# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>POLICY STATEMENT</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>PRINCIPLES</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>APPLICATION</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>DEFINITIONS</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>ROLES AND RESPONSIBILITIES</td>
<td>2</td>
</tr>
<tr>
<td>6</td>
<td>PROVISIONS</td>
<td>3</td>
</tr>
<tr>
<td>7</td>
<td>FINANCIAL RESOURCES</td>
<td>4</td>
</tr>
<tr>
<td>8</td>
<td>GUIDELINES</td>
<td>4</td>
</tr>
<tr>
<td>9</td>
<td>SUNSET</td>
<td>4</td>
</tr>
<tr>
<td>10</td>
<td>CONTACT</td>
<td>5</td>
</tr>
</tbody>
</table>

Guideline 1  **MEDICAL TRAVEL BENEFITS**
Guideline 2  **MEDICAL ESCORT AND CLIENT ESCORT APPROVAL**
Guideline 3  **APPEALS**

Appendix A  **CLIENT AND CLIENT ESCORT TRAVEL AGREEMENT**
Appendix B  **REQUEST FOR CLIENT ESCORT TRAVEL**
Appendix C  **APPEAL REQUEST FORM**
1.0 POLICY STATEMENT

1.1 The Department of Health (Health) provides travel benefits to eligible Clients who must travel in order to access necessary Health Services that are not available in their home community.

2.0 PRINCIPLES

2.1 This Policy is based on the following principles:

(a) Inuit Societal Values, which includes the guiding principles of Pijitsirniq – serving and providing for family and/or community; and Inuuqatigiitsiarniq – respecting others, relationships and caring for people, will be recognized and respected;
(b) All activities of the health system support an approach that places people first;
(c) The cost of travel should not be an economic barrier to individuals requiring Health Services that are not available in their home community;
(d) Health programs should be designed to be fair, understandable, easy to access, and consistently applied across the territory;
(e) The health services system should operate in a way that is accountable, sustainable, and responsive; and
(f) The Nunavut health care system supports the accessibility principle of the Canada Health Act.

3.0 APPLICATION

3.1 This Policy applies to all Clients who access Health Services outside their home community pursuant to the following legislation and programs:

(a) Hospital Insurance and Health and Social Services Administration Act;
(b) Medical Care Act; and
(c) Mental Health Act
(collectively, “the Legislation”).

3.2 This Policy is issued by the Minister of Health.

3.3 Medical travel arrangements and, in some cases, payments for accommodation, meals, ground transportation, escorts and travel can also be determined in part or in whole by a Client’s ability to access insurance or other programs which are not covered by this Policy. These include but are not limited to:

(a) Non-Insured Health Benefits Program;
(b) Extended Health Benefits Program;
(c) Workers’ Safety and Compensation Commission;
(d) Public Service Health Care Plan;
(e) Government of Nunavut Employees Dental and Health Benefits Plan; and
(f) Private Insurance Plans.

4.0 DEFINITIONS

4.1 Adult – means a Nunavut resident 19 years of age or older.
4.2 **Approved Centres** – means a hospital, clinic, birthing centre, regional health facility, or rehabilitation centre approved by the Assistant Deputy Minister - Operations for the provision of Health Services that are not available in a Client’s home community.

4.3 **Child** – means a Nunavut resident between 2 to 18 years of age.

4.4 **Client** – means a Nunavut resident who must travel in order to access Health Services.

4.5 **Client Escort** – means an Adult authorized to accompany a Client pursuant to Guideline 2, Section 4.

4.6 **Co-payment** – means the portion of eligible Medical Travel expenses which must be paid by eligible Clients as determined in accordance with this Policy.

4.7 **Director** – means a regional Director of Health Programs, a regional Director of Health Facilities, the Director of Clinical Services at the Qikiqtani General Hospital, or their designates.

4.8 **Director Child and Family Services** – means the territorial director designated under the *Child and Family Services Act* or their designate.

4.9 **Guardian** – means a parent, a foster parent, or an individual legally responsible for a Client.

4.10 **Health Services** – means insured services, as defined by the Legislation that a Nunavut Practitioner deems medically necessary for a Client.

4.11 **Infant** – means a Nunavut resident less than 2 years of age.

4.12 **Legislation** – means

   (a) *Hospital Insurance and Health and Social Services Administration Act*;

   (b) *Medical Care Act*; and

   (c) *Mental Health Act*.

4.13 **Nunavut Practitioner** – means an individual who is licensed to deliver Health Services in Nunavut through employment or a contract with the Government of Nunavut, such as nurses, physicians, and midwives. For the purposes of this Policy, dental providers are not considered Nunavut Practitioners.

