Reasons for Decision:

Order # AP2021-0004

On <date removed>, <name removed> filed an appeal of the decision of the Director, River East/Transcona to deny their coverage for a high protein diet allowance. The decision letter was dated <date removed>.

The denial letter stated <name removed> was not eligible for the diet allowance because the diet request form submitted by their doctor did not include a justification for the request.

<name removed> told the Board they have been trying to get approval for the diet for a number of years. The appellant received the diet allowance in <year removed> and <year removed>, but was denied the allowance in <year removed> and subsequent years. The appellant noted that she changed doctors in <year removed>, and wondered if their new doctor failed to complete the request form correctly.

<name removed> asserted that they requires a high protein diet for their weight and a <condition removed>. The appellant told the Board they wanted to know why their request was denied.

At the hearing, the Department relied extensively on the written report submitted as evidence. The Department stated <name removed>'s request was denied because their doctor did not provide a justification for the request, or explain why they needed more protein. Specifically, the Department requires two reference points for weight to determine if an applicant is losing weight. The Department asserted that <name removed>'s weight was relatively stable, to the best of its knowledge.

The Department noted <name removed> was receiving the controlled sodium diet allowance. The Department's policy is to fund only one diet at a time.

The Department told the Board that it would reconsider <name removed>'s request if their doctor provided evidence of weight loss or energy loss.

After reviewing the evidence presented to it, the Board determines that <name removed>'s therapeutic diet request form contained insufficient information to support their request. The Board determines the Department has assessed <name removed>'s dietary needs according to the legislation and regulations, and confirms the Director's decision to deny the high protein diet allowance.

DISCLAIMER

These are electronic copies of the Reasons for Decision issued by the Social Services Appeal Board. These written reasons have been edited to protect the personal information of individuals be removing personal identifiers.

AP#2021-0004 Page 1 of 1