



# Extended Health Benefits

Information for NWT Residents to Access Benefits



# Introduction

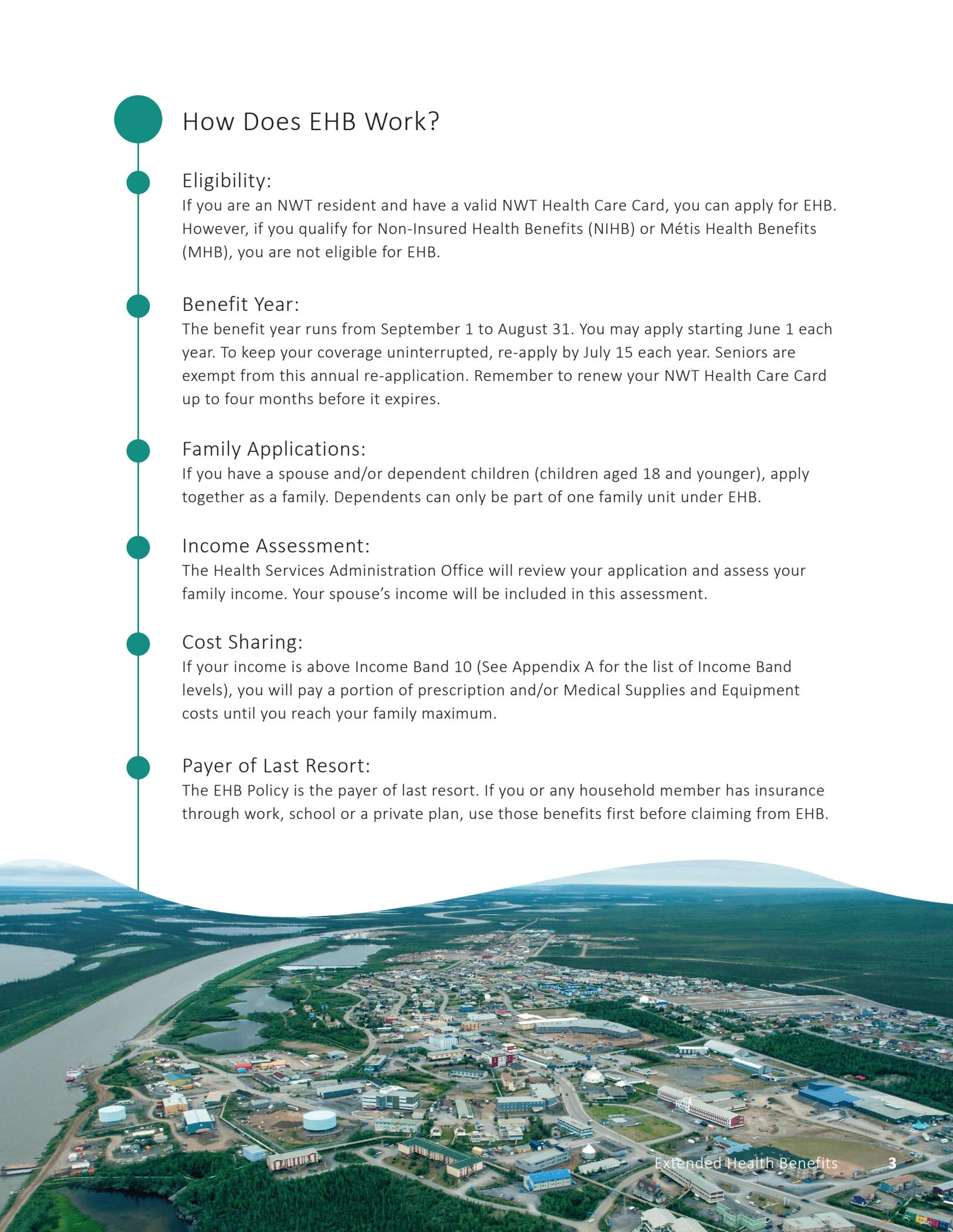
This booklet provides you with general information about how to access Extended Health Benefits (EHB). Please note that this booklet serves as a guide and is not a legal document. For the most current information and forms, visit [www.gov.nt.ca/ehb](http://www.gov.nt.ca/ehb). Information may change periodically, so make sure you verify the latest information by visiting the website or contacting the Health Services Administration Office. You can email them at [healthcarecard@gov.nt.ca](mailto:healthcarecard@gov.nt.ca) or call 1-800-661-0830.

