

# Written Submission for the Pre-Budget Consultations in Advance of the 2019 Budget

Prepared by: <u>Canadian Counselling and Psychotherapy</u>
<u>Association</u>



**Recommendation 1:** CCPA recommends that the Federal Government re-instate Canadian Certified Counsellors (CCCs) to the list of approved service providers for the Non-Insured Health Benefits (NIHB) program in provinces currently working toward regulation, as per the 2016 Call for Action #9 of the AFN-FNIHB Joint Review of NIHB Steering Committee implementation plan.

**Recommendation 2:** CCPA recommends that the Federal Government include counsellors/psychotherapists/ counselling therapists as an eligible expense in the Public Service Health Care Plan through Treasury Board negotiations with the National Joint Council.

**Recommendation 3:** CCPA recommends that counselling and psychotherapy services be classed as zero-rated for the HST/GST, thus providing Canadians with better access to one of the most cost-effective and appropriate mental health services available.

**Recommendation 4:** CCPA recommends that the Federal Government help improve mental health services and well-being of those living in designated rural, remote, and northern communities and increasing their participation in the workforce, by extending the existing student loan forgiveness programs to counsellors/psychotherapists/counselling therapists through Canada Student Loans.



#### **About CCPA:**

The Canadian Counselling and Psychotherapy Association (CCPA) is a national bilingual association representing the collective voice of over 6,600 professional counsellors and psychotherapists. CCPA promotes the profession and its contribution to the mental health and well-being of Canadians. CCPA acknowledges that federal investments have been made in areas related to mental illness and mental health, but that there are further concrete actions that can be taken to better the lives and productivity of Canadians.

By age 40, about 50% of the population will have or have had a mental illness. Counselling is the most prevalent but least met need of the four mental health care needs identified in the 2012 Canadian Community Health Survey. Counsellors and psychotherapists are in a position to assist in reversing this negative trend.

CCPA believes resolving certain barriers, particularly around mental health, will assist the federal government in its desire to keep Canada competitive. CCPA supports the federal government in its efforts to ensure Canada's competitiveness in the global economy. CCPA believes that the key to any successful business is its workers and by ensuring that employees are happy and healthy, businesses can maximize their productivity and competitiveness.

As a result, CCPA recommends that the following items be added to the 2019 federal budget:

### Recommendation 1 – Universal access to mental health services for Indigenous Peoples

In 2015, Canadian Certified Counsellors (CCCs) were removed from the list of approved providers for Health Canada's First Nations Inuit Health Branch (FNIHB) Program and Indian Residential Schools Resolution Health Support Program (IRS RHSP) in all provinces and territories where the profession of counselling/psychotherapy is not regulated. Only in exceptional circumstances, specifically rural and remote areas and on a very limited basis can CCCs be accepted. This decision has significantly reduced appropriate, universal access to mental health counselling services for Indigenous Peoples across the country.

The implementation plan of the AFN-FNIHB Joint Review of NIHB Steering Committee includes an action (Action #9) specific to this recommendation:

National counselling/therapy practicing bodies, such as the Canadian Certified Counsellors (CCCs), in provinces and territories that have not regulated the profession be immediately reinstated as eligible service providers.

CCPA expresses its support for and offers its assistance with the implementation of this AFN-FNIHB action.

Further, this recommendation could be actioned by accessing the funds listed in Table 3.1 on page 134, chapter 3 of Budget 2018 which proposes 490 million over five years to the NIHB Program (Department of Finance, 2018)<sup>iii</sup>.



Currently, CCCs work with public servants and staff of Members of Parliament who use the Employee and Family Assistance Program (EFAP) provided by Health Canada. Reinstating CCCs as eligible service providers for FNIHB and IRSRHSP in non-regulated provinces will support a more productive and competitive workforce through reduced wait times, increased early intervention thereby reducing the need for specialist care for preventable chronic conditions, and diminish stigmatization through treatment at the primary health care level and non-medical settings. This would benefit Indigenous communities by providing greater access to much-needed mental health services. It would also support and help families and vulnerable individuals by focusing on increasing the availability of mental health services and expanding the number of mental health service providers.

# Recommendation 2 – Ensure a more competitive public workforce by supporting access to mental health services for public service employees

Currently, nearly 50% of all approved claims under the Public Service Health Care Plan (PSHCP) fall under the category of mental health. This means that on any given week, over 500,000 Canadians are missing work due to mental health problems, which contributes to \$6 billion in lost productivity due to absenteeism and presenteeism.

The PSHCP covers up to \$2,000 for a psychologist or social worker (when no psychologist practices in that isolated post), but government workers are reimbursed for 80% of the claims. This means that they are only covered for a maximum of \$1,600, which typically does not allow for fulsome treatment. The cost for a one-hour session with a counsellor or psychotherapist typically ranges from \$80 - \$120. This makes it one of the most cost-effective mental health services available.

