

Supplementary
Health
Benefits -
What we heard

Prescriptions
Quality
Supplementary
LMN
Residents
Care
Insurance
Benefits
Health
Medical

TABLED DOCUMENT NO. 38-16 (5) Tabled on MAY 13 2010

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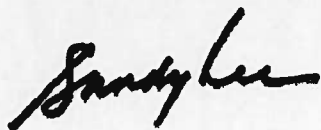
Minister's Message

In Canada, we share the belief that our health care system, our Hospitals and health care centres, should be universally accessible. This is described and protected by the *Canada Health Act*. This system provides care when it is needed, but it also places responsibility on Canadians to pay for some 'uninsured' services such as prescription drugs and dental care.

I recognize that there is nothing more important to us than our health, and the health of our family and community. When we started the conversation on Supplementary Health Benefits, we knew that the topic of how to pay for uninsured services was a very sensitive one.

This document tries to lay out simply the main points that we heard in our discussions, and the process we went through. We have not included the full transcripts of our conversations, because they often were deeply personal or heated – but we haven't avoided sensitive topics we heard about, either.

I hope that this discussion proves fruitful, and that Northerners will feel that they had meaningful input into whatever final decisions are made.

A handwritten signature in black ink, appearing to read "Sandy Lee". The signature is fluid and cursive, with a long horizontal stroke at the end.

Sandy Lee
Minister of Health and Social Services
May 4, 2010

The Conversation Process

In the fall of 2009, an Advisory committee that included representatives of NGOs with interest in supplementary health benefits, including NWT and local senior's societies, the NWT Council of Persons with Disabilities, the YWCA and Centre for Northern Families, and Association for Community Living. This group heard about how the program is currently administered, and were provided with advanced copies of the material that was released for discussion.

In March of 2010, a public conversation paper was released on the Health and Social Services website at www.hlthss.gov.nt.ca. This paper included an optional questionnaire, and also provided a toll-free number and email address for other questions and responses.

Between March and April, Town Hall Meetings were held in the communities where the vast majority of those who access the programs reside. The schedule was advertised in local papers, radio, cable TV and in posters, and was provided to Advisory committee representatives.

Schedule of Town Hall Meetings

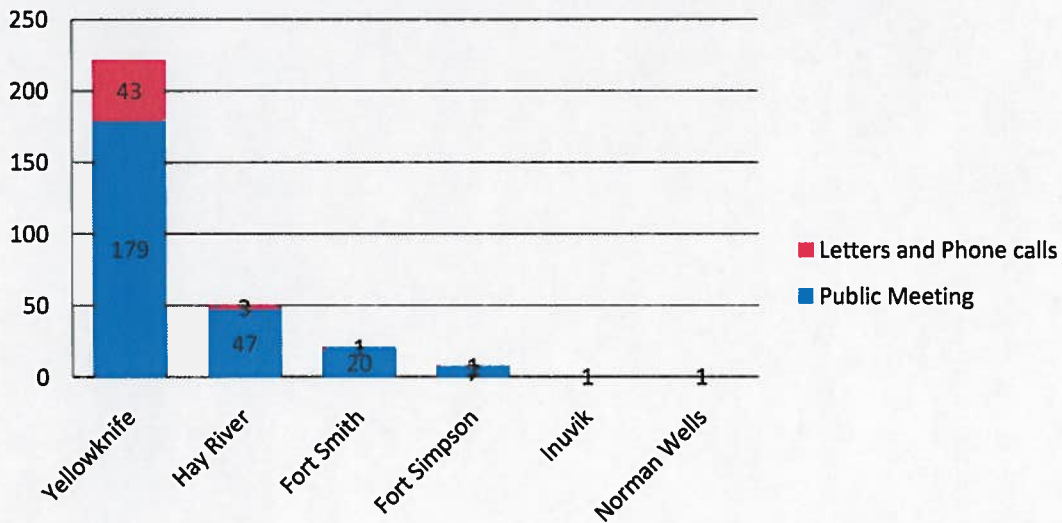
Community	Location	Dates
Fort Simpson	Community Hall, Recreation Centre	Tuesday, March 23, 2010 7-9PM
Hay River	Ptarmigan Inn	Thursday, March 25, 2010 7-9PM
Inuvik	Permafrost Room, Mackenzie Hotel	Monday, March 29, 2010 7-9PM
Norman Wells	Royal Canadian Legion	Tuesday, March 30, 2010 7-9PM
Fort Smith	Northern Life Museum	Thursday, April 1 2010 7-9 PM

Yellowknife	Northern United Place	Wednesday, April 7, 2010 6-10 PM
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Letters were also provided to NGOs and professional organizations inviting their participation and offering presentations.