## About EHB

### What is EHB?

Extended Health Benefits (EHB) is the Government of the Northwest Territories' public benefits plan that is in place to help residents with the cost of non-insured medical needs not covered by the NWT Health Care Plan.

Coverage for Low-Income Families:	Coverage for Seniors (aged 60 and over):	Coverage for Higher-Income Families:
<p>If your family income is below the low-income threshold, you receive coverage at no cost for:</p> <ul style="list-style-type: none"><li>• Prescription drugs</li><li>• Dental services</li><li>• Vision care</li><li>• Medical supplies and equipment</li><li>• Medical travel for prior-approved travel needed to access medical supplies, equipment, and dental benefits</li></ul>	<p>If you are 60 or older, you receive coverage at no cost for:</p> <ul style="list-style-type: none"><li>• Prescription drugs</li><li>• Dental services</li><li>• Vision care</li><li>• Medical supplies and equipment</li><li>• Medical travel for prior-approved travel needed to access insured health services, medical supplies, equipment, and dental benefits at no cost to you</li></ul>	<p>If your family income is above the low-income threshold, you may receive some coverage for:</p> <ul style="list-style-type: none"><li>• Prescription drugs</li><li>• Medical supplies and equipment</li><li>• Medical travel for prior-approved travel needed to access medical supplies and equipment</li></ul> <p>However, you may need to pay a portion of the costs based on your income level.</p>



## How Does EHB Work?

### Eligibility:

If you are an NWT resident and have a valid NWT Health Care Card, you can apply for EHB. However, if you qualify for Non-Insured Health Benefits (NIHB) or Métis Health Benefits (MHB), you are not eligible for EHB.

### Benefit Year:

The benefit year runs from September 1 to August 31. You may apply starting June 1 each year. To keep your coverage uninterrupted, re-apply by July 15 each year. Seniors are exempt from this annual re-application. Remember to renew your NWT Health Care Card up to four months before it expires.

### Family Applications:

If you have a spouse and/or dependent children (children aged 18 and younger), apply together as a family. Dependents can only be part of one family unit under EHB.

### Income Assessment:

The Health Services Administration Office will review your application and assess your family income. Your spouse's income will be included in this assessment.

### Cost Sharing:

If your income is above Income Band 10 (See Appendix A for the list of Income Band levels), you will pay a portion of prescription and/or Medical Supplies and Equipment costs until you reach your family maximum.

### Payer of Last Resort:

The EHB Policy is the payer of last resort. If you or any household member has insurance through work, school or a private plan, use those benefits first before claiming from EHB.

# What Assistance Can Be Expected from EHB?

EHB offers a range of benefits depending on your individual or family net income from the previous year. Here's how it can help you:



## Prescription Drug Benefits:

EHB covers prescription drugs listed on the NWT Pharmacare Formulary. Coverage for drugs not listed on the formulary may be considered on an exception basis, with prior approval, if they meet the following requirements:

- A Health Care Prescriber provides clinical reasons for the request including that all other similar drugs on the Formulary have been tried.
- The NWT's clinical consultant recommends approval for the drug.
- The drug has received a positive recommendation from the Canadian Agency for Drugs and Technologies (CADTH)



## Cost Sharing Arrangement:

Depending on your income level:

- **Below Low-Income Threshold (Income Band 1):** Eligible prescription drugs are covered at no cost-share for residents
- **Seniors (60+):** Eligible prescription drugs are covered at no cost-share for residents
- **Income Band 2-10:** Eligible prescription drugs are covered at no cost-share for residents
- **Above Income Band 10:** Eligible prescription drugs are covered, with residents required to cost-share through a three-part arrangement:
  1. **Deductible:** This is the amount you or your family need to pay out of pocket before the drug plan starts covering costs. Your deductible amount is based on your income assessment. You will pay 100% of your family's prescription drug costs up to the deductible amount.
  2. **Co-payment:** Once your family reaches the family deductible amount, the drug plan will cover 70% of your eligible prescription drug costs and you will pay the remaining 30% until you reach your family maximum amount.
  3. **Drug Benefit Family Maximum:** This is the maximum amount your family will pay for eligible prescriptions during the benefit year. Once you reach this family maximum, the drug plan will cover 100% of your eligible prescription drug costs for the rest of the benefit year.



