

HEALTH GRANT GUIDELINES



Atikameksheng Trust
31-1 Reserve Road
Naughton, Ontario
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ATIKAMEKSHENG TRUST HEALTH GRANT GUIDELINES

(All grants are subject to investment income availability)

Grant Application Criteria

- ❁ Applications may only be made for Trust beneficiaries (registered members of Atikameksheng Anishnawbek).
- ❁ Health grant applications are for health-related issues that are not provided under private health insurance, non-insured health benefits (NIHB), or the Ontario health insurance Plan (OHIP). Costs that are covered by private health insurance, NIHB, or OHIP will be considered for costs that exceed the maximum amounts eligible under those programs.
- ❁ A Caregiver, Parent and/or Guardian may apply on a beneficiary's behalf.

Health Grant Application Requirements

Submission of a health grant application should include the following documents to ensure grant review:

- ❁ A fully completed health grant application for eligible health grants expenses.
- ❁ Copy of the beneficiary's band registration.
- ❁ Copies of the Healthcare provider's statement on the reason for the request, the expected benefit, and the cost of the procedure, equipment, or supplies.
- ❁ Includes copies of receipts, bills and/or invoices for the health expense.
- ❁ Supporting documents which demonstrate there are no alternative sources to fund the health grant request. (Private health insurance, non-insured health benefits (NIHB), or the Ontario health insurance plan (OHIP).)
- ❁ Supporting documents which demonstrate the funding provided by alternative sources. (Private health insurance, non-insured health benefits (NIHB), or the Ontario health insurance plan (OHIP).)

Confidentiality

The Atikameksheng Trust holds the confidentiality of our applicants in high regards. Applications will not be discussed with any third party unless otherwise noted on the application with signed consent. It is recommended that a caregiver, parent, or guardian submit their contact information as the person of contact if applying on behalf of.

Health Grant Maximum Eligible Expenses

Any expenses for health-related issues not listed here, will be dealt with on an individual basis. The Board of Trustees maintains their discretion in all decision making to confirm grant funding eligibility.

<u>Categories / Items</u>	<u>Amount</u>	<u>Frequency</u>
Wheelchairs	Maximum amount of \$3500.00	One time allowance
Walkers	Maximum amount of \$200.00	One time allowance
Lift chairs	Maximum amount of \$2500.00	One time allowance
Home hospital bed	Maximum amount of \$2500.00	One time allowance
Dental	Maximum amount of \$2000.00	Every ten years
Orthodontics	Maximum amount of \$2500.00	One time allowance
Hearing aids	Maximum amount of \$1500.00	One time allowance
Mental Health Services, Counselling, Psychiatrists	Maximum amount of \$500.00	Yearly
Massage therapy, Physiotherapy, and Chiropractic Services	Combined maximum amount of \$500.00	Yearly
Prescription medication	\$100 per month to a maximum of \$1200	Yearly
Eyeglasses	Maximum amount of \$300.00	Every two years
Optometry Exams	Maximum amount of \$150.00	Every two years
Medical Footcare	Maximum amount of \$1000.00	Every two years
Prescribed custom footwear and custom orthotics	Combined maximum amounts of \$300.00	Every two years
Casts / walking air casts	Combined maximum amounts of \$200.00	Yearly
Canes / crutches	Combined maximum amounts of \$40.00	Yearly
Urgent medical placements, long term care, nursing homes, assisted living, palliative care, waitlisted long term care applicants	\$100.00 per month to a maximum of \$1200.00	Yearly

Non-eligible Health Grant Applications

The following list is comprised of applications that will not be considered for grant funding:

- ❁ Drugs with investigational or experimental status
- ❁ Medical Cannabis
- ❁ Opioid painkillers
- ❁ Medications for travel
- ❁ Hair growth stimulants
- ❁ Fertility agents
- ❁ Hormone Therapy
- ❁ Cosmetics

Submitting a Health Grant Application

Beneficiaries are instructed to apply their Health Grant Applications to the office of the Atikameksheng Trust. Beneficiaries can submit their application online, email, in person, by mail, or through fax to:

Atikameksheng Trust
31-1 Reserve Rd, Naughton, Ontario, P0M 2M0
Phone: 705-692-2235
Fax: 705-692-7225
Email: atiktrust@vianet.ca
Website: www.atiktrust.ca

Incomplete Health Grant Applications

It is the responsibility of the beneficiary to submit all required documents. Failure to submit may result in your application being denied. Please note that additional documentation may be requested at the trustee's discretion.

Withdrawing from Health Grant Funding

Beneficiaries withdrawing from their approved health service should notify the Atikameksheng Trust.

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Any situation for issues not covered in this document will be dealt with on an individual basis and will be updated. The Board of Trustees maintains their discretion in all decision making and will use this document as guidelines to meet all application requirements used in a grant review process.