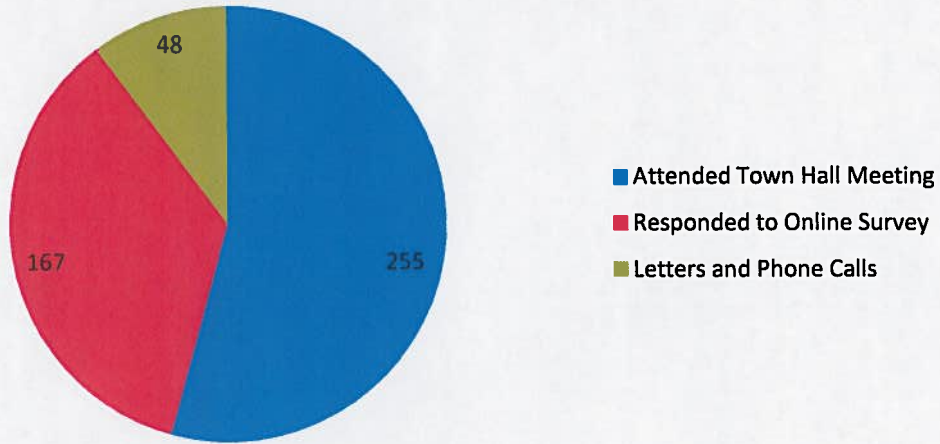
Response to the various outlets for communication was varied by community:

Public Responses by Community



Note: The public survey did not include a question around location, so these are not included.

Type of Public Response



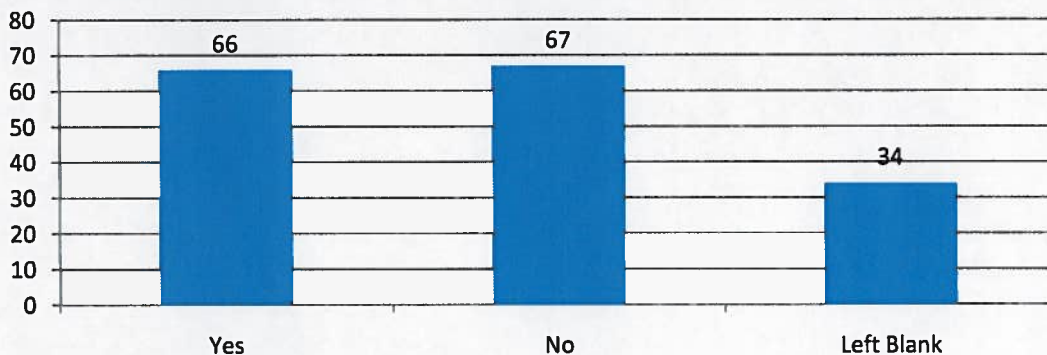
1. Survey Results

From February 25th until April 15th, 167 people responded to the publicly posted online survey, either online or by delivering hard copies to our offices or through their local Seniors Societies.

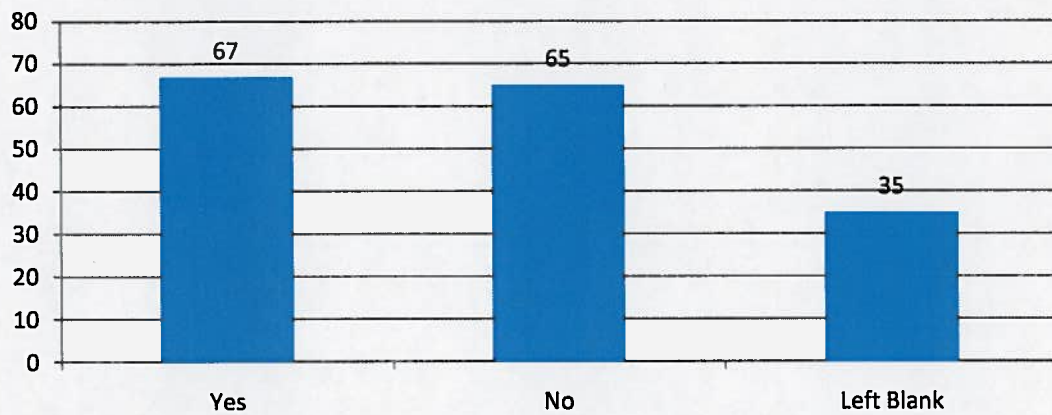
Here are the summary results:

- 1. In other provinces and territories in Canada that offer pharmacare and other supplementary health benefit programs, a co-payment –A partial payment towards the cost of the service, is required. In other jurisdictions, a portion of the benefits are funded through a premium.**

Do you support a portion of payment being made by residents to ensure all Northerners have access to comparable uninsured services?

