NON-INSURED HEALTH BENEFITS (NIHB) MENTAL HEALTH COUNSELING (MHC) BENEFIT PROGRAM ACTIVITY REPORT

DCI Number/Fiscal Year: HC-P042 (2020-2021)

NOTE: This document is a representation of the reporting requirements for DCI HC-P042. It is not a reporting template or a data collection tool. Where applicable, reporting templates, guides and data collection tools that will assist you to complete your reporting requirements will be provided by your Regional Office and are identified in bold lettering or italics throughout this document. Please contact your ISC-FNIHB Regional Office if you have not received a copy of the documents, if you have questions, or require assistance.

Program Reporting Requirements:

The Recipient shall submit to the Minister financial and program activity reports as outlined in the funding agreement and this Reporting Guide. The Non-Insured Health Benefits (NIHB) Program standard requires:

- Interim Financial and Program Activity reports;
- A year end Annual Audited Financial Report; and
- Annu...
claim for the reporting period. This report may be submitted in electronic or paper form.

- a. Client surname and given name;
- b. Client date of birth;
- c. Client identification number (INAC number, band name and family number, or FNIHB Number);
- d. Prior approval number (optional);
- e. Name of service provider;
- f. Number of sessions prior approved, by type (individual, family, group);
- g. Number of sessions provided, by type (individual, family, group);
- h. Hourly rate paid, by type of session (individual, family, group);
- i. Total amount paid per claim; and
- j. Total amount paid for reporting period.

**Where to Send the Reports:**

The reports are to be sent to the Minister’s contact address as listed in the funding agreement or as identified by the ISC-FNIHB region.