**Sections in red require you to add in local information.**

CLUB LETTERHEAD

DATE

FOR A LOCAL MEMBER WHO IS NOT A CABINET MINISTER[Name of Member], M.P.

FOR A LOCAL MEMBER WHO IS A CABINET MINISTER, The Honourable [name], M.P.

House of Commons

Parliament Buildings

Ottawa, Ontario, K1A 0A6

Email: first name.second name@parl.gc.ca

**Re: Canada Health Act and Common Application of Medically Necessary Services**

Dear [Mr./Mrs./Ms. \_\_\_\_\_\_\_] / FOR A LOCAL MEMBER WHO IS A CABINET MINISTER: Dear Minister \_\_\_\_\_\_\_\_\_\_\_\_\_,

I am writing on behalf of the [CFUW/UWC\_\_\_\_\_], an affiliate of the Canadian Federation of University Women (CFUW) that works to improve the status of women and to promote human rights, public education, social justice and peace in Canada and abroad.

We are calling on you to urge the Federal Government to work with provincial and territorial governments and health ministries to define national standards for “medically necessary care” under the Canada Health Act (CHA).

Under the Canada Health Act, our national health insurance program is designed to ensure that all residents of Canada have reasonsable access to “medically necessary” hospital and physician services. However, the CHA provides no formal defintion of what is insured as “medically necessary”. As a result, there are inconsistencies across provincial and territorial health insurance coverage with respect to the following areas:

* What each provincial and territorial plan deems as “medically necessary hospital and physician services”, thus what is insured and not insured and what is “medically necessary” for maintaining health, preventing disease or diagnosing or treating an injury, illness, or disability and medically required physician services rendered by medical practitioners
* Additional Benefits provided by each province/territory.
* Ongoing additions/deletions to list of insured services and physician schedule of benefits.
* Uninsured services for which patients may be charged.

Establishing national standards for “medically necessary care” is crucial in order to eliminate potential inconsistencies amongst the thirteen individually administered provincial and territorial plans. In 1995, the Canada committed to using Gender-based Analysis Plus (GBA+) as part of its ratification of the United Nations’ *Beijing Platform for Action* to advance gender equality in Canada.[[1]](#endnote-1) Social identity factors such as gender, age, race, income, disability, among others, impact one’s needs and experiences in relation to health insurance policy. The integrity of the Canada Health Act relies on defining national standards for “medically necessary care” to ensure that all insured persons of a province/territory have reasonable access to insured services without discrimination.

Currently, insured services and what is deemed as “medically necessary care” vary widely between provincial and territorial health insurance plans. For example, Ontario offers funding for cervical cancer screenings starting at age 21, every three years, until age 70, while Yukon has no organized screening program for cervical screening. In New Brunswick, the Services for Children with Autism Spectrum Disorders provides 20 hours a week of intensive intervention for preschool children, amounting up to $33,000 per child every year for autism therapy. Contrarily, in Saskatchewan, families can only access up to $4,000 a year per child under the age of six, while no specific programs exist for children with autism in Nunavut.

The disparities in insured services across Canada point to the need to define national standards of “medically necessary care” under the CHA. Under the Government of Canada’s commitment to implementing GBA+ in the development of effective programs and policies, national standards must be established to ameliorate inconsistencies across provincial and territorial health insurance plans that impact one’s access to insured services. Comprehensive national standards will fulfill the CHA’s primary objective “to protect, promote and restore the physical and mental well-being of residents of Canada and to facilitate reasonable access to health services without financial or other barriers,” (Section III).[[2]](#endnote-2)

We ask that you ensure your party is committed to the common application of the term “Medically Necessary Care” and establish national standards to maintain the integrity of the Canada Health Act.

We would be pleased to meet to discuss this letter and our concerns.

Yours sincerely,

 [NAME OF CLUB PRESIDENT]

President – [Name of Club]

1. Status of Women Canada, “What is GBA+?” last modified December 4, 2018, <https://cfc-swc.gc.ca/gba-acs/index-en.html> [↑](#endnote-ref-1)
2. Canada Health Act, RSC 1985, c C-6, retrieved on September 23, 2020, <http://canlii.ca/t/532qv> [↑](#endnote-ref-2)