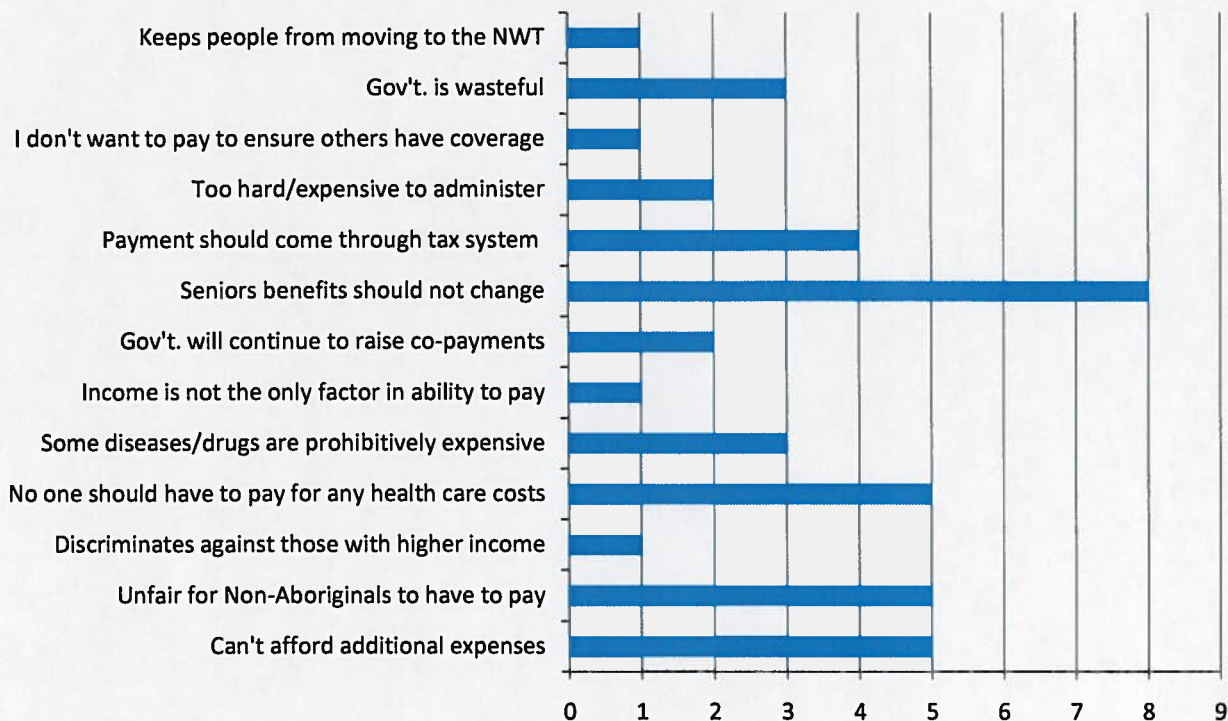


2. Would assistance with co-payment costs based on income make a difference to your preference?

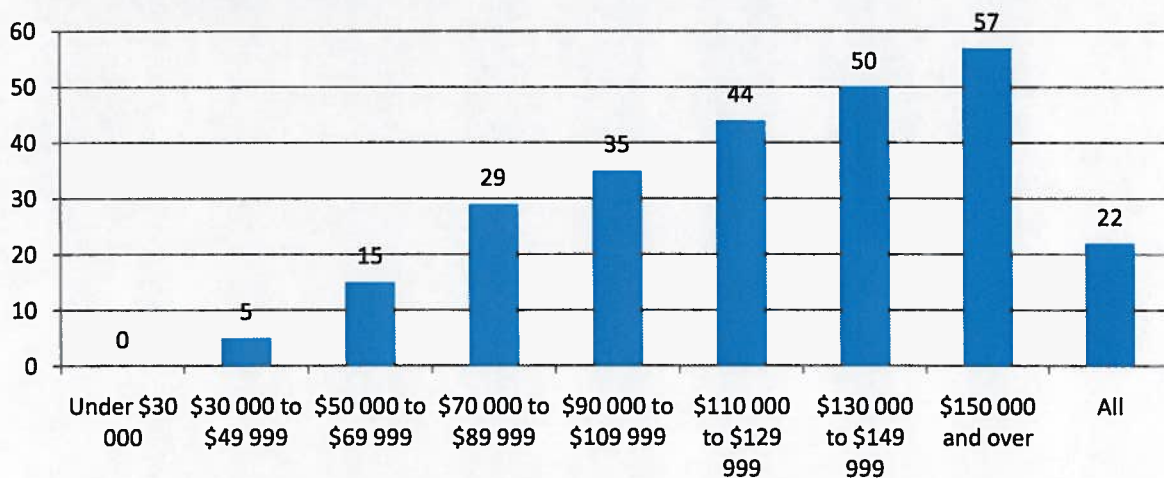


If no, why not? What are your concerns?

