



## AMENDED MINISTERIAL DIRECTIVE

### Alternate Level of Care Rates MD 2026-02

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#### 1. Directive

Pursuant to section 3.2 of the *Hospital Insurance and Health and Social Services Act* (HIHSSA) all Health and Social Services Authorities (HSSAs) are to charge Alternate Level of Care (ALC) clients, once deemed eligible for long-term care (LTC) via the Territorial Admissions Committee (TAC), a rate in alignment with the LTC bed rate, as per section 11 of the *Hospital Insurance Regulations* under HIHSSA.

#### 2. Background

The Minister has the power to issue a directive to the Territorial board of management or a Board of Management in respect of any matter referred to in HIHSSA (section 3.2).

The *Hospital Insurance Regulations* outline insured services in the NWT, with sections 10 and 11 setting out charges, established by the Minister, that may be made by a hospital to an insured person. This includes an LTC charge in respect of accommodation and meals to the facility providing the care, which is adjusted annually based on the Consumer Price Index (CPI).

ALC clients deemed eligible for LTC by TAC and awaiting placement continue to occupy acute care beds while receiving equivalent services in hospital to what they would receive in an LTC facility.

This Directive replaces Ministerial Directive 2026-02 Alternate Level of Care Rates, signed on February 27, 2026.

#### 3. Purpose

To establish the terms and rates under which HSSAs are to charge ALC clients receiving services in hospital.



#### 4. Definitions

**Alternate Level of Care** means a description used in hospitals to refer to patients who occupy a bed but do not require the intensity of services provided in that care setting.

**Facility** means premises in or from which health services or social services are provided, and equipment in or associated with the premises, or associated with the provision of health services or social services from the premises.

**Health & Social Services Authorities** means the Territorial Health and Social Services Authority established under section 5(1), a Board of Management established under section 10(1) or referred to in subsection 10.2 or 10.3 of the *Hospital Insurance and Health and Social Services Administration Act*, or an organization, agency or firm contracted by the Minister pursuant to section 17 of the *Hospital Insurance and Health and Social Services Administration Act*.

**Hospital** means a facility approved by the Minister offering in-patient or out-patient services, or both, operated for the care of the diseased, injured or sick and includes

- (a) a detoxification centre, and
- (b) a facility providing long-term care and related services,

but does not include

- (c) a tuberculosis hospital or sanatorium,
- (d) a hospital or institution for the mentally ill,
- (e) a home for the aged, or
- (f) an infirmary or other institution providing custodial care.

#### 5. Exceptions

None.

#### 6. Amendment

The Minister may amend this Directive from time to time.

#### 7. Effective Date

This Directive comes into effect on July 1, 2026.



## 8. Review of Directive

This Directive will be reviewed by the Department every 5 years.

<original signed by> \_\_\_\_\_  
Les Semmler  
Minister of Health and Social Services

April 10, 2026 \_\_\_\_\_  
Date