## Medical Supplies and Equipment Benefits:

EHB covers prescribed medical supplies and equipment listed in the NIHB Medical Supplies and Equipment Guide and Benefit List.

### Cost Sharing Arrangement:

Depending on your income level:

- **Below Low-Income Threshold (Income Band 1):** Medical supplies and equipment are covered at no cost-share for residents
- **Seniors (60+):** Medical supplies and equipment are covered at no cost-share for residents.
- **Income Band 2-10:** Medical supplies and equipment are covered at no cost-share for residents
- **Above Band 10:** Medical supplies and equipment are covered, with residents required to cost-share through a two-part arrangement:
  1. **Co-payment:** EHB will cover 75% of the eligible medical supplies and equipment costs and you will pay the remaining 25% until you reach your family maximum amount.
  2. **MSE Family Maximum:** This is the maximum amount your family will pay for eligible medical supplies and equipment during the benefit year. Family maximums range from \$500 to \$1500, based on your net income level. Once you reach this family maximum, EHB will cover 100% of your eligible medical supplies and equipment costs for the rest of the benefit year.



## Vision Care Benefits:

EHB covers products listed in the NIHB Guide to Vision Care Benefits and NIHB Regional Vision Care Fee Grid NWT if your family income is below the low-income threshold for your region, or if you are a senior aged 60 or over.



### Dental Benefits:

EHB covers a range of dental services listed in the NIHB Dental Benefits Guide and the NIHB Regional Dental Benefit Grid NWT if your family income is below the low-income threshold for your region, or if you are a senior aged 60 or over. Prior approval is required for certain treatments.



### Travel Benefits:

EHB provides some travel benefits if you meet the following criteria:

- **Seniors (aged 60 and over):** Receive 100% coverage for prior-approved travel needed to access insured health services, medical supplies, equipment, and dental benefits.
- **Residents below the low-income threshold:** Receive 100% coverage of prior-approved travel needed to access medical supplies, equipment, and dental benefits.
- **Residents above the low-income threshold:** Receive 100% coverage for prior-approved travel needed to access medical supplies and equipment benefits only.

If you don't meet these criteria, you can access medical travel benefits through the [NWT Medical Travel Policy 49.06](#) and corresponding [Ministerial Policies](#).

Regardless of which policy you access, medical travel benefits include:

- Coverage for travel to and from the nearest centre, plus stay at a boarding home, organized by the Medical Travel Office, including meals, accommodation, and transportation.
- In communities without a boarding home, the [Medical Travel Office](#) will arrange hotel stays, meals, and local transportation.
- If you choose not to stay at the boarding home, you must arrange your own meals, accommodation, and local transportation. We reimburse up to \$50 per approved person per night for accommodation and \$18 per approved person per day for meals. Reasonable local transportation costs to airport, accommodation, pharmacy, and appointments may also be approved.

## Estimating Your Benefits:

Use the Extended Health Benefits Calculator to estimate your eligibility for benefits and potential contribution based on your family income. Visit [www.gov.nt.ca/newehbpolicy](http://www.gov.nt.ca/newehbpolicy) for more information.



# Enrollement

## Who Can Enroll in EHB?

To enroll for EHB, you must:

- Hold a valid NWT Health Care Card.
- Not be eligible for benefits under the Métis Health Benefits Policy or Non-Insured Health Benefits Program.
- Enrollment includes you, your spouse (if any), and dependent children aged 18 and under.

## How to Register

You can register online, by mail or fax. Get application forms at [www.gov.nt.ca/newehbpolicy](http://www.gov.nt.ca/newehbpolicy), or by emailing the Health Services Administration Office at [healthcarecard@gov.nt.ca](mailto:healthcarecard@gov.nt.ca) or calling 1-800-661-0830.