Main concerns around co-payments



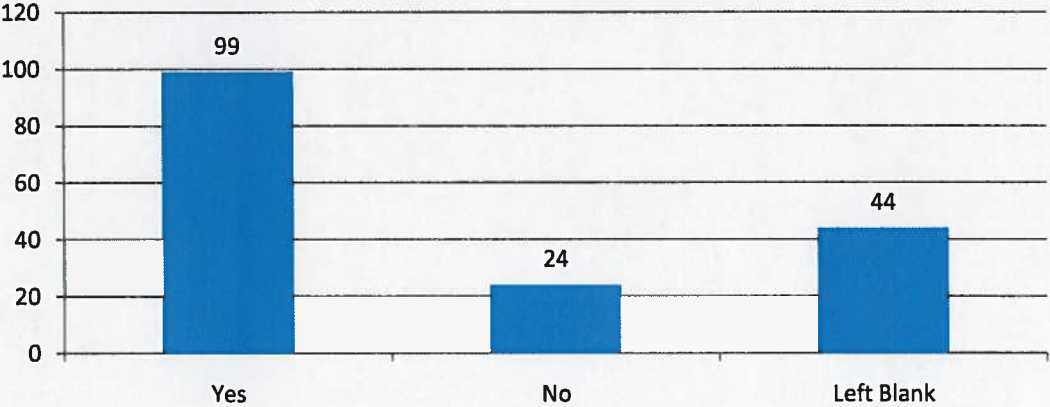
Which Income Brackets do you think should pay a co-payment?



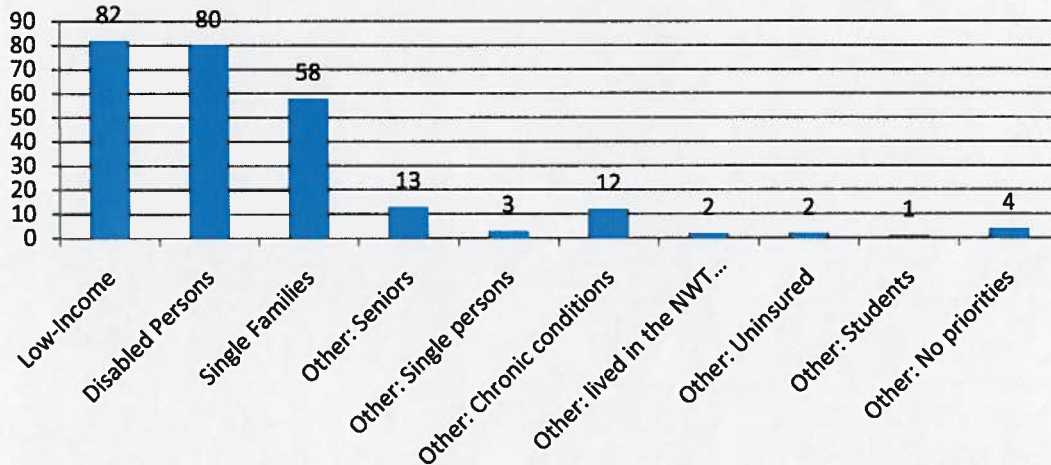
Note: multiple selections were allowed

3. Knowing what we know now about costs and needs of the various existing Uninsured Health Benefits programs, the Department of Health and Social Services is considering rolling the three programs the document Supplementary Health Benefits - A Conversation with Northerners has discussed into a single program that is available to all Northerners not eligible for another program (such as NIHB or Employer insurance). Eligibility would be determined by your income, instead of age or health conditions.

Is comparability between programs for NWT residents in terms of eligibility and benefits important to you?

