

## **COURT APPROVED PROTOCOL**

### **UNINSURED TREATMENT AND MEDICAL EXPENSES AND OUT-OF-POCKET EXPENSES**

REVISED DECEMBER, 2017

This protocol applies to sections 4.06 and 4.07 of the Transfused HCV Plan, the Hemophiliac HCV Plan and the HCV Late Claims Benefit Plan and to out-of-pocket expenses special distribution benefits provided for in the 2016 Allocation Orders.

#### **GENERAL PROVISIONS**

1. For the purpose of this protocol, Treating Physician means a medical doctor who is or was treating the Approved HCV Infected Person or Approved Late Claim HCV Infected Person in respect of his/her HCV infection or conditions due to his/her infection with HCV.
2. The restriction on processing claims for out-of-pocket expenses and uninsured treatment and medical expenses to circumstances where the claim totaled \$250 or more or once per year contained in the previous version of this protocol is removed.

#### **TREATMENT AND MEDICAL EXPENSES**

3. In consultation with a physician(s) in one or more of the medical specialties listed on the Treating Physician Form ("HCV Medical Specialist") the Administrator shall compile a list of medications and treatments which are recommended or prescribed for treatment of HCV and for conditions due to the infection with HCV which are generally accepted by the medical community (the "HCV Medication List"). This list shall be periodically updated at the Administrator's discretion.
4. The Administrator may accept a completed Compensation for Uninsured Treatment/Medication and Out-of-Pocket Expenses Form accompanied by receipts as proof of medical expenses incurred for any of the items on the HCV Medication List, except where:
  - (a) the total claimed for medical expenses on any one application exceeds \$500 (excluding the costs of Compensable HCV Drug Therapy);
  - (b) the level of medical expenses claimed is inconsistent with the overall application or disease level (eg: a person who is at Level 1 and has a negative PCR test claiming for significant medical expenses) of the Approved HCV Infected Person or Approved Late Claim HCV Infected Person ; or

- (c) for any other reason, the Administrator requires the confirmation of the Treating Physician that the treatments or medications were prescribed or recommended as treatment or medication for the HCV infection or conditions due to the infection with HCV.
- 5. Where one of the exceptions described above applies, or where there are items for which a claim is made but no receipts are available, the Administrator shall require the Approved HCV Infected Person or Approved Late Claim HCV Infected Person to supply a form completed by a Treating Physician confirming that he or she prescribed or recommended the claimed items as treatment or medication for the Approved HCV Infected Person or Approved Late Claim HCV Infected Person for his or her HCV infection or conditions due to the infection with HCV.
- 6. Where reimbursement is claimed for items which are not on the HCV Medication List, the Administrator shall require the Approved HCV Infected Person or Approved Late Claim HCV Infected Person to supply a form completed by the Treating Physician confirming that he or she prescribed or recommended the treatment or medications for treatment of the Approved HCV Infected Person's or Approved Late Claim HCV Infected Person's HCV infection or conditions due to the infection with HCV. If the Treating Physician is an HCV Medical Specialist, the Treating Physician must confirm that the treatments or medications prescribed or recommended are generally accepted by the medical community for the treatment of HCV or conditions due to the infection with HCV. If the Treating Physician is not an HCV Medical Specialist, the Administrator shall consult an HCV Medical Specialist to determine whether the items are generally accepted by the medical community for the treatment of HCV or conditions due to the infection with HCV.

## **OUT-OF-POCKET EXPENSES**

- 7. The Administrator may accept a completed Compensation for Uninsured Treatment/Medication and Out-of-Pocket Expenses Form accompanied by receipts (for those items which should be the subject of a receipt) as proof of out-of-pocket expenses due to HCV infection or conditions due to the infection with HCV, except where:
  - (a) the total claimed for out-of-pocket expenses on any one application exceeds \$500;
  - (b) the level of expenses claimed is inconsistent with the overall application or disease level (eg: a person who lives in a major centre claiming travel costs to doctors' appointments or a person who is at Level 1 and has a negative PCR test claiming for frequent appointments with doctors) of the Approved HCV Infected Person or Approved Late Claim HCV Infected Person; or
  - (c) for any other reason, the Administrator requires confirmation of the Treating Physician the expenses were incurred due to the HCV infection or conditions due to the infection with HCV.

8. Where one of the exceptions described above applies or where there are items claimed for which the claimant does not have receipts but should have a receipt, the Administrator shall:
  - (a) require the Approved HCV Infected Person or Approved Late Claim HCV Infected Person to supply a form completed by the Treating Physician confirming that the Approved HCV Infected Person or Approved Late Claim HCV Infected Person had to incur the expense in order to seek medical advice or treatment for HCV or conditions due to the infection with HCV; and
  - (b) in the event the item for which reimbursement claimed is such that it is not amenable to confirmation by the Treating Physician, require such additional evidence as the Administrator considers appropriate.
  - (c)
9. For expenses which are covered by the Treasury Board of Canada Secretariat Travel Directive, the amounts stipulated in the Directive shall be the maximum amount reimbursed.
10. The Administrator shall pay a reasonable amount on account of fees to a Treating Physician for Forms completed on account of a claim for compensation. In assessing a reasonable amount for fees, the Administrator shall have regard to the BCMA position on reasonable fees as stipulated in the letter from the BCMA dated June 15, 2000, after indexing to present day dollars.

1545285