

How free is our health care?

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Mental health has been a focus in the media after a year of isolation and an onslaught of horrible news. All of us could use a hug from our friends and people are seeking out mental health services. According to a 2018 survey co-sponsored by the National Council for Behavioral Health, 42 % do not acquire mental health services due to cost and poor insurance coverage. Because of cost, coverage, and the social stigma still associated with mental and substance use disorders, most people with behavioural health issues do not receive treatment (Williams and Pfeffer).

In Ontario, we have limited mental health care to support the diverse needs of the population. It does exist, but usually at a cost. If you have health insurance coverage through your employer, you may only have a portion of the session covered and an annual maximum of \$500. That only covers around 5 appointments, depending on their hourly rate, which leaves everything else paid out of your pocket. Since we can access everything else online, mental health services have followed suit to become more accessible. Websites such as BetterHelp and Talkspace are now online platforms that connect mental health patients with a practitioner that meets their needs. You can go on their website and take a quiz to match you with a specialist that could be a good match for you.

Before scheduling any doctor's appointments, I reviewed the fine print of my workplace health insurance policy to see what would be covered. I learned the policy will only cover an online therapy session if the platform confirms the practitioner's designation was valid in my province and they would only accept a list of specific designations. The website assigned me a practitioner somewhere in the USA and they did not have anyone working in Canada, so any services would be out of my pocket.

When it comes to your health care needs, ensure you are aware of your benefits package:

1. Make sure you read the terms and conditions. Does it have sufficient coverage in the areas of most interest to you? In most cases, traditional benefits packages have a maximum value for each paramedical profession. Yet, when we need psychotherapy or chiropractic care, we need multiple sessions, yet may not need any other professional services that year.
2. Consider a "Health Spending Account", as this type of coverage has more flexibility of how funds are spent. The funding is a total amount and can be allocated more effectively for your personal needs. Note, these accounts are not available for everybody., but check your benefits package. If you are self-employed, you may qualify.
3. Recognize that most health expenses can be claimed on your taxes. You qualify for a tax credit when these healthcare expenses are more than 3% of your taxable income. The cost of the benefits package itself can qualify for a taxable deduction.

When dealing with finance, health care, or insurance, make sure you read the terms and conditions. Some professional services can be written off in Canada when you file your taxes. If you have the right professional advice, it can cost you a few hundred, but it can save you thousands.