## Is There a Deadline to Register?

There is no deadline, but we won't process claims outside the current benefit year. Additionally, EHB recipients won't be reimbursed if they overpay for prescription drugs or Medical Supplies and Equipment while not registered. We recommend applying before July 15 each year to ensure uninterrupted coverage.

## Required Information to Register for EHB

You need to provide:

- NWT Health Care Card numbers and birth dates for all family members.
- Net income from the previous year (found on Line 23600 of income tax returns) and the amount of Registered Disability Savings Plan (RDSP) income received from the previous year (found on Line 12500) for you and your spouse (if applicable).

If you haven't filed a Canadian tax return for the previous year, please complete Section 4 – Alternate Proof of Income in the EHB Application form.

## Who is Considered Part of a Family for EHB?

Your family includes you, your spouse (if applicable), and dependent children aged 18 and under.

- A spouse is someone who is married to or living in a marriage-like relationship with you, regardless of gender.
- Dependent children must be financially supported by you or your spouse and must not be married or living with a partner in a marriage-like relationship.

## Providing Income Information

After you complete your taxes, you will receive a notice of assessment from the Canada Revenue Agency (CRA). When applying for EHB, provide your net income (from line 23600) and RDSP payment (from line 12500). If you have a spouse, include their net income and RDSP payment as well. If you haven't filed a Canadian tax return for the previous year, complete Section 4- Alternate Proof of Income in the EHB Application form.

## How Can You Determine Your Payment Amount?

Use the Extended Health Benefits Calculator to estimate your EHB benefit level and potential contribution. Visit [www.gov.nt.ca/newehbpolicy](http://www.gov.nt.ca/newehbpolicy). Your benefit level will be confirmed through your application, and you will receive details by mail, including your benefit level, deductible (if any), and family maximum.

## Maintaining EHB Coverage While Out of Territory

If you are a student enrolled in post-secondary education outside the NWT, you can keep your EHB during temporary absences. To do this, you must:

- Be enrolled full-time in a post-secondary institution.
- Meet NWT Health Care residency requirements when leaving the territory.
- Submit a completed Temporary Absence form to the Health Services Administration Office along with documentation confirming full-time enrollment status as defined by the school.

# After you've enrolled



## After You Submit Your Application

The Health Services Administration Office will verify your application for accuracy. If there is any incomplete or incorrect information, we will contact you by email or mail to resolve any issues.

Once your application has been verified and meets EHB requirements, you will receive an EHB introduction letter. This letter will explain your benefit level, any deductible, and family maximum if applicable. A frequently asked questions document will be included to help address any questions you might have.



## Do You Need to Update Your Information if it Changes?

Yes, you should update your information if any changes occur. If your income decreases by 10% or more during the benefit year, or if there are changes in your family (such as marriage, separation, divorce, or death), complete and submit the [Extended Health Benefit Reassessment Form](#) to the Health Services Administration Office. We will adjust your benefit coverage accordingly to ensure you receive the appropriate support.

# Claiming an EHB Expense

As a registered member of the EHB plan, you will receive an Alberta Blue Cross (ABC) card. Always carry this card with you to access services.



## Prescription Drug:

- **At the Pharmacy:** Show your ABC card when you pay for your prescription. The pharmacist will bill ABC directly, so you won't need to submit claim forms or wait for reimbursement.
- **If Direct Billing is Not Available:** Pay upfront and submit a completed ABC Health Services Claim Form with your original receipts to ABC for reimbursement. You can find the form online at [www.ab.bluecross.ca/forms.php](http://www.ab.bluecross.ca/forms.php). Your reimbursement will be mailed to your home address.



## Dental Services:

- **At the Dentist:** Most dental offices bill ABC directly. Show your card, and you'll only need to pay amounts not covered by your plan.
- **If Direct Billing is Not Available:** Pay upfront and submit a completed ABC Health Services Claim Form, which your dentist must partially complete, along with your original receipts to ABC for reimbursement. This form is available from your dentist or online at [www.ab.bluecross.ca/forms.php](http://www.ab.bluecross.ca/forms.php). Your reimbursement will be mailed to your home address.