4.14 **Mature Minor** – means an individual 16 to 18 years of age who has reached a sufficient level of emotional and intellectual development to be able to make their own medical decisions, as determined by the Nunavut Practitioner referring the Medical Travel.

4.15 **Medevac** – means air transport of a Client requiring emergency or specialized care.

4.16 **Medical Escort** – means a health care professional, including but not limited to a physician, nurse, or paramedic, who is required to provide professional care to a Client while travelling.

4.17 **Medical Travel** – means travel between Nunavut communities and/or Approved Centres outside of Nunavut, as approved by a referring Nunavut Practitioner for a Client, for the purpose of obtaining Health Services that are not available in a Client’s home community.

4.18 **Public Guardian** – means the Public Guardian designated under the *Public Guardianship and Trusteeship Act*.

4.19 **Regional Director** – means a Regional Director of Health Services, the Executive Director of Iqaluit Health Services, or their designates.

5.0 **ROLES AND RESPONSIBILITIES**

5.1 **Minister**

   (a) The Minister of Health (“the Minister”) is accountable to Executive Council for the implementation of this Policy.

   (b) The Minister may:

      (i) approve program provisions and Guidelines; and

      (ii) determine the amount of Co-payment from time to time.
5.2 **Deputy Minister**
(a) The Deputy Minister of Health (the Deputy Minister) is accountable to the Minister for the administration of this Policy. The Deputy Minister may delegate this responsibility; and
(b) Amend from time to time the Guidelines and Appendixes that form part of this Policy.

5.3 **Assistant Deputy Minister – Operations**
(a) The Assistant Deputy Minister – Operations may:
   (i) designate Approved Centres for the purpose of this Policy;
   (ii) determine the nearest Approved Centre for necessary and appropriate Health Services; and
   (iii) approve a second Client Escort for Medical Travel in rare situations.

5.4 **Regional Directors**
(a) Regional Directors have the responsibility of reviewing appeals to this Policy; and
(b) May approve Client Escort travel that originates from a community other than where the Client resides.

5.5 **Director**
(a) A Director may approve Client Escort requests from a Nunavut Practitioner pursuant to Guideline 2, Section 4.

5.6 **Nunavut Practitioners**
(a) A Nunavut Practitioner determines the care that a Client requires and initiates a referral to the nearest Approved Centre where the appropriate care is available.
(b) A Nunavut Practitioner may recommend a Client Escort accompany a Client on his or her Medical Travel subject to the approval of a Director.
(c) If the Client is a ward of the Director Child and Family Services, the Director Child and Family Services’s approval is required prior to travel. If the Client is a ward of the Public Guardian, the Public Guardian’s approval is required prior to travel.

5.7 **Clients**
(a) Clients must be willing to attend their appointments as recommended by a Nunavut Practitioner and follow the rules outlined in the Client and Escort Travel Agreement (Appendix A).

5.8 **Client Escorts**
(a) A Client Escort must agree to stay with his/her Client at all times and follow the rules outlined in the Client and Client Escort Travel Agreement (Appendix A).

6.0 **PROVISIONS**

6.1 **Exclusions**
(a) Medical Travel benefits will not be authorized for Medical Travel originating outside Nunavut.
(b) When a Client chooses to travel to a centre other than the nearest Approved Centre, travel benefits will only be provided to the nearest Approved Centre.
(c) Medical Travel benefits will not be provided if a similar benefit is available through an employer or insuring body as set out in section 3.3.
6.2 Medical Travel
   (a) Eligibility
      (i) Eligibility is restricted to Nunavut residents who require Medical Travel to the nearest Approved Centre and meet the following criteria:
        • The Client must hold a valid registration with the Nunavut Health Care Plan; and
        • The reason for travel is a valid referral from a Nunavut Practitioner and the travel cannot be deferred until the Client is traveling for other reasons.
   (b) Benefits
      (i) Medical Travel transportation to and from the nearest Approved Centre; and
      (ii) Medical Escort and Client Escort benefits for eligible Clients.
   (c) In emergency circumstances the cost of Medical Travel for non-residents will be paid by the Government of Nunavut. However, the individual will be billed for the full cost of the transportation provided.
   (d) Clients who have been abusive to other Clients, Client Escorts, Medical Escorts, Health staff, boarding home staff or airline staff will be requested to make their own travel arrangements and seek reimbursement.

6.3 Appeals
   (a) A Client or Guardian has the right to appeal a decision regarding Medical Travel.
   (b) Second Client Escort decisions are not subject to appeal.