It is critical to utilize the most appropriately trained mental health professionals, either as individual practitioners or as members of multi-disciplinary teams. The role of counsellors and psychotherapists is complementary to the work of other service providers. Including this resource in the continuum of care helps address the shortage, growing demand and increasing cost of mental health services.

Further, due to the recently added pressures that many public servants have experienced over the longevity of payment issues, increasing the accessibility and affordability of appropriate mental health services across Canada is vital to the success of our country.

Allowing members of the public service to bill costs related to counselling or psychotherapy would increase the range of options, treatment, and allow for more access to healthcare that all Canadians deserve.

This recommendation could be implemented through the Treasury Board of Canada and the National Joint Council of the Public Service of Canada under the PSHCP Medical Practitioners Benefit.



### Recommendation 3 – Provide Canadians better access to one of the most cost-effective mental health services available

Not all mental health services are exempt from the HST/GST. The variation depends on the provider of the service as to whether the service is exempt, not the nature of the service itself. GST/HST across the provinces and territories varies from 5% to 15%, which is a significant additional cost that hurts accessibility for those Canadians seeking care by qualified providers such as mental health counsellors and psychotherapists.

At present, physicians, psychiatrists, registered nurses, registered psychiatric nurses, psychologists, occupational therapists and social workers are either covered under public funds or third-party health care plans, both of which are exempt from HST. The clients of counsellors and psychotherapists are disadvantaged by the addition of HST/GST to the service delivery costs.

In the interest of universal accessibility and fairness, the services of counsellors and psychotherapists should also be tax exempt or preferably, zero-rated.

By reducing the out-of-pocket costs paid by Canadians for counselling, we reduce one of the many barriers to accessing mental health services. The tax that is being applied to these mental health services when they are delivered by counsellors and psychotherapists may cause Canadians to reduce the frequency with which they seek these services. The effect will be that those needing mental health services who cannot afford increased costs due to the additional burden of the HST/GST will either languish without treatment, remain on lengthy waiting lists as their mental health potentially deteriorates, seek help from within the publicly funded healthcare system which is under tremendous cost pressure, or will not seek the help at all.

This recommendation could be implemented through amending the Excise Tax Act provision that requires a profession to be regulated in five provinces before allowing it to qualify for zero-rated HST/GST.

## Recommendation 4 – Mental health service parity for rural areas, remote and northern regions of Canada

Rural, remote and northern communities in Canada lack adequate mental health resources compared to urban centres in Canada. The Federal Government has taken steps to attract and retain other health professionals in communities outside of urban centres, but it has not extended similar programs to university graduates of counselling programs. Doctors, nurse practitioners, and nurses have a portion of their Canada Student Loans forgiven by the government as an incentive to practice in underserved communities.

CCPA recommends the expansion of the loan forgiveness programs to recent graduates of counselling and psychotherapy programs. The federal government could also consider grants, scholarships and bursaries in exchange for a 3- or 4-year return-of-service commitment, wage incentives or a guaranteed minimum income, and/or tax credits for practicing in remote areas. These incentives would encourage counsellors to move to locations where their skills and services are needed most. Student loan forgiveness programs and tax subsidies are good economic incentives that should be extended mental health care providers,



including counsellors and psychotherapists in order to provide appropriate levels of care to rural, remote and northern areas.

This recommendation could be actioned by amending the Canada Student Loans Act, section 11.1 Family Physicians, Nurses and Nurse Practitioners in under-Served Rural or Remote Communities to include Counsellors and Psychotherapists. vi

### References

<sup>&</sup>lt;sup>1</sup> Mental Health Commission of Canada (2013). "Making the Case for Investing in Mental Health in Canada". Page 9. Ottawa.

<sup>&</sup>quot;Sunderland, A. & Findlay, L.C. (Sept. 2013). Perceived need for mental health care in Canada: Results from the 2012 Canadian Community Health Survey – Mental Health. *Health Reports*, 24:9, 3-9.

Department of Finance (2018). Budget 2018, Table 3.1. "Indigenous Health Investments". Ottawa: Government of Canada.

National Joint Council (2016). *Disability Insurance Plan Board of Management - Annual Report — 2016,* National Joint Council. January 1 to December 31, 2016 "Distribution of Causes of Disability for Approval Year 2016"

<sup>&</sup>lt;sup>v</sup> Public Service Health Care Plan (2015) *Medical Practitioners Benefit* <a href="http://www.pshcp.ca/coverage/maximum-eligible-expenses.aspx">http://www.pshcp.ca/coverage/maximum-eligible-expenses.aspx</a>

vi Department of Justice (2018). *Canadian Student Loans Act, 11.1* - <u>Family Physicians, Nurses and Nurse</u> <u>Practitioners in Under-Served Rural or Remote Communities</u>.(R.S.C., 1985, c. S-23)