

# Canada Health Act Interpretation Letter (2025): Key Takeaways & Actions for Nurse Practitioners



Nurse Practitioner Association of Canada

Association des infirmières et infirmiers praticiens du Canada

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## POLICY PROTECTS - NOT EXPANDS - THE "CORE BASKET"

This policy does not add new insured services; it ensures existing insured services remain publicly covered, regardless of who provides them, including Nurse Practitioners (NP).

## NP SERVICES RECOGNIZED AS "PHYSICIAN-EQUIVALENT" SERVICES

NPs are explicitly recognized as providing services comparable to those traditionally insured when delivered by physicians, including diagnosing, treating, prescribing and referring.

## What You Need To Know

- In January 2025, Honorable Mark Holland, former Federal Minister of Health, released an interpretation letter clarifying the application of the *Canada Health Act*.
- It confirms:
  - Medically necessary services must be publicly insured, whether provided by a physician or other healthcare provider such as an NP.
  - Patients should not pay out-of-pocket for insured NP-delivered care.
- Provinces and territories (PTs) have until April 2027 to demonstrate compliance.
- Enforcement will occur through federal health transfer payments (potential funding reductions for non-compliance).

## What This Does NOT Mean

- ✗ **No** automatic fee-for-service (FFS) billing for NPs
- ✗ **No** mandated national NP payment model
- ✗ **No** requirement for dedicated NP funding lines in PT budgets\*

\* PT governments will decide how NPs are funded (e.g., salary, blended, alternative models).


## What This Does Make Possible

- ✓ A major advocacy opportunity to shape NP funding across Canada
- ✓ Requirement for PTs to demonstrate NP services are publicly funded
- ✓ Flexibility to influence how funding models are designed

## Why It Matters

- ★ Signals federal recognition of NPs as essential, autonomous providers
- ★ Creates a time-limited window (now 2027) to influence system design
- ★ Funding decisions made now will shape NP roles for years to come

## What NPs Need to Do

-  **Get Informed**  
Understand what the policy does and does not mean
-  **Get Connected**  
Engage with your provincial/territorial NP association
-  **Get Involved**  
Participate in consultations and discussions
-  **Advocate**  
Speak up for models that reflect complex care and full NP scope
-  **Stay Engaged**  
Monitor how your province/territory is responding & help shape policy before decisions are finalized

## NPAC Advocacy Priorities

- 1** Flexible funding models across **primary care, acute care, specialty care, and community settings**
- 2** **Fair, competitive remuneration** reflecting NP expertise
- 3** Support for **complex & vulnerable patients** (not volume-driven models)
- 4** Recognition of **full-scope NP practice** across the care continuum
- 5** **Sustainable workforce models** to support recruitment and retention

## In Summary

**The interpretation letter is a major policy milestone. It does not introduce FFS billing. It does create a critical opportunity.**