6.4 Accountability
   (a) Health will submit an annual report concerning the administration of this Policy to the Minister.

7.0 FINANCIAL RESOURCES

7.1 Financial resources required under this Policy are conditional on approval of funds in the Main Estimates by the Legislative Assembly and there being a sufficient unencumbered balance for the fiscal year for which the funds would be required.

8.0 GUIDELINES

8.1 Client benefits, Client Escort benefits and Appeals will be dealt with in accordance with the Guidelines established in support of this Policy.

9.1 SUNSET

8.1 This Policy will be in effect from the date of signature until March 31, 2019.
10.0 CONTACT

9.1 This Policy is available on the Health website or by contacting Health at:

Medical Travel Office
P.O. Box 1000, Stn 1046
Iqaluit, NU X0A 0H0
Toll Free Line 1-866-371-3305
Phone 1-867-975-5759
Fax 1-867-975-5964

Includes:
Guideline 1 – Medical Travel Benefits
Guideline 2 – Medical Escort and Client Escort Approval
Guideline 3 – Appeals

Appendix A – Client and Escort Travel Agreement
Appendix B – Request for Client Escort Travel
Appendix C – Appeal Request Form
APPENDIX A

CLIENT AND CLIENT ESCORT TRAVEL AGREEMENT

Department of Health (Health)

Health Services Medical Travel Policy

General Terms:
- Health does not tolerate alcohol or illegal drug use, or abusive behaviors, while on Medical Travel assistance.
- Clients and Client Escorts must sign this agreement before travel will be arranged.
- Do not take any bags or packages for anyone, especially if you do not know the contents.
- Health is not responsible for excess baggage or costs associated with unauthorized companions, whether Adult or Children.
- Be sure to take government issued photo identification and your Nunavut Health Care Card.
- Health recommends Clients and Client Escorts take some cash for incidentals.
- You are responsible for treating your fellow travelers and health care workers with respect.

Client Responsibilities:
- Clients must be willing to attend all their appointments. If you do not attend your appointments, you are not eligible for any travel benefits under this Policy.

Client Escort Responsibilities:
- You must be 19 years of age or the Guardian of a Client.
- You must accompany your Client to all appointments.
- You are expected to stay with your Client at all times, including sharing accommodations.
- If your Client is in a hospital, you must be available to assist your Client with his/her needs.
- Where language barriers exist, you must be able to provide translation services in English. You may be asked to demonstrate basic language ability to the person presenting this agreement.
- You must be able to stay with your Client for up to 4 weeks.
- You must be aware of your Client’s condition and medications.

AGREEMENT

1. I understand and agree to my responsibilities.
2. If I do not fulfill my responsibilities, I will not hold Health responsible for the cost of my travel assistance, and I will reimburse Health for all costs incurred.
3. I understand the travel policies and procedures that have been explained to me and I have the emergency phone numbers to call in case something unexpected happens while travelling.

<table>
<thead>
<tr>
<th>Client Signature</th>
<th>Print Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client Escort Signature</td>
<td>Print Name</td>
<td>Date</td>
</tr>
<tr>
<td>Signature of Witness</td>
<td>Print Name</td>
<td>Date</td>
</tr>
</tbody>
</table>

If you are unable to fulfill your responsibilities due to circumstances beyond your control, the Director may review your situation and you may not be responsible for the travel expenses.

Health Services Medical Travel Policy  
Effective Date: June 27, 2013 to March 31, 2019
APPENDIX B

REQUEST FOR CLIENT ESCORT TRAVEL
Department of Health
Health Services Medical Travel Policy

<table>
<thead>
<tr>
<th>Client Name:</th>
<th>HCP Number:</th>
<th>Date of Birth:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Escort Name:</td>
<td>Community*:</td>
<td>Date of Birth:</td>
</tr>
<tr>
<td>Second Escort*:</td>
<td></td>
<td>Date of Birth:</td>
</tr>
<tr>
<td>Request Date:</td>
<td>Appointment Date[s]:</td>
<td></td>
</tr>
</tbody>
</table>

Is the Client a GN Employee or Relative  ☐ Yes  ☐ No; If Yes, state relationship:

* - A second Client Escort is only provided in rare situations. A Nunavut Practitioner must support the request and explain the need for the second Client Escort (use separate page if necessary). The request should be forwarded to the Assistant Deputy Minister - Operations (ADM), via a Regional Director.

^ - Regional Directors may approve an escort from a different community than the Client.