## Vision Care, Medical Supplies and Equipment:

- **Vision Care, Medical Supplies and Equipment:** For most eligible benefits, you won't need to pay upfront. If you do, get an official receipt and submit it with a completed ABC Health Services Claim Form for reimbursement.

# Continuing EHB Coverage

## Do You Need to Reapply for EHB Each Year?

Yes, you must submit a completed EHB application form annually. You will also need to provide confirmation of your net family income each year before July 15. Update any changes to personal information such as a new home address when submitting your application.

## What Should You Do If You Lose Your Job, Your Income Changes or Your Family Situation Changes During the Year?

If your job status, income, or family situation changes during the year, you can request an adjustment by completing and submitting the Extended Health Benefit Reassessment Form to the Health Services Administration Office. Provide acceptable documentation for the relevant year to substantiate any decrease in family net income. Acceptable documentation includes records of employment, copies of Employment Insurance, Canada Pension Plan payments, letters from employers, or proof of receipt of NWT Income Assistance. The Health Services Administration Office may consider other forms of income proof on an individual basis upon approval.

### **Additional reasons to contact the Health Services Administration Office:**

- You marry or enter a marriage-like relationship.
- You have a new baby or adopt a child.
- You gain custody of a child from a previous marriage or relationship.
- You separate or divorce.
- Your spouse dies.
- Your spouse becomes a resident in a licensed long-term care facility.



# Appendix A: Income Thresholds by Region

Band	Tlicho	South Slave	Yellowknife	Dehcho	Beaufort-Delta	Sahtu
1	\$ 34,794	\$ 34,774	\$ 35,147	\$ 36,741	\$ 42,258	\$ 42,908
2	\$ 34,795	\$ 34,775	\$ 35,148	\$ 36,742	\$ 42,259	\$ 42,909
3	\$ 37,208	\$ 37,186	\$ 37,585	\$ 39,290	\$ 45,189	\$ 45,884
4	\$ 39,788	\$ 39,765	\$ 40,191	\$ 42,014	\$ 48,323	\$ 49,066
5	\$ 42,547	\$ 42,522	\$ 42,978	\$ 44,927	\$ 51,673	\$ 52,468
6	\$ 45,497	\$ 45,471	\$ 45,958	\$ 48,043	\$ 55,256	\$ 56,106
7	\$ 48,651	\$ 48,623	\$ 49,145	\$ 51,374	\$ 59,088	\$ 59,997
8	\$ 52,025	\$ 51,995	\$ 52,553	\$ 54,936	\$ 63,185	\$ 64,157
9	\$ 55,632	\$ 55,600	\$ 56,197	\$ 58,745	\$ 67,566	\$ 68,606
10	\$ 59,490	\$ 59,456	\$ 60,093	\$ 62,819	\$ 72,251	\$ 73,363
11	\$ 63,615	\$ 63,578	\$ 64,260	\$ 67,175	\$ 77,261	\$ 78,450
12	\$ 68,026	\$ 67,987	\$ 68,716	\$ 71,832	\$ 82,619	\$ 83,889
13	\$ 72,743	\$ 72,701	\$ 73,481	\$ 76,813	\$ 88,347	\$ 89,706
14	\$ 77,787	\$ 77,742	\$ 78,576	\$ 82,140	\$ 94,473	\$ 95,926
15	\$ 83,181	\$ 83,133	\$ 84,025	\$ 87,835	\$ 101,024	\$ 102,578
16	\$ 88,948	\$ 88,897	\$ 89,851	\$ 93,926	\$ 108,029	\$ 109,691
17	\$ 95,116	\$ 95,061	\$ 96,081	\$ 100,438	\$ 115,520	\$ 117,297
18	\$ 101,711	\$ 101,653	\$ 102,743	\$ 103,403	\$ 123,530	\$ 125,430
19	\$ 108,764	\$ 108,702	\$ 109,868	\$ 114,850	\$ 132,096	\$ 134,127
20	\$ 116,306	\$ 116,239	\$ 117,486	\$ 122,814	\$ 141,255	\$ 143,428
21	\$124, 370	\$ 124,299	\$ 125,632	\$ 131,330	\$ 151,050	\$ 153,373
22	\$ 132,994	\$ 132,918	\$ 134,344	\$ 140,436	\$ 161,523	\$ 164,008
23	\$ 142,216	\$ 142,134	\$ 143,659	\$ 150,174	\$ 172,723	\$ 175,380
24	\$ 152,077	\$ 151,990	\$ 153,620	\$ 160,587	\$ 184,700	\$ 187,541
25	\$ 162,622	\$ 162,529	\$ 164,272	\$ 171,722	\$ 197,507	\$ 200,545
26	\$173, 899	\$ 173,799	\$ 175,663	\$ 183,629	\$ 211,202	\$ 214,451
27	\$ 185,957	\$ 185,850	\$ 187,843	\$ 196,362	\$ 225,847	\$ 229,321
28	\$ 198,851	\$ 198,737	\$ 200,868	\$ 209,978	\$ 241,507	\$ 245,222
29	\$ 212,639	\$ 212,517	\$ 214,797	\$ 224,548	\$ 258,253	\$ 262,226
30	\$ 227,384	\$ 227,253	\$ 229,691	\$ 240,107	\$ 276,161	\$ 280,408