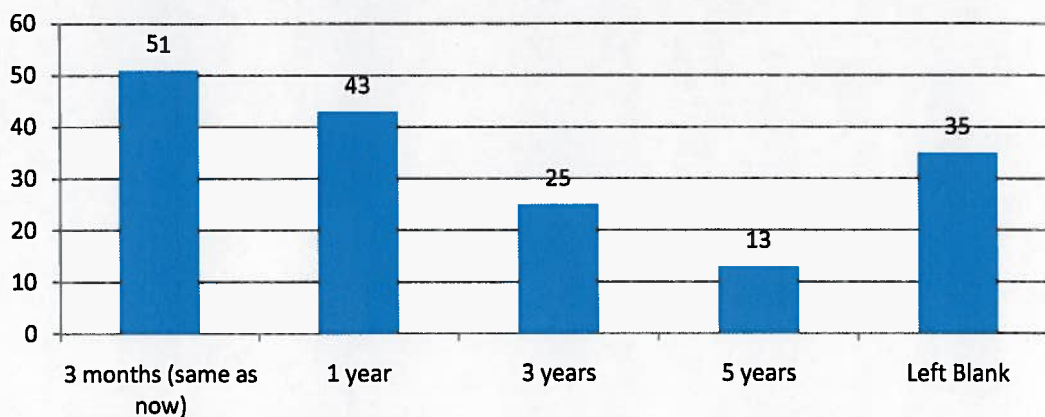


4. Are there certain groups you believe the program should make a priority?

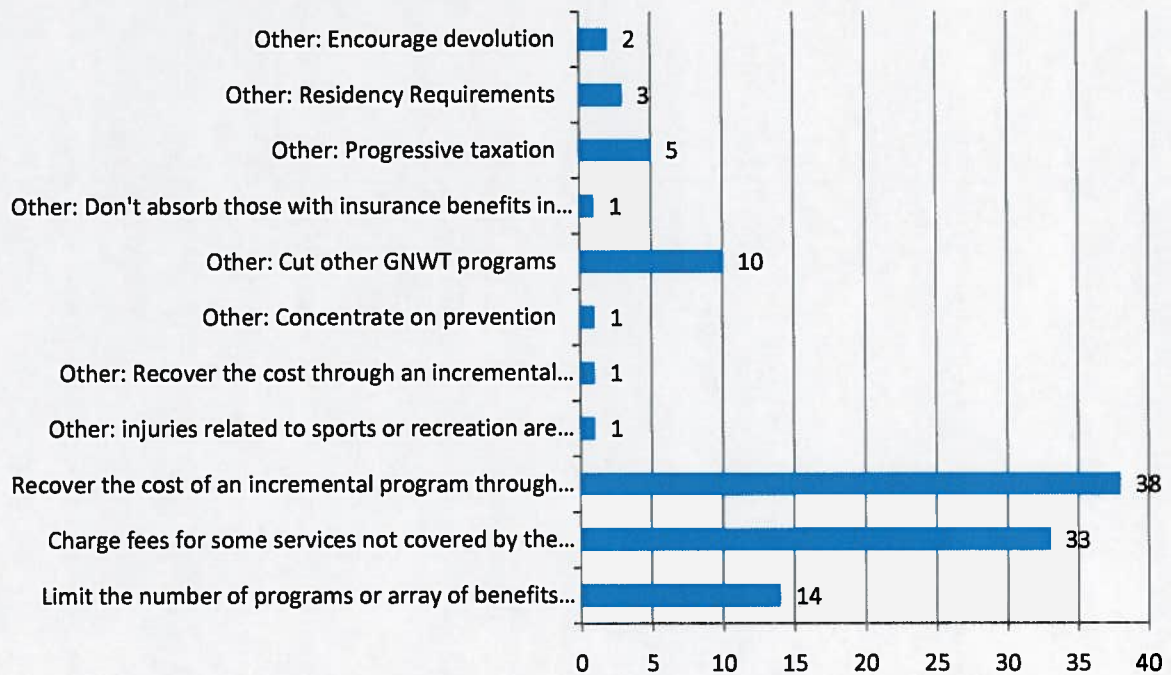


5. Because not all provinces and territories offer the same benefits, there is a concern that some people with rare and expensive illnesses move to the NWT to take advantage of our Supplementary Health Benefits.

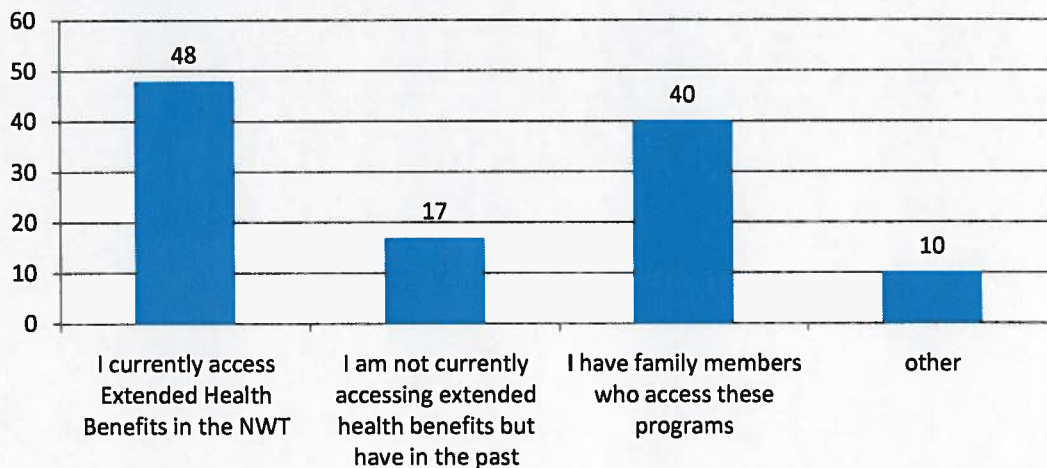
What kind of residency requirement would be fair for Supplementary Health Benefits in the NWT?