Summarize your request by checking one of the following. A Client Escort is required because:

_____ A. there is a need for legal consent by a Guardian
_____ B. the Client has a mental or physical condition of a nature that he or she is not able to travel unassisted
_____ C. the Client is a unilingual Inuit language speaking Client and interpreter services are not available at the Approved Centre
_____ D. the Escort will participate in the Client's treatment program and receive instructions on specific and essential home medical/nursing procedures that cannot be given to the Client only

Notes: Client Escorts are not allowed to bring an Infant. Client Escorts may request to be switched after 4 weeks of continuous travel.

Background Details [please attach a separate page if necessary]

________________________________________________________

________________________________________________________

Signature of Nunavut Practitioner      Print Name      Contact Number

Fax to: QGH 867-979-3121;  Baffin 867-473-2657;  Kivalliq 867-645-2149;  Kitikmeot 867-983-4089

To be completed by Director - Reason for decision:

________________________________________________________

☐ Approved  ☐ Denied

________________________________________________________

Signature

________________________________________________________

Date

In the event that this request is denied, the Client or Guardian has the right to appeal the decision to the Regional Director by completing an Appeal Request Form and subject to the Appeal Guidelines.
APPEAL REQUEST FORM
Department of Health
Health Services Medical Travel Policy

Information from Client or Guardian who was denied a travel benefit:

Client Name: ___________________________ Date of Birth: ___________________________
HCP Number: ___________________________ Community: ___________________________
Date of this Request: _____________________ Appointment Date[s]: ______________________
Date the Appointment was Booked: _______________ Client’s Employer: _________________

This appeal must include the reason or condition for which the benefit was requested.

This is to notify Health of my intention to appeal a decision made with respect to the benefits associated with travel for the purpose of receiving a Health Service. I am appealing the decision for the following reason(s):

_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Attach additional pages, if necessary.

_________________________________________ Signature of Client or Guardian

_________________________________________ Contact Number

Fax to: QGH 867-979-7623; Baffin Region 867-473-2657; Kivalliq Region 867-645-2409; Kitikmeot Region 867-983-4075

To be completed by Regional Director:
Reason for decision:

☐ Approved ☐ Denied

_____________________________ Signature

_____________________________ Date

In the event that this appeal is denied, there are no further appeal rights.

Health Services Medical Travel Policy
Effective Date: June 27, 2013 to March 31, 2019
1. Introduction

(a) The Department of Health (Health) provides travel benefits to eligible Clients who must travel in order to access necessary Health Services that are not available in their home community.

(b) Eligibility criteria can be found in Section 6.2(a) of the Health Services Medical Travel Policy.

2. Benefits for Eligible Clients

(a) Health is a payer of last resort. Medical Travel benefits (both scheduled and Medevac) are provided only to Clients who do not have access to Medical Travel benefits through an employer, an insuring body, or some other program. Clients who are employed (or the dependant of an employee) and are in possession of Medical Travel benefits through their employer, will be required to use their employer insurance first.

(b) Subject to the Co-payment, if applicable, the benefits cover the following forms of transportation to and from the nearest Approved Centre:

(i) Scheduled aircraft at economy airfare;

(ii) Charter aircraft when it is a reasonable and cost-effective alternative to scheduled travel;

(iii) Ground transportation when required to transfer a Client from one health facility to another;

(iv) The cost of travel to get a Client who becomes seriously ill or badly injured on the land to the nearest health facility (subject to provisions in the Memorandum of Understanding between Health and the Department of Community and Government Services); and

(v) Access to emergency or specialized care necessitating a Medevac. Subject to safety requirements and space, a Nunavut Practitioner may request a Client Escort for an Infant, Child or unilingual Inuit language speaking Client on a Medevac.

(c) Approved travel will commence on the flight immediately prior to the Client’s appointment. Once cleared to return home, Clients will be returned to their originating community through the most economical transportation mode available immediately after their final appointment.
3. **Approval**

   (a) Nunavut Practitioners determine the care a Client requires and initiate a referral to the nearest Approved Centre to ensure that the Client receives appropriate care.

   (b) If the Client is a ward of the Director Child and Family Services, the Director Child and Family Services’s approval is required prior to travel. If the Client is a ward of the Public Guardian, the Public Guardian’s approval is required prior to travel.

4. **Directive**

   (a) A Client who is breastfeeding an Infant may travel with the Infant, unless the medical treatment would prohibit breastfeeding or pose a health risk to the Infant. Child care while the Client is attending the appointment is the responsibility of the Client. Clients traveling for confinement are not allowed to bring an Infant.