# Appendix B: Extended Health Benefits Glossary

Term	Definition
<b>Beneficiary / client</b>	A person who is enrolled in EHB.
<b>Benefit Year</b>	A benefit year is September 1 to August 31.
<b>Default Coverage</b>	The benefit coverage provided to families when EHB administrators cannot verify the family's income. In these cases, the family will default and receive coverage as high-income earners. These families are assigned the annual default deductible / family maximum per family for drug and MSE benefits, respectively.
<b>Dependent / Dependent Child</b>	A dependent (age 18 or under) is an NWT resident who is the legal ward or child of the applicant or applicant's spouse and meets all the following criteria: <ul style="list-style-type: none"><li>• Is supported by the applicant or applicant's spouse,</li><li>• Is neither married, nor cohabiting in a marriage-like relationship.</li></ul>
<b>Family</b>	A family includes the applicant, their spouse (if applicable), and any dependent children. For simplicity, the term "family" includes individuals without spouses or dependent children.
<b>Family Deductible</b>	The Family Deductible is the amount of out-of-pocket costs paid before the cost share begin. Families assessed with low incomes are not required to meet a deductible.
<b>Cost Sharing</b>	The shared payment of eligible prescription costs between EHB and the family.

<b>Family Maximum</b>	The maximum amount a family will pay for eligible prescriptions and medical supplies and equipment during the benefit year.
<b>Income Bands</b>	In accordance with the established income thresholds, 30 income bands identify the deductible, cost share, and family maximum assigned to a family based on income assessment.
<b>Income / Net Income</b>	Applicant total net income is the amount reported on Line 23600 on the Canada Revenue Agency Income Tax form for both applicant and spouse (if applicable) less any income from a Registered Disability Savings Plan reported on Line 12500.
<b>Reassessed Family Income / Reassessed Net Income</b>	When family/net income changes more than 10% during a benefit year warranting an Income Review Process.
<b>Income Review Process</b>	The process by which applicants (families) may request that their level of coverage be re-assessed.
<b>Medically Necessary</b>	Health care services or supplies needed to diagnose or treat an illness, injury, condition, disease, or its symptoms and that meet accepted standards of medicine.
<b>Applicant</b>	The person who applies the family for EHB.
<b>Spouse</b>	A spouse is a person who is either married to or living and cohabitating in a marriage-like relationship with the applicant and may be of the same gender as the applicant.
<b>Senior</b>	A person aged 60 years and older who holds an effective registration with the NWT Health Care Plan and is not eligible for Métis Health Benefits or Non-Insured Health Benefits.
<b>Tax Year</b>	The income tax year used to calculate benefits. This is last tax year completed prior to the benefit year. For example, EHB Drug Benefits coverage for September 2024 to August 2025 is based on income earned in Tax Year 2023.

For more information:

[www.gov.nt.ca/ehb](http://www.gov.nt.ca/ehb)

Health Services Administration Office:

[healthcarecard@gov.nt.ca](mailto:healthcarecard@gov.nt.ca)

1-800-661-0830