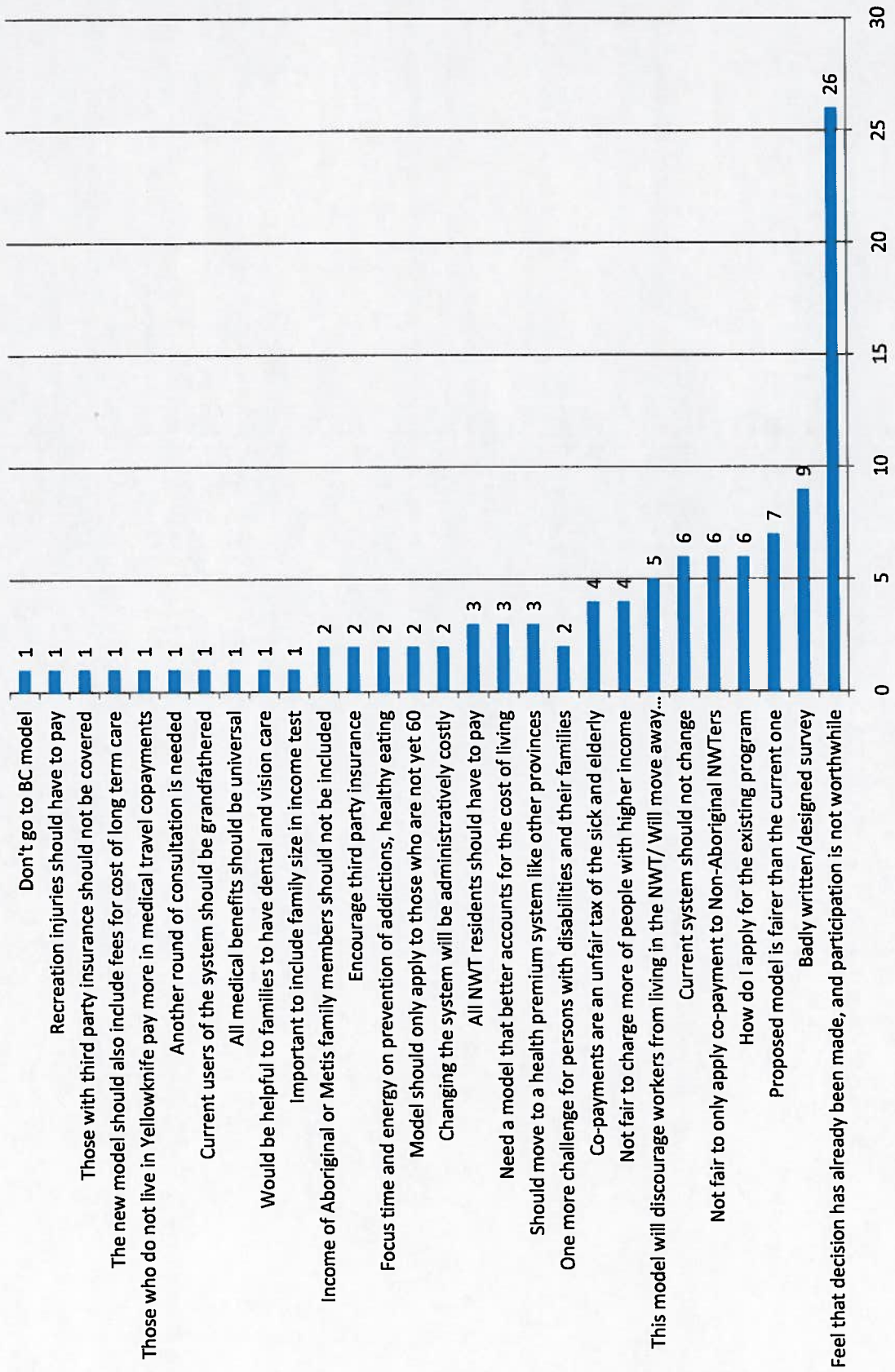
6. With rising health care costs, what do you think the Government of the Northwest Territories should do to increase the sustainability of our system?



