

About the Program

Métis Nation of Ontario Announces New Virtual Health Care Program

The Métis Nation of Ontario (MNO) is now in the second year of its Virtual Health Care Program made possible through dedicated funding support. Managed by the Healing and Wellness Branch, this project is designed to provide Métis Citizens (verified) with easy access to supplemental health care while alleviating wait-times for medical consultations.

Program Details

- **Application Process:** Applications can be submitted by each Citizen in need of health consultation services. Approved Citizens will receive a link allowing them to connect with a Physician Assistant.
- **Scheduling:** Appointment date and times will be at the coordination of the Citizen and Physician Assistant's schedules, booking through a third-party administrative service.
- **Follow ups:** Any recommended treatments and/or follow up appointments are at the discretion of the Physician Assistant and Citizen.

This program aims to provide a simplified process to accessing medical health services, ensuring that MNO Citizens can receive the care they need.

Accessing the Service

- Fully complete and submit one application for each Citizen
- Expected timeline: Please allow a minimum of 3 business days for application processing
- Citizen must have access to an Internet connection and connected device (i.e. cellphone, tablet, laptop) to be able to attend appointment
- Desktop devices must use Google Chrome or Firefox browsers - Mobile requires Android, Safari or iOS

General Consultation Supports

- Non-emergency medical inquiries
- ePrescription Renewals
- Treatment for minor illness and infections
- Mental Health referrals
- Referrals for specialists or labs
- Any inquiries that would normally be brought to a family doctor or General Practitioner

This program will NOT:

- Provide access to controlled medications such as narcotics
- Assist with any work release or medical forms including WSIB, disability, or long-term absence. This includes past illnesses or anything longer than one week of absence.

APPLICATION

Virtual Health Care Program

Region Map



APPLICATION

Virtual Health Care Program

SECTION 1 - CITIZEN APPLICANT INFORMATION:

CITIZEN APPLICANT:

First Name:		Last Name:	
Home Telephone (including area code):		Work/Cell Telephone (including area code):	
Gender: <input type="checkbox"/> Man <input type="checkbox"/> Woman <input type="checkbox"/> Two-Spirit <input type="checkbox"/> Prefer to self-describe: _____ <input type="checkbox"/> Prefer not to say	Email Address: _____		Date of Birth: ____ / ____ / ____ MM DD YYYY
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Common Law <input type="checkbox"/> Divorced	Métis Citizenship number _____		Region Number City/Town _____ _____

Parent/Guardian Information for applicants under the age of 16 (IF APPLICABLE):

First Name:		Last Name:	
Home Telephone (including area code):		Work/Cell Telephone (including area code):	
Gender: <input type="checkbox"/> Man <input type="checkbox"/> Woman <input type="checkbox"/> Two - Spirit <input type="checkbox"/> Prefer to self-describe: _____ <input type="checkbox"/> Prefer not to say	Email Address: _____		Date of Birth: ____ / ____ / ____ MM DD YYYY

