

**KEVIN O'REILLY—MLA FRAME LAKE**  
**Health Benefits Programs**  
**Committee of the Whole—2018-2019 Operating Budget Review**  
**Dept. of Health and Social Services—March 1, 2018**

**MR. O'REILLY:** Thanks, Mr. Chair. I don't want to jump ahead to page 198, but that is where the non-insured health benefits are found, the funding that we get from the federal government for that. It is in the neighbourhood of \$14,473,000. How is that amount reconciled against the amounts that are expended here on page 193 which show extended health benefits, indigent health benefits, medical travel, Metis health benefits? That money that we get from the federal government, how is it expended within these areas? Thanks, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Minister.

**HON. GLEN ABERNETHY:** Mr. Chair, they don't. Really, the only link between the sub-health benefits, extended health benefits, indigent health benefits, Metis health benefits, and NIHB, is that we mirror the program. Our programs mirror NIHB. NIHB, we administer on behalf of the federal government. It is a federal government program. We administer it on their behalf for our First Nations residents. Extended health benefits, indigent health benefits, Metis health benefits mirror that, but it is a program that we fund as the Government of the Northwest Territories.

The only way in which the NIHB really affects the section we are talking about now is it does help offset some of our medical travel costs, because First Nations and Inuit residents who are travelling, obviously, some of their medical travel costs are covered by NIHB. That is kind of the only offset in this area. Thank you, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Mr. O'Reilly.

**MR. O'REILLY:** Thanks, Mr. Chair. I am not sure I understood all of that. Maybe I will just switch tack for a moment, and then I might come back to that. Metis health benefits line here, there was a Supreme Court of Canada ruling that Metis people are now to be considered Indigenous people under the Constitution and entitled to the same rights as other Indigenous peoples. Has there been any progress on discussion of Metis health benefits funding from the federal government? Thanks, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Minister.

**HON. GLEN ABERNETHY:** Thank you, Mr. Chair. No. Every opportunity I have or every time I meet with the federal Ministers, I mention it. I indicate our desire to have them come to the table and cover the Metis health benefits. There has been no official response to date. I will continue to raise it every opportunity I get when I am in Ottawa or when I meeting with federal Ministers. Thank you, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Mr. O'Reilly.

**MR. O'REILLY:** Thanks, Mr. Chair. I support full coverage for our Metis residents, but does this come up in other jurisdictions? Does it come up at FPT, Federal-Provincial-Territorial meetings of the health ministers? It is not being discussed or addressed in

any way? Thanks, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Minister.

**HON. GLEN ABERNETHY:** Thank you, Mr. Chair. Mr. Chair, I have had the conversation with my FPT colleagues, as well. They obviously would like to see it happen as a result of the Daniels case. We are in a slightly different position, given that we are already expending money in this area and they are not. We are the only jurisdiction in the country that provides NIHB-equivalent services to Metis people. I just remind the Member the case wasn't just about healthcare. It was about Metis services and all that. We are just a part of that. We raise it all the time, and so do the other PT ministers. Thank you.

**CHAIRPERSON (Mr. Simpson):** Thank you, Minister. Mr. O'Reilly.

**MR. O'REILLY:** Thanks, Mr. Chair. I appreciate the response from the Minister. Is there any likelihood that we are going to be able to recover any of this funding that has been expended over the years from the federal government, or is it too early to say? Thanks, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Minister.

**HON. GLEN ABERNETHY:** Thank you, Mr. Chair. I would love to say yes, but honestly, we have had no indication at this point. I will continue to bring it up. If the opportunity presents itself, I would be happy to explore or discuss back pay on that. Thank you, Mr. Chair.

...

**(later)**

**MR. O'REILLY:** Thanks, Mr. Chair. I just want to ask some questions about non-insured health benefits. We have heard some concerns from the other side of the House about how the federal government is now approaching Indigenous governments directly to fund various services. This money here, so we just essentially deliver these programs and then invoice the federal government for it. Is that how this works? Thanks, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Minister.

**HON. GLEN ABERNETHY:** Thank you, Mr. Chair. We pay up front and then seek reimbursement from NIHB. I would suggest that we do not always get everything that we think we should, so we usually end up coming out of pocket for this, as well, to some degree. Thank you, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Mr. O'Reilly.

**MR. O'REILLY:** Okay, thanks, Mr. Chair. So, because of the concerns I have heard from the other side of the House in terms of federal government sort of going around territorial government to fund Indigenous governments directly, how does this play into

that concern, and what is our government doing to try to ensure good working relationships with our Indigenous governments around programs and services and accountability and transparency, all of those good things? Thanks, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Minister.

**HON. GLEN ABERNETHY:** Thank you, Mr. Chair. Mr. Chair, that is specifically what the deputy minister was talking to in response to, I believe it was, Ms. Green's questions. We have hosted a round table working with our Indigenous partners and the federal government to address those types of concerns, make sure that everybody is on the same page and working together and that the issues of the clients are being brought forward to the ultimate funder, recognizing that we are a delivery agent in this one. Thank you, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Mr. O'Reilly.

**MR. O'REILLY:** Thanks, Mr. Chair. Yes, I think I understood that. So, at this two-day workshop in January, was more than just NIHB discussed or were there other health and social services programming areas discussed? Thanks, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Minister.

**HON. GLEN ABERNETHY:** Thank you, Mr. Chair. Mr. Chair, that meeting was very focused on NIHB. I have been working to set up meetings with our Indigenous partners on a regular basis. We try to do it annually. Last year, it kind of did not happen because we couldn't get everybody together at the same time, but we are planning one for this spring, where we can work on shared priorities, issues that we need to work on together with the federal government but also things we need to do here, in the Northwest Territories. That relationship is very important to us, and we are looking forward to reconvening those meetings. Thank you, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Mr. O'Reilly.

**MR. O'REILLY:** Mr. Chair, I know this has not happened yet, but is the Minister prepared to share some sort of summary or report from the meeting with the standing committee? Thank you, Mr. Chair.

**CHAIRPERSON (Mr. Simpson):** Thank you. Minister.

**HON. GLEN ABERNETHY:** Yes, Mr. Chair.