7. Will you share what your background is related to this program?



8. Other Comments (compiled from survey, public meetings and other correspondence)



2. Public Meetings

Fort Simpson

March 23, 2010

7-9 PM Recreation Centre (7 general public attendees)

- General concerns raised about adequacy of notice before meeting, advertising
- NWT Seniors' Society president advised that had been trying to encourage interest in the meeting without success
- Some general support for income testing, if at least 70% of those who access were fully covered
- President of NWT Seniors' Association expressed concern around respect for seniors and management of change
- Issue of bridge and other government costs was raised, and greatest concern amongst participants was around GNWT's ability to implement the income threshold properly and fairly
- Questions around access to dentist locally
- Questions around support for cancer treatment

Hay River

March 25, 2010

7-9 PM Ptarmigan Inn (47 general public attendees)

Summary of Questions and Concerns

- In addition to expressing individual concerns, a petition has been circulated that will be presented to the Minister
- Individual issues raised included:
 - Concern about the legality of using an Aboriginal spouse's income as part of income test
 - How Non-Indigenous Metis are included in the program
 - The fairness of different programs for different racial groups
 - Cost of living in the NWT
 - It was suggested that a means test might be fairer
 - It was suggested that in the income threshold test it would be more appropriate to set the couple's income at twice that of the single income
 - There also were participants who were single and did not think singles were treated fairly in the income threshold example
- The Hay River Senior's Society formally opposes an income-tested program

Inuvik

March 29, 2010

7-9 PM Mackenzie Hotel (1 general public attendee)
Summary of Questions and Concerns

- Interest in how the program is currently delivered
- Interest in ensuring that maximum funds in Health and Social Services go into prevention, and helping people stay well

Norman Wells

March 30, 2010

7-9 PM Royal Canadian Legion (1 general public attendee)

Summary of Questions and Concerns

- Will everyone who accesses the programs now still be eligible?
- Why aren't temporary workers to the NWT included in the NT Health Care Plan for insured services?
- How many seniors have moved but are still claiming?
- What are specified conditions?
- The system shouldn't be age related. You could have someone just out of University also, you could have someone young, disabled and with high costs of living
- Nobody knows they can access this program for the additional 20% top up.
- How are co-payments going to work for non-pharmaceutical claims?
- My concerns are that a lot of people don't already get funded equally – if you are not a GNWT employee, you have to pay a \$250 co-payment for medical travel – not fair to those out

Fort Smith

April 1, 2010

7-9 PM Northern Life Museum

Summary of Questions and Concerns

- What conditions are listed on the formulary, who updates the formulary
- What happens if you don't have 3rd party insurance, can you buy 3rd party insurance
- What about indigenous aboriginals that don't receive NIHB or Metis benefits
- What is the reason for the 6% growth rate on expenses (slide 4)
- How do we inform new doctors or locums what is on the list for coverage
- What is the plan for expensive drugs like HIV

- What would it cost to bring the current low income earners into the program
- What are the residency requirements for other jurisdictions
- Can you explain how the appeals cmtt will work
- Will the department need new jobs to administer the program
- We should means test the catastrophic drug program
- Maybe you could implement a gradual increase of 1% every year
- People should have to live here for a certain amount of time before the receive coverage
- What about the claimants outside the NWT that claim they live here?
Are we auditing

Yellowknife

April 7, 2010

6-10 PM Northern United Place

Summary of Questions and Concerns

- Are Specified conditions counted twice?
- What do we know about those people without third party coverage?
- Do the income of working children count?
- How do you track income increases?
- The Minister called the meeting, is she to hear what we have to say?
- What about households with working children that do not contribute to the income of the household
- With specified diseases, coverage will not be enough, will be better to move South
- What is the percentage to pay be based on for top up?
- Can't base this program on income, it needs to be about quality of life for children and adults with disabilities or diseases
- why should my family have to do without because I make so much money, live within your means? If you are making \$30 000 you are already on social assistance
- GNWT quick to grab a bridge for \$145 million
- believe in fair and equal access to a program, whether Aboriginal, non Aboriginal, \$190 000 or whatever – federal government owes the NWT in the neighbourhood of \$70 million – wants people to dip into pockets for what they owe. Should not be subsidizing the federal government in covering these costs
- Sandy Lee is the Minister responsible for Seniors, Disabilities, and HSS – shouldn't there be a Minister that is speaking
- I'm a senior, but we want to see equitable access to system, there are people without, there are families that are going without – but the

system that we're proposing is not workable – is the intent to fracture – how do you make this affordable – government just doesn't want to disrail the process