5. **Co-payment**

   (a) The amount of the Co-payment shall be determined by the Minister.

6. **Air Transportation Benefits – Return of a Body**

   (a) If a Client, a Client Escort, or a Medical Escort dies while on approved travel, the following is covered:
      
      (i) The body will be prepared to meet minimum airline regulations; and
      
      (ii) The body will be transported to the Nunavut community of residence in the most economical way and in the most economical casket that meets airline standards.

   (b) At the request of the family and with prior approval from a Director, the body can be returned to a community other than where the deceased last resided as long as there is no extra cost to Health.
1. Medical Escorts
   (a) The need and level of Medical Escort is a clinical determination of a Nunavut Practitioner.

2. Client Escorts
   (a) The Client or Guardian initiates a request for a Client Escort based on the criteria in Guideline 2, Section 4. The Nunavut Practitioner must state his or her support or the reasons why he or she does not support the request;
   (b) A Client Escort may not necessarily be approved for the full duration of the Client’s stay; and
   (c) Legal consent by a parent or Guardian is not required for a Mature Minor, thus a Client Escort will not be provided.

3. Criteria for Selecting Client Escorts
   (a) The Client Escort must be an Adult;
   (b) A Nunavut Practitioner in consultation with the Client or Guardian recommends a Client Escort based on the escort criteria in Guideline 2, Section 4;
   (c) The Client Escort must agree to and sign the Client and Escort Travel Agreement (Appendix A);
   (d) The Client Escort must be able to stay with the Client for a minimum of four weeks before returning to his or her home community;
   (e) A Client Escort cannot bring an Infant; and
   (f) Client Escorts with a history of not following the standards in the Client and Escort Travel Agreement may not be selected as Client Escorts in the future.

4. Criteria for Approving Client Escorts
   (a) A Client Escort will be authorized by a Director when:
      (i) there is a need for legal consent by a parent or Guardian; or
      (ii) the Client has a mental or physical condition of a nature that he or she is not able to travel without additional assistance; or
      (iii) an unilingual Inuit language speaking Client requires travel to an Approved Centre where interpretive services are not available. The Client Escort will be required to speak both the Client’s language and English; or

Department of Health
(iv) the Client Escort will participate in the Client’s treatment program and receive instructions on specific and essential home medical/nursing procedures that cannot be given to the Client only.

(v) an unilingual Inuit language speaking Client is age 65 or older. The Client Escort will be required to speak both the Client’s language and English;

(b) After a four week period, a Client Escort may submit a request to a Director, to travel home, and a new Client Escort may be authorized.

5. Escort Expenses

(a) Escort expenses are authorized as follows:

(i) For Medical Escorts:

- economy airfare to and from the nearest Approved Centre;
- accommodation and meals at GN rates at approved commercial accommodation in accordance with Directive No. 820 – 1 of the Government of Nunavut’s Financial Administration Manual; and
- transportation as required between residence, Approved Centres, accommodation and airports.

(ii) For Client Escorts:

- economy airfare to and from the nearest Approved Centre.
1. **Introduction**  
   (a) A Client or Guardian has the right to appeal the denial of a Medical Travel benefit under the Health Services Medical Travel Policy. There is only one level of appeal available. Appeals must be submitted in writing by the Client or Guardian, on the Appeal Request Form (Appendix C), to a Regional Director.  
   (b) Second Client Escort decisions are not subject to appeal.

2. **Appeal Process**  
   (a) Appeal Request Forms can be obtained from any Health Centre or Hospital, from Appendix C in the Health Services Medical Travel Policy, or from the Department of Health website under Medical Travel.  
   (b) The applicable Regional Director, or designates, will review the appeal, make a decision and advise the Client or Guardian accordingly, within 10 business days.  
   (c) The decision is binding and there are no further levels of appeal.

3. **Client Responsibility**  
   (a) The Client or Guardian ensures that the Appeal Request Form is completed fully and accurately, and that it includes the following information:  
      (i) The reason/condition for which the Medical Travel benefit was requested;  
      (ii) The reason a Client Escort was requested, if applicable;  
      (iii) The name of the Client’s community;  
      (iv) The name(s) of the Nunavut Practitioner(s) who were involved in making the decision regarding Medical Travel;  
      (v) The Client’s Nunavut health care card number; and  
      (vi) The name of the Client’s employer, if the Client is employed.  
   (b) The Client has 60 days from the receipt of a denial decision to submit a completed Appeal Request Form.  
   (c) Once the Client has completed the Appeal Request Form, it should be sent, either by fax or by e-mail, to the appropriate Regional Director.

---

Department of Health