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Minister of Health

Ministaat Aanniagtailinirmut

Ministre de la Santé

June 15, 2022

Honourable Marc Garneau P.C., C.C., C.D., M.P.
Chair, Standing Committee on Indigenous and Northern Affairs
House of Commons
Ottawa, ON
K1A 0A6

Dear Mr. Garneau,

Thank you for the opportunity to address the panel for Administration and Accessibility of Indigenous Peoples to the Non-Insured Health Benefits (NIHB) Program. During the witnesses' testimony, additional questions arose regarding Nunavut's demographics, our medical escort program and funding arrangement. I have provided additional information below in response to those questions.

Demographics

There are roughly 32,680 Nunavut Inuit living across the territory who are eligible for coverage under the NIHB program (roughly 84% of the total population). Currently, there are 1,780 Inuit employed by the Government of Nunavut (GN), who receive medical and other coverage under the GN's medical travel and insurance plan. These demographics illustrate how vital the NIHB program is in ensuring all Nunavut Inuit have access to health care.

Medical Travel and Client Escorts

Certain medical travel clients are eligible to have an escort. The Department of Health (Health) works closely with clients to ensure they are aware of the requirements for escorts to be approved. Typically, Nunavummiut only qualify for a client escort if they have medical needs (such as mobility or mental health issues) that prevent them from safely travelling alone to receive care. Nunavummiut who require language support also qualify for an escort. At times, if a request for a client escort is initiated by a client (and not a physician), there can be challenges if the client is unable to provide documentation authenticating their need.

Second escorts are approved by Health in circumstances where there is a clinical need. For example, children with severe medical and/or behavioural conditions who must travel for care are eligible for two escorts. Second escorts are not covered by NIHB. In certain circumstances, funding is available under the Children's First Initiative, should families wish to escort children who require care out-of-territory.

Escort switches are also available after four weeks to provide support and mitigate caregiver burnout. A request to switch earlier than the four-week mark can also be made.

There have been discussions about a paid escort program in Nunavut, whereby professional escorts could be hired to support Nunavummiut travelling from Nunavut to other jurisdictions. Such a program has merit and potential for incident avoidance and cost savings to the GN, especially if managed in coordination with services our five existing medical boarding homes already provide. Despite these potential benefits, medical appointments and procedures are often personal and private for our clients. Even with a paid escort program, clients may continue to request that a family member or friend accompany them to provide support. This may be particularly important for Nunavut Inuit who are unilingual and Elders, who could benefit from having the additional language and cultural supports a family member or friend could provide.

Funding Arrangement

Currently, the NIHB funding arrangement with the Government of Canada is a one-year set funding agreement, with rigid terms and conditions and no carry forwards.

The panel asked if the GN has the expertise to manage a block funding agreement for the NIHB funding allocations as an alternative model. Block funding would essentially transfer additional administrative responsibility of the NIHB program to the GN, which is a federal responsibility.

The GN's funding preference is a flexible funding agreement that would include specific outcomes and some measure of flexibility. Currently, the NIHB program is not sufficient for the need in Nunavut. Funding for the administration of the NIHB program in Nunavut is currently capped at \$3.7 million or 5% of the current funding amount of \$73.2 million. Internal cost estimates indicate administration funding should increase by 10% to meet the administrative funding needs of the program.

Should you have any further questions or require additional clarification, do not hesitate to contact me.

Matna,

Hon. John Main Minister of Health

cc. Honourable Lori Idlout, M.P. for Nunavut