- on page 5 of the paper, under the graph, number of people accessing increased and then peaked in 2007 for specified conditions decreasing purpose of seniors programs was to foster unity and keep Seniors in the NWT
- At the rate of increase, the transfer payments would increase – annual costs, show reduction over time – second graph shows that vast majority of claimants have less than \$1000 – get presentation? Programs do not look unsustainable
- Where should the Dept of HSS be looking for funds for those who do not have coverage – Nunavut has not paid invoices
- Medical travel – imaginative ways to pay for this without costing
- Fees for paying locum nurses – ask to reduce commission rates or recruit nurses themselves
- Don't allow preventative programs such as the sleep apnea program to lapse or not make them available
- Find those people who don't live here but access the benefits
- interested in using a tax system, ultimately does spread the cost between those who access the program – was that examined?
- Would rather be taxed
- low income parent with two children – both covered and not covered, pay dental out of pocket low income, pay because it is my responsibility
- IF Gov wants to be sustainable, should tax population properly
- need to look at the history of the program, and why it was developed, to support seniors and keep them in the NWT
- responsibility, I can say, although I don't like paying dental, I think the reasonable fair way to address this is through progressive income tax, the highest tax that the Government of Canada considers is \$120 000
- need to be able to adjust to changes in income, suddenly living in poverty, won't be able to afford co-payments based on previous tax year
- Wouldn't be able to afford this change
- similar benefit regimes in other jurisdictions, insurance premium or other payment
- proud member of YK senior's society – how many Cabinet ministers are in attendance today?
- since when in Canada in health care considered an income tested health benefit - my next vote will hinge around the answer to that question – willing to pay increased taxes so we can all live in health and dignity
- income would have to be indexed

- don't really care what they do in the rest of Canada
- Need to consider the Nunavut debts to Stanton
- What was the program budgeted for 2010 last week>
- Pharmacists feel were not consulted and will bear brunt of implementation
- don't want to have to choose between the seniors and the low-income earners, need all to have access
- while the system proposed is comparable to the rest of Canada, wouldn't be able to afford a co-payment of \$350/month that estimates this would require with his income and the cost of living
- Need to consider tax system, can't have children going without, not being considered properly
- Issues with only paying if Non-Aboriginal when Metis don't have to pay
- Concern that people will abuse the Hospital system instead of paying
- If open and honest consultation, September 1 is not a reasonable deadline
- Would like the system to be easier for the user – be able to go to an office and see someone for help, and also have access to the program loaded and included on HC Card
- Appears not even looking at other options or models
- How can you take anything that has been said and make any kind of decision by September?
- Alberta Blue Cross system probably costly
- Not the same definition of sustainability, need to consider positive projection o NWT budget
- Need to work on prevention, or allow those people that do not burden the system to be rebated
- income tax option a better way to go – also need to make sure there is catastrophic coverage
- There has not been enough consultation or time spent on this, need to delay and consult more
- Will be protesting at the Legislative Assembly if this continues to move forward
- Unfortunate that this is not legislated, not enough time to discuss properly
- Copayments too complicated to administer
- Need to keep the system truly universal, no premium system
- Children should not have their parent's income considered
- privacy questions – where did the financial data come from– who has access
- thank you for everyone's decorum and behaviour

3. Non-Government Organization Presentations/Papers

- Dave Wind on Behalf of the Yellowknife Seniors'
- Arlene Hache on Behalf of the Centre for Northern Families
- Alternatives North paper

4. Other Letters/Emails/Phone

- 9 calls interested in registering or finding more information on existing SHB or NWT Health Care, redirected to Inuvik Health Services
- 48 letters
 - NWT Seniors' Association
 - Yellowknife Seniors' Association
 - Hay River Seniors' Association
 - 21 'form' letter emails with cut and paste content
 - Remaining letters were from 12 different households



Ktspin ki nitawih̄tin ā nīhiyawih̄k ōma ācimōwin, tipwēsīnēn.

Cree

ᑲerih̄tī'is dēne sūliné yati t'a huts'elkēr xa beyéyati theᑲᑲ'at'e, nuwe ts'ēn yóti.

Chipewyan

If you would like this information in another official language, call us.

English

Si vous voulez ces renseignements en français, contactez-nous.

Français

Jii gwandak izhii ginjik vat'atr'ijāch'uu zh̄it yinoth̄an j̄i', diits'at̄ ginohkn̄ii.

Gwich'in

Hapkua titiqqat pijumagupkit Inuinnaqtun, uvaptinnut hivajarlutit.

Inuinnaqtun

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Inuktitut

UVANITTUAQ ILITCHURISUKUPKU INUVIALUKTUN, QUQUAQLUTA.

Inuvialuktun

K'ēhshó got'ine xəd́s k'ē hederi ᑲed̄ht̄l'ē yeriniwē nídé dúle.

North Slavey

Edi gondi dehgéh got'ie zhatié k'ēᑲᑲ edat̄'ēh enahddhē nide.

South Slavey

T̄h̄ch̄o yati k'ēᑲᑲ dē wegod̄n̄i wek'ēhoiz̄o nēᑲw̄o dē, gots'ō goahde.

T̄h̄ch̄o

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