health services, confirming that this is the specialist's recommendation and that the referral is not being provided solely at the request of the patient.

iii. Evaluation

MSI will review the application and provide a response to the referring specialist within 30 days of receiving a complete application. It is the responsibility of MSI to ensure that funding is not provided for out-of-country health services when appropriate, acceptable, and cost effective health services are available in Canada. A cross country survey of available health services will be conducted.

The application will not be approved in the following circumstances:

a. the application documentation is incomplete;
b. the application is for services that are not medically necessary
c. appropriate and acceptable health services are available in Canada;
d. the application has been made without a referral from an appropriate specialist in Nova Scotia;
e. the application has been made without a written recommendation from an appropriate specialist in Nova Scotia;
f. the health service applied for is unproven, experimental, or in the early stages of development;

g. the cost of the health services when compared to the potential benefit is outside the parameters as may be set by DoH from time to time.

iv. Approval

Approvals may be granted for some or all of the following:

a. Consultation only
b. Diagnostic tests
c. Therapeutic or surgical procedures
d. Follow up care

The letter of approval from MSI to the referring appropriate specialist will specify which health services are approved and for how long the approval is valid. A copy of the letter of approval will be sent to the out-of-country specialist.

v. Payment Levels

a. Pre-approved out-of-country services will be paid at 100% of the negotiated rate.
b. Payment for elective out-of-country services that have not been pre-approved is the responsibility of the patient.
c. Residents of Nova Scotia who require urgent inpatient health services as a result of accident or sudden illness whilst traveling outside of Canada will be covered at Nova Scotia rates for similar insured health services. The patient is responsible for any additional fees.
d. Prior-approved eligible residents can apply to the DoH for assistance with travel and accommodation expenses under the *Out-of-Province Travel and Accommodation Assistance* policy.

vi. Appeals

If a request for out-of-country services has been denied by MSI, the eligible resident or the referring specialist may request an administrative review by the DoH. The request for a review of the decision must be made in writing and include relevant information from the appropriate specialist. A response will be provided within 30 days. If, after the administrative review is completed, the request for funding is denied again, the resident may appeal to the Minister.

vii. Confidentiality

All information relating to the assessment of an eligible resident for out-of-country services will be treated as confidential.

VI. POLICY GUIDELINES

Not Applicable

VII. ACCOUNTABILITY

1. For the purpose of the administration of this policy, accountability is delegated to the Deputy Minister of Health by the Minister of Health.
2. The Executive Director of Physician Services and the Chief Financial Officer have responsibility for the ongoing monitoring and enforcement of this policy.
3. This policy is issued under the authority of the DoH, in accordance with items 7 and 8 of the *Hospital Insurance Regulations* made under Section 17 of the *Health Services and Insurance Act.*
4. The program is administered by Medavie Blue Cross (MBC).

VIII. MONITORING

1. The DOH's Chief Financial Officer and the Director of Insured Services will monitor the implementation, performance and effectiveness of this policy.

2. This policy will be reviewed on a yearly basis and amended as necessary to meet the changing needs of the community served.

IX. REFERENCES

1. Out-of-Province Travel and Accommodation Assistance policy
2. *Hospital Insurance Regulations*
3. *Health Services and Insurance Act*

X. INQUIRIES

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