Veterans Affairs Canada | Anciens Combattants Canada

Requirement to Access Provincial Programs

Issuing Authority: Director General, Policy and Research
Effective Date: 1 April 2019
Document ID: 1066

Table of Contents

Purpose
Policy
Health Care Benefits
VIP Services
Long Term Care
Topping Up Provincial and Community Programs or Other Programs
Social Assistance
Delays in the Provision of Benefits, Services and Care
References

Purpose

This policy explains the requirement for clients to access provincial and community programs before receiving Departmental health care benefits, Veterans Independence Program (VIP) services or Long Term Care.

Policy

Health Care Benefits

1. Veterans Affairs Canada (VAC) is responsible for the provision of health care benefits required by eligible disability benefits recipients for their disability benefits entitled conditions (referred to as A-line).
2. Other clients must first access programs available through provincial and community programs before receiving health care benefits from VAC (generally referred to as B-line).
3. Former members or reserve force members of the Canadian Forces are eligible for health care benefits from VAC, to the extent that these benefits are not available to them through the Service Income Security Insurance Plan (SISIP) or through the Public Service Health Care Plan.

VIP Services

4. All clients must access provincial and community programs first before receiving VIP services.

Long Term Care

5. VAC is responsible for the full cost of long term care required by disability benefits recipients for their disability benefits entitled conditions.

6. All other clients must access available provincial and community programs first before receiving community long term care at VAC’s expense.

Topping Up Provincial and Community Programs or Other Programs

7. When provincial or community programs are available but not sufficient to meet clients' needs, health care benefits, VIP services or long term care may be approved to complement or “top up” that which is provided by the province or community or by other available programs.

Social Assistance

8. Under no circumstances are clients required to apply for social assistance in order to obtain VAC benefits (health care benefits, VIP services or long-term care).

Delays in the Provision of Benefits, Services and Care

9. VAC may consider the provision of benefits, services and care, when these benefits, services and care are not being made available to clients in a timely fashion. This situation may occur as a result of waitlists for provincial, community programs or health insurance benefits; delays may also occur as a result of disagreements over the responsibility to provide coverage.

References

Veterans Health Care Regulations, subsections 3(4), 3(5), 3(6), 3(7), 15(1), 15(1.1), 15 (1.2), 15(2) and 22(2); sections